



CANDIDATE - SWORN STATEMENT

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)
Website: www.elec.nj.gov

FORM A-1

ELEC Received
Oct 03, 2020
11:17 AM

Amendment

Candidate Name: GERALD A. BUCCAFUSCO
Office Sought: COUNCIL OR MUNICIPAL OFFICE
Candidate Committee Name: BUCCAFUSCO FOR COUNCIL
Street Address: 409 5TH AVENUE
City: BELMAR, State: NJ, Zip Code: 07719
*(Area Code) Day Telephone: 908-337-4330, *(Area Code) Eve. Telephone: 732-681-1301
Committee Email: GERALDBUCCAFUSCO@GMAIL.COM, Committee Website: GERALDBUCCAFUSCO.COM
Election Type: General, Election Date: 11/03/2020
County: MONMOUTH COUNTY, Legal Name of Election District or Municipality: BELMAR BOROUGH, Political Party: INDEPENDENT

I, the undersigned, do hereby certify as follows:

- 1. The total amount expended or to be expended on behalf of my candidacy by me or by any other candidate, person, or committee shall be zero, or shall not, in the aggregate, exceed \$5,100 for this election.
2. I am aware that in the event the total amount expended or to be expended on behalf of my candidacy by me or by any other candidate, person or committee shall, in the aggregate, exceed \$5,100, I am required to file a "Report of Contributions and Expenditures," Form R-1, on each subsequent reporting date.
3. I am aware that if I receive a contribution in excess of \$300 in the aggregate from one source in an election or a currency (cash) contribution in any amount, I am required to report the contribution to the Commission on "Supplemental Contributor Information," Form C-1, including the identity of the source and the aggregate total of contributions therefrom, and, if the contributor is an individual, his/her occupation and the name and address of his/her employer.
4. I am aware that if I receive a contribution in excess of \$1,600 in the aggregate from one source starting with the 13th day before the election up to, and including, the day of the election, I am required to notify the Commission in writing on the "Supplemental Contributor Information," Form C-1, within 48 hours of receipt of the contribution and to identify the source and the aggregate amount received therefrom during the period, and, if the contributor is an individual, his/her occupation and the name and address of his/her employer.
5. I am aware that if I make, incur, or authorize an expenditure of money or other thing of value in excess of \$1,600 in the aggregate to support or defeat a candidate or public question, starting with the 13th day before the election up to and including the day of the election, I am required to notify the Commission in writing within 48 hours of the expenditure on the "Supplemental Expenditure Information," Form E-1.
6. I am aware that I, as a candidate, am required to designate a campaign treasurer and a campaign depository and that I am required to file with the Commission a "Certificate of Organization and Designation of Campaign Treasurer and Depository," Form D-1, no later than 10 days after receipt of any contribution on behalf of my candidacy or 10 days after making any expenditure on behalf of my candidacy, whichever comes first.

CANDIDATE CERTIFICATION: I certify that the statements on this document are true. I am aware that if any of the statements are willfully false, I may be subject to punishment.

Registration Number ***** PIN *****
Candidate GERALD A BUCCAFUSCO Date 10/03/2020



SUPPLEMENTAL CONTRIBUTOR INFORMATION

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FORM C-1

ELEC Received
Oct 04, 2020
12:58 PM

Amendment

CONTRIBUTIONS REPORT TYPE (Select One)

- Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received a contribution in excess of \$ 300 in the aggregate from one source in the election, or any currency (cash) contributions.
Committee receiving a contribution in excess of \$ 1,600 in the aggregate from one source starting with the 13th day before the election up to, and including the day of the election (48-Hour Notice).

SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION

Candidate(s) Name: GERALD A. BUCCAFUSCO
Committee Name: BUCCAFUSCO FOR COUNCIL
Street Address: 409 5TH AVENUE
Office Sought: COUNCIL OR MUNICIPAL OFFICE
City: BELMAR, State: NJ, Zip Code: 07719, Day Telephone: 908-337-4330, Evening Telephone: 732-681-1301
Election Type: General, Election Date: 11/03/2020
County: MONMOUTH COUNTY, Legal Name of Election District or Municipality: BELMAR BOROUGH, Political Party: INDEPENDENT

SECTION II. CONTRIBUTION INFORMATION (Receipt Types: A = Currency or Check, B = In-Kind, C = Loan)

Three contribution entries for GERALD A. BUCCAFUSCO and ELAINE GALLO. Each entry includes date received, address, occupation, receipt type (A), and amount. Total amounts are \$500.00, \$250.00, and \$150.00 respectively.

Grand Total: \$900.00

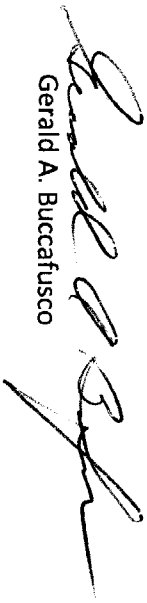
Registration Number ***** PIN *****
Candidate or Treasurer GERALD A BUCCAFUSCO Date 10/04/2020

Campaign Contributions

Date	Type	From	Address	Amount
7/9/2020	Check	Loan from Gerald A. Buccafusco	409 5th Ave., Belmar, NJ 07719	\$500.00
7/25/2020	Credit	Mark Pfeifer - Anedot	319 5th Ave., Belmar, NJ 07719	\$200.00
7/25/2020	Credit	Scott Kenney - Anedot	411 5th Ave., Belmar, NJ 07719	\$250.00
8/20/2020	Check	Elaine Gallo	661 Townsend Place, N. Plainfield, NJ 07063	\$250.00
8/23/2020	Credit	Elaine Gallo - Anedot	661 Townsend Place, N. Plainfield, NJ 07063	\$150.00
10/1/2020	Credit	Mark Levis - Anedot	904 13th Ave., Belmar, NJ 07719	\$100.00

\$1,450.00

I here by certify that I have peronally inspected the records of contributions made to my campaign and the information on this report is accurate in all material respects.


 Gerald A. Buccafusco

10/5/2020