



**JOINT CANDIDATES COMMITTEE - CERTIFICATE OF ORGANIZATION AND DESIGNATION OF CAMPAIGN TREASURER AND DEPOSITORY**

**FORM D-2**

**FOR STATE USE ONLY**

**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/

**PLEASE TYPE OR PRINT**

Candidate Name/Office Sought <i>JAMES DEAN - MAYOR</i>		Candidate Name/Office Sought	
Candidate Name/Office Sought <i>MICHAEL SEEBECK - COUNCIL</i>		Candidate Name/Office Sought	
Joint Candidates Committee Name <i>DEAN - SEEBECK 2014</i>			
Committee Address (Number and Street, City, State, Zip Code) <i>P.O. Box 391, BELMAR, N.J. 07719</i>			
*(Area) Day Telephone <i>732-681-6791</i>		*(Area) Evening Telephone <i>732-681-6791</i>	
County <i>MONTMOUTH</i>	Legal Name of Election District or Municipality <i>BOROUGH OF BELMAR</i>		
Election Date <i>JUNE 3, 2014</i>	Political Party, if any <i>REPUBLICAN</i>		
Election Type: (CHECK ONE) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> May Municipal <input type="checkbox"/> Run-Off <input type="checkbox"/> School <input type="checkbox"/> Fire District <input type="checkbox"/> Special			Amendment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**CHAIRPERSON**

Name		
Mailing Address		
City	State	Zip Code
*(Area) Day Telephone		*(Area) Evening Telephone

**TREASURER**

Name <i>JOHN YANNUZZI</i>		
Mailing Address <i>229 16TH AVENUE</i>		
City <i>BELMAR</i>	State <i>NEW JERSEY</i>	Zip Code <i>07719</i>
*(Area) Day Telephone <i>732-681-6791</i>		*(Area) Evening Telephone
Resident Address <i>229 16TH AVENUE</i>		
City <i>BELMAR</i>	State <i>NEW JERSEY</i>	Zip Code <i>07719</i>

**DEPOSITORY INFORMATION**

Name of Bank or Depository <i>OCEAN FIRST BANK</i>		
Mailing Address <i>2401 ROUTE 71</i>		
City <i>SPRING LAKE HEIGHTS</i>	State <i>NEW JERSEY</i>	Zip Code <i>07762</i>
(Area) Day Telephone <i>1-888-623-2633</i>		
Account Name <i>DEAN - SEEBECK 2014</i>	Account Number <i>13006007678</i>	

**LIST THE NAME(S), MAILING ADDRESS(ES) AND TELEPHONE NUMBER(S) OF ANY PERSON(S) AUTHORIZED TO SIGN CHECKS OR OTHERWISE MAKE TRANSACTIONS**

Name <i>JOHN YANNUZZI</i>		
Mailing Address <i>129 16<sup>TH</sup> AVENUE</i>		
City <i>BELMAR</i>	State <i>NEW JERSEY</i>	Zip Code <i>07719</i>
* (Area) Day Telephone <i>732-681-6791</i>	* (Area) Evening Telephone <i>732-681-6791</i>	

Name		
Mailing Address		
City	State	Zip Code
* (Area) Day Telephone	* (Area) Evening Telephone	
Name		
Mailing Address		
City	State	Zip Code
* (Area) Day Telephone	* (Area) Evening Telephone	

**CANDIDATE CERTIFICATION**

I certify that the statements on this document are true. I further certify that I have not, and will not during the existence of the joint candidates committee, establish, authorize the establishment of, maintain, or participate directly or indirectly in the management or control of any political committee or continuing political committee. I am aware that if any of the statements are willfully false, I may be subject to punishment.

*April 9, 2014*

DATE

*April 9, 2014*

DATE

DATE

DATE

*JAMES BEAN*

PRINT FULL NAME (CANDIDATE)

*MICHAEL SEBECK*

PRINT FULL NAME (CANDIDATE)

PRINT FULL NAME (CANDIDATE)

PRINT FULL NAME (CANDIDATE)

*J. J. Be...*

SIGNATURE (CANDIDATE)

*Michael Sebeck*

SIGNATURE (CANDIDATE)

SIGNATURE (CANDIDATE)

SIGNATURE (CANDIDATE)

**CHAIRPERSON/TREASURER 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.

DATE

*April 9, 2014*

DATE

PRINT FULL NAME (CHAIRPERSON)

*JOHN YANNUZZI*

PRINT FULL NAME (TREASURER)

SIGNATURE (CHAIRPERSON)

*John Yannuzzi*

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# \_\_\_\_\_.