

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE): <input checked="" type="checkbox"/> 29 - DAY PRE-ELECTION <input type="checkbox"/> 11 - DAY PRE-ELECTION <input type="checkbox"/> 20 - DAY POST-ELECTION <input type="checkbox"/> Apr. 15, _____ <input type="checkbox"/> July 15, _____ <input type="checkbox"/> Oct. 15, _____ <input type="checkbox"/> Jan. 15, _____	
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION P.O. Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) www.elec.state.nj.us		Amendment Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
CANDIDATE OR COMMITTEE NAME PUTTING BELMAK FIRST - MAGOVEN, NICOLAY, LEVIS			
STREET ADDRESS 207 SOUTH LAKE DRIVE		For State Use Only	
CITY BELMAK	STATE NJ		ZIP CODE 07719
COUNTY MONMOUTH	ELECTION DISTRICT OR MUNICIPALITY BELMAK		
POLITICAL PARTY, IF ANY DEMOCRAT	OFFICE SOUGHT MAYOR + COUNCIL		
ELECTION DATE	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL	<input type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT

SUMMARY TABLES DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED

TABLE I. RECEIPTS	THIS REPORT	CUMULATIVE TO DATE
1. MONETARY CONTRIBUTIONS / LOANS OF \$300 OR LESS	\$ 3860	\$ 3860
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 2500	\$ 2500
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ 0	\$ 0
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ 0	\$ 0
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ 0	\$ 0
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 6360	\$ 6360
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 6360	\$ 6360
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 3794.87	\$ 3794.87
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 10,154.87	\$ 10,154.87

TABLE II. EXPENDITURES	THIS REPORT	CUMULATIVE TO DATE
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 4742.10	\$ 4742.10
2. DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 0	\$ 0
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ 0	\$ 0
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ 0	\$ 0
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ 0	\$ 0
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ 0	\$ 0
7. SUB TOTAL (ADD LINES 1 THRU 6)	\$ 4742.10	\$ 4742.10
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 4742.10	\$ 4742.10

ALL DONATION AMOUNTS MUST BE REPORTED IN

BELMAR

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME ALEXANDRA MARTIN		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 106 10 th AVE, BELMAR, NJ 07719		EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 7/01/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 50.00
OCCUPATION RETIRED				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 500	DATE(S) RECEIVED 7/1/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 500
OCCUPATION RETIRED				
CONTRIBUTOR NAME BRIAN MARGOVEN		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 287 SOUTH LAKE DRIVE BELMAR, NJ 07719		EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 1000	DATE(S) RECEIVED 8/7/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 1,000.00
OCCUPATION RETIRED				
CONTRIBUTOR NAME MARK LEVIS		EMPLOYER NAME WILHELMSEN SHIPS SERVICE INC		
CONTRIBUTOR ADDRESS 904 13 th AVE, BELMAR, NJ 07719		EMPLOYER ADDRESS 9400 NEW CENTURY DRIVE PASADENA, TX 77507		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 250	DATE(S) RECEIVED 8/14/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 250.00
OCCUPATION ACCOUNT MANAGER				
CONTRIBUTOR NAME NANA MENDEL		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 31 WORTHINGTON AVE. SPRING LAKE, NJ 07762		EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 25	DATE(S) RECEIVED 8/16/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 25
OCCUPATION RETIRED				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 1075.00 1325.00	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ _____	

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME PATRICE TOMLINSON COMBS			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 11 CORN HILL DRIVE MORRISTOWN, NJ 07960			EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 8/16/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 100.00	
OCCUPATION RETIRED					
CONTRIBUTOR NAME NAUCY CUEMAN			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 116 CY PRESS CT HOWELL, NJ 07731-3042			EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 10	DATE(S) RECEIVED 8/16/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 10.00	
OCCUPATION RETIRED					
CONTRIBUTOR NAME CATHY SMOCA			EMPLOYER NAME ROBERT WOOD JOHNSON - RWJBH		
CONTRIBUTOR ADDRESS 33 CEDAR VILLAGE BLVD. BRICK, NJ 08724			EMPLOYER ADDRESS 300 SECOND AVE LONG BRANCH, NJ 07740		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 25	DATE(S) RECEIVED 8/17/2019	AMOUNT(S) RECEIVED THIS PERIOD \$ 25.00	
OCCUPATION CYTOGENETICIST					
CONTRIBUTOR NAME JANET BOURY			EMPLOYER NAME BROOK LINE COLLEGE		
CONTRIBUTOR ADDRESS 8203 W DRAIBI DR, APT 1057 PEORIA, AZ 85383			EMPLOYER ADDRESS 2445 W DUNLAP PHOENIX, AZ 85031		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 25	DATE(S) RECEIVED 8/17/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 25.00	
OCCUPATION NURSE					
CONTRIBUTOR NAME ROBERT McALLISTER			EMPLOYER NAME JP MORGAN		
CONTRIBUTOR ADDRESS 325 EAST 72nd ST. NEW YORK, NY 10021			EMPLOYER ADDRESS 4 NEW YORK PLAZA NEW YORK, NY 10004		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 8/17/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 100.00	
OCCUPATION ATTORNEY					
(COMPLETE THIS LINE FOR EVERY PAGE USED)			TOTAL, THIS PAGE	\$ 260.00	
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ _____	

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME ANTHONY LOFFREDO			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 187 PARK AVE			EMPLOYER ADDRESS		
EMERSON, NJ 07630					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 8/17/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 100.00	
OCCUPATION RETIRED					
CONTRIBUTOR NAME BARBARA LENDY			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 223 BEACON BLVD.			EMPLOYER ADDRESS		
SEA GIRT, NJ 08750					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 8/18/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 50.00	
OCCUPATION RETIRED					
CONTRIBUTOR NAME GLORIA LEYH ADLER			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 501 GRASSMERE AVE			EMPLOYER ADDRESS		
INTERLAKEN, NJ 07712					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 25	DATE(S) RECEIVED 8/24/2018	AMOUNT(S) RECEIVED THIS PERIOD \$ 25.00	
OCCUPATION RETIRED					
CONTRIBUTOR NAME JAMES MCCUE			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 510 ISLAND CIRCLE E.			EMPLOYER ADDRESS		
ST. HELENA ISLAND, SC 29920					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 8/28/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION RETIRED					
CONTRIBUTOR NAME TOM VOLKER			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 527 8th AVE			EMPLOYER ADDRESS		
BELMAN, NJ 07719					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 8/30/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50	
OCCUPATION RETIRED					

(COMPLETE THIS LINE FOR EVERY PAGE USED)	TOTAL, THIS PAGE	\$ 325
(COMPLETE THIS LINE FOR LAST PAGE USED)	GRAND TOTAL	\$

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME GEORGE LEVIS			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 306 N SHORE CIRCLE			EMPLOYER ADDRESS		
NORTH, VA 23128					
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 8/31/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION RETIRED					
CONTRIBUTOR NAME MATTHEW FINIZIO			EMPLOYER NAME THE MAXES PROPERTY HOLDINGS LLC		
CONTRIBUTOR ADDRESS 1218 BRIARWOOD RD,			EMPLOYER ADDRESS 1218 BRIARWOOD RD		
BELMAR, NJ 07719			BELMAR, NJ 07719		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$ 500	
OCCUPATION SELF-EMPLOYED - PROPERTY MGMT					
CONTRIBUTOR NAME KENNETH SHINN			EMPLOYER NAME KENNETH SHINN		
CONTRIBUTOR ADDRESS 301 SOUTH BLVD			EMPLOYER ADDRESS 301 SOUTH BLVD		
SPRING LAKE, NJ 07762			SPRING LAKE, NJ 07762		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 150	DATE(S) RECEIVED 9/6/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 150	
OCCUPATION SELF EMPLOYED - CRANE OPERATOR					
CONTRIBUTOR NAME DONNA FALK			EMPLOYER NAME MALAPAPAN-ENGLISH TOWN REG. SCHOOL		
CONTRIBUTOR ADDRESS 506 11th AVE			EMPLOYER ADDRESS 54 MAIN ST		
BELMAR, NJ 07719			ENGLISHTOWN, NJ 07726		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/8/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50	
OCCUPATION TEACHER					
CONTRIBUTOR NAME MARIA BONDINARO			EMPLOYER NAME SELF EMPLOYED CONSULTANT		
CONTRIBUTOR ADDRESS 1246 PINE TREE WAY			EMPLOYER ADDRESS 1246 PINE TREE WAY		
BELMAR, NJ 07719			BELMAR, NJ 07719		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION SOCIAL WORKER - SELF EMPLOYED					
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 900		
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$		

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME POLLY DELLOIO			EMPLOYER NAME ROBERT MORRIS UNIV		
CONTRIBUTOR ADDRESS 2064 LAWRENCEVILLE RD			EMPLOYER ADDRESS 6001 UNIVERSITY BLVD		
LAWRENCE TWP, NJ 08648			MOON TWP, PA 15108		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/4/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION ADJUST INSTRUCTOR					
CONTRIBUTOR NAME SYDNEE DEWIE-WHALLEY			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 400 MORRIS AVE SPRING LAKE BECKTAR , NJ 07763			EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION RETIRED					
CONTRIBUTOR NAME TOM LEPECH			EMPLOYER NAME ARA-WOODBRIDGE DIALYSIS		
CONTRIBUTOR ADDRESS 400 MORRIS AVE			EMPLOYER ADDRESS 345 MAIN ST		
SPRING LAKE, NJ 07763			WOODBRIDGE, NJ 07095		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION SOCIAL WORKER					
CONTRIBUTOR NAME LAURA MATOS			EMPLOYER NAME KIVVIT		
CONTRIBUTOR ADDRESS 515 9 th AVE			EMPLOYER ADDRESS 608-612 COOKMAN AVE, UNHHS		
BELMAR, NJ 07719			ASBURY PARK, NJ 07712		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 200	DATE(S) RECEIVED 9/6/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 200	
OCCUPATION GENERAL MANAGER/NJ					
CONTRIBUTOR NAME CLAIRE DEICRE			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 1017 14 th AVE			EMPLOYER ADDRESS		
BELMAR, NJ 07719					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION RETIRED					
(COMPLETE THIS LINE FOR EVERY PAGE USED)			TOTAL, THIS PAGE	\$ 600	
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$	

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME SANDRA TAYLOR			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 302 11 th AVE			EMPLOYER ADDRESS		
BELMAR, NJ 07719					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50	
OCCUPATION RETIRED					
CONTRIBUTOR NAME MATTHEW DOHERTY			EMPLOYER NAME NJ CASINO REINVESTMENT AUTHORITY		
CONTRIBUTOR ADDRESS 115 INLET TERRACE			EMPLOYER ADDRESS 15 S PENN. AVE		
BELMAR, NJ 07719			ATLANTIC CITY, NJ 08401		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 1000	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 1000	
OCCUPATION DEPUTY EXEC. DIRECTOR					
CONTRIBUTOR NAME MICHAEL CASSELY			EMPLOYER NAME		
CONTRIBUTOR ADDRESS 815 12 th AVE			EMPLOYER ADDRESS		
BELMAR, NJ 07719					
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50	
OCCUPATION RETIRED					
CONTRIBUTOR NAME KATHLEEN CASSELY			EMPLOYER NAME MARGAN-ABERDEEN SCHOOL DISTRICT		
CONTRIBUTOR ADDRESS 816 13 th AVE			EMPLOYER ADDRESS ONE CREST WAY		
BELMAR, NJ 07719			ABERDEEN, NJ 07747		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50	
OCCUPATION TEACHER					
CONTRIBUTOR NAME ALOIS NEVHAUS			EMPLOYER NAME ACN GRAPHICS		
CONTRIBUTOR ADDRESS 1602 BIRCHWOOD LN			EMPLOYER ADDRESS PO BOX 1598		
WALL TWP, NJ 07719			WALL, NJ 07719		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50	
OCCUPATION ACN GRAPHICS OWNER					
(COMPLETE THIS LINE FOR EVERY PAGE USED)			TOTAL, THIS PAGE	\$ 1200	
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$	

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME MICHAEL COSTELLO		EMPLOYER NAME MONROE TOWNSHIP		
CONTRIBUTOR ADDRESS 22 GARVEY DR. MONROETWP NJ 08831		EMPLOYER ADDRESS 467 SPOTSWOOD ENGLISHTOWN Rd MONROE TWP NJ 08831		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50
OCCUPATION FIRE COMMISSIONER				
CONTRIBUTOR NAME GRACE PITZ BERARD		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 1902 SURF AVE BELMAN, NJ 07719		EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100
OCCUPATION RETIRED				
CONTRIBUTOR NAME PATRICIA FAUGNO		EMPLOYER NAME BELMAR LIBRARY		
CONTRIBUTOR ADDRESS 1902 SURF AVE BELMAR, NJ 07719		EMPLOYER ADDRESS 517 10 th AVE BELMAR NJ 07719		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50
OCCUPATION LIBRARY ASSISTANT				
CONTRIBUTOR NAME JOHN HUTCHINSON		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 519 6 th AVE BELMAR		EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 200	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 200
OCCUPATION RETIRED				
CONTRIBUTOR NAME EILEEN MICHAELS		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 15 SEAVIEW AVE OCEAN GROVE, NJ 07756		EMPLOYER ADDRESS		
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 50
OCCUPATION RETIRED				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 450	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$	

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SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME MARY ANN FUREY		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 601 8 th AVE		EMPLOYER ADDRESS		
BELMAN, NJ 07719				
<input type="checkbox"/> CHECK IF CURRENCY	AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION RETIRED				
CONTRIBUTOR NAME MARY FOSTER SCHOLLES		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 10 PAPE DR		EMPLOYER ADDRESS		
ATLANTIC HIGHLANDS, NJ 07716				
<input type="checkbox"/> CHECK IF CURRENCY	AGGREGATE AMOUNT \$ 300	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 300	
OCCUPATION RETIRED				
CONTRIBUTOR NAME PATRICK DURKIN		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 112 DOCK RD		EMPLOYER ADDRESS		
BRICK, NJ 08783				
<input checked="" type="checkbox"/> CHECK IF CURRENCY	AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION RETIRED				
CONTRIBUTOR NAME PRESIDENT BO PARKER - MILLENNIUM STRATEGIES		EMPLOYER NAME MILLENNIUM STRATEGIES		
CONTRIBUTOR ADDRESS 60 COLUMBIA RD, STE 230		EMPLOYER ADDRESS 60 COLUMBIA COLUMBIA RD, STE 230		
MORRISTOWN, NJ 07960		MORRISTOWN, NJ 07960		
<input type="checkbox"/> CHECK IF CURRENCY	AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION PRESIDENT OF COMPANY				
CONTRIBUTOR NAME WILLIAM G. MCGOWAN, ESQ		EMPLOYER NAME HOAGLAND MORAN, DUNST, & DOUKAS LLP		
CONTRIBUTOR ADDRESS IRVING RD # 16		EMPLOYER ADDRESS 40 PATTERSON ST, PO BOX 488		
SEA BRIGHT, NJ 07760		NEW BRUNSWICK, NJ 08903		
<input type="checkbox"/> CHECK IF CURRENCY	AGGREGATE AMOUNT \$ 300	DATE(S) RECEIVED 9/5/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 300	
OCCUPATION SELF EMPLOYED LAWYER				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 900	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$	

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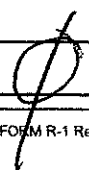
SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions


CONTRIBUTOR NAME KAREN CAREW		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 110 4 th AVE BELMAR, NJ 07719		EMPLOYER ADDRESS		
<input type="checkbox"/> CHECK IF CURRENCY <input checked="" type="checkbox"/> AGGREGATE AMOUNT \$ 100		DATE(S) RECEIVED 9/26/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 100	
OCCUPATION RETIRED				
CONTRIBUTOR NAME MICHAEL HART		EMPLOYER NAME LIBERTY HELICOPTOR HHI Helicopt		
CONTRIBUTOR ADDRESS 22 SEASIDE LAVE BELMAR, NJ 07719		EMPLOYER ADDRESS 165 WESTERN RD KEARNY, NJ 07032		
<input type="checkbox"/> CHECK IF CURRENCY <input checked="" type="checkbox"/> AGGREGATE AMOUNT \$ 300		DATE(S) RECEIVED 9/26/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 300	
OCCUPATION DIRECTOR OF MARKETING				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
<input type="checkbox"/> CHECK IF CURRENCY <input type="checkbox"/> AGGREGATE AMOUNT \$		DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$	
OCCUPATION				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
<input type="checkbox"/> CHECK IF CURRENCY <input type="checkbox"/> AGGREGATE AMOUNT \$		DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$	
OCCUPATION				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
<input type="checkbox"/> CHECK IF CURRENCY <input type="checkbox"/> AGGREGATE AMOUNT \$		DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$	
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 400.00	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 6360.00	

SCHEDULE B
In-Kind Contributions in Excess of \$300

CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$




SCHEDULE C
Loans Received in Excess of \$300 and All Currency Loans

LENDER NAME		EMPLOYER NAME	
LENDER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION			
CO-SIGNER NAME		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD	
		\$	
DATE(S) RECEIVED	AGGREGATE AMOUNT	CHECK IF CURRENCY <input type="checkbox"/>	
	\$		
LENDER NAME		EMPLOYER NAME	
LENDER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION			
CO-SIGNER NAME		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD	
		\$	
DATE(S) RECEIVED	AGGREGATE AMOUNT	CHECK IF CURRENCY <input type="checkbox"/>	
	\$		
TOTAL AMOUNT OF LOANS RECEIVED THIS REPORT PERIOD		\$ 	

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
			\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 

1/3

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
7/3/18	6002	ACN GRAPHICS PO BOX 1528, WALK, NJ 07719	WALK CARDS	\$ 754.38	\$ 754.38	\$
8/13/18	ETF	BELMAN SHOPPTE 1901 HWY 25, WALK, NJ 07719	REFRESHMENTS FOR MEETING	36.94	36.94	
8/14/18	ETF	JONATHAN - BOW LIQUORS 1801 HWY 35, WALK NJ 07719	REFRESHMENTS FOR MEETING	58.06	58.06	
8/16/18	ETF	EMERALD MARKET PO BOX 16122 COLLINGS ST WEST VICTORIA, AUSTRALIA 3007	WORDPRESS PLUGINS FOR WEBSITE	61.00	61.00	
8/17/18	ETF	GOPADDT.COM 219 17455 N HAYDEN RD SCOTSDALE AZ 85260	WEBSITE	59.13	59.13	
8/28/18	ETF	STICKERS + BANNERS 9770 PEACHTREE CREST DR. DULUTH, GA 30097	BANNERS	53.64	53.64	
8/27/18	ETF	STAPLES 2145 HWY 35 SEABRIGHT, NJ 08750	COPIES	15.44	15.44	
8/27/18	ETF	STAPLES 2145 HWY 35 SEABRIGHT, NJ 08750	COPIES	149.06	149.06	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 1187.65	\$ 1187.65
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$	\$

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

2/3

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
9/4/18	ETF	MAX'S LIQUOR 116 3RD AVE #435 DEPTUNE CITY, NJ 07753	FUNDRAISER	\$ 108.68	\$ 108.68	\$
9/5/18	ETF			35.69	35.69	
9/9/18	ETF	STREET SHOP 116 3RD AVE #435 DEPTUNE CITY, NJ 07753	FUNDRAISER	101.39	101.39	
9/16/18	ETF			80.95	80.95	
9/5/18	ETF	MIDWAY ICE 1700 NORTON ST DEPTUNE CITY, NJ 07753	FUNDRAISER	16.00	16.00	
9/7/18	1003	MINUTE MAN PRESS 1818 HAWES WALK, NJ 07719	MEET + GREET INVITATIONS	127.95	127.95	
9/6/18	ETF	US Political 1250 HST NW #200 WASHINGTON, DC 20005	VIDEO ADS	\$ 1,125	\$ 1,125	
9/21/18	ETF	CAPITOL PROMOTIONS 246 N HESWICK AVE GLENSIDE, PA 19038	STAMP SIGNS	\$ 972	\$ 972	
9/16/18	ETF	VAUTIV 8500 GOU HILL DR SPRINGMESH, NJ 07767	ACTUATE COSTS	17.10	17.10	
9/16/18	ETF			6.92	6.92	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 2557.60	\$ 2557.60	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				\$	\$	\$

8/13

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
10/2/19	1004	ART GRAPHICS PO BOX 1528 WALL, CT 07719	MAILING	\$ 990.77	\$ 990.77	\$
10/4/18	ETF	VANTU 8500 BOVHILL DRIVE STATES 104 07427	ACT BLUE COSTS	6.00	6.00	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 996.77	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 9742.10	\$

SCHEDULE 2(D) - DISBURSEMENTS

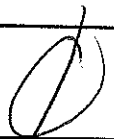
Other

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
				\$	\$	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$	\$	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				\$	\$	\$

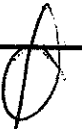
SCHEDULE 3(D) - DISBURSEMENTS
Contributions made to other Candidates/Committees

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
				\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				
TOTAL, THIS PAGE				
<p>COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:</p> <p>SCHEDULE 3(D) GRAND TOTAL</p> <p>ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)</p> <p>GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES</p>				
				1. \$
				2. \$
				3. \$

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
				\$
TOTAL OUTSTANDING OBLIGATIONS				\$ 

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
					\$
SCHEDULE F TOTAL					\$ 

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$



STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

Opening Balance, this report (Insert closing balance of last report, or, if this is the first report filed by this entity for this election, insert zero.)	\$ <u>0</u>
Funds Transferred from Prior Campaign	\$ <u>3794.87</u>
Deposits (Include interest)	\$ <u>6360.00</u>
Disbursements (Include bank charges)	\$ <u>4742.10</u>
Closing Balance, this Report	\$ <u>5412.77</u>
<u>KEARNEY BANK</u>	<u>PUTTING BELMAR FIRST</u>
NAME OF BANK OR DEPOSITORY	NAME OF ACCOUNT
<u>611 MAIN ST, BELMAR, NJ 07719</u>	
ADDRESS OF BANK OR DEPOSITORY	
<u>BRIAN MAGOVERN</u>	<u>732-773-0097</u>
NAME OF TREASURER	*TELEPHONE NUMBER (DAY)
<u>207 SOUTH LAKE DRIVE, BELMAR, NJ 07719</u>	
ADDRESS OF TREASURER	

CERTIFICATION

I certify that the statements on this document are true, and that the contribution amounts received conform with the limitations designated by law. I am aware that if any of the statements are willfully false, I may be subject to punishment.

<u>10/5/18</u> DATE	<u>BRIAN MAGOVERN</u> PRINT FULL NAME (CANDIDATE)	<u>Brian Magovern</u> SIGNATURE (CANDIDATE)
<u>10/5/18</u> DATE	<u>JENNIFER NICOLAY</u> PRINT FULL NAME (CANDIDATE)	<u>Jennifer Nicolay</u> SIGNATURE (CANDIDATE)
<u>10/5/18</u> DATE	<u>MARK LEVINS</u> PRINT FULL NAME (CANDIDATE)	<u>[Signature]</u> SIGNATURE (CANDIDATE)
<u>10/5/18</u> DATE	<u>BRIAN MAGOVERN</u> PRINT FULL NAME (TREASURER)	<u>Brian Magovern</u> SIGNATURE (TREASURER)

Treasurers for gubernatorial and legislative candidates are required to receive training with the New Jersey Election Law Enforcement Commission. Check here if you have completed the training and enter your Treasurer Training ID# _____

DECLARATION OF FINAL REPORT

If this is the final report, sign applicable Declaration below as well as Certification above. Chapter 65 of the Laws of 1993 requires that all filing entities continue to file reports with the Commission until all campaign business is wound up and the fund is dissolved.

I certify that all contributions or other monies received by this election fund have been disbursed, that there are no outstanding loans or other obligations, and that the election fund has wound up its business and has been dissolved.

_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (TREASURER)	_____ SIGNATURE (TREASURER)