



SINGLE CANDIDATE COMMITTEE - CERTIFICATE OF ORGANIZATION AND DESIGNATION OF CAMPAIGN TREASURER AND DEPOSITORY

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/

FORM D-1
FOR STATE USE ONLY

ELEC RECEIVED
JAN 26 2016

PLEASE TYPE OR PRINT

Candidate Name
 Michael Pagan

Candidate Committee Name
 Pagan For Council

Address (Number and Street, City, State, Zip Code)
 665 River Road Teaneck, NJ 07666

*(Area) Day Telephone: 201 543-7671 *(Area) Evening Telephone: 201 543-7671

County: Bergen Legal Name of Election District or Municipality: Teaneck Township

Election Date: May 10, 2016 Political Party, if any: Office Sought:

Election Type: (CHECK ONE)
 Primary General May Municipal Run-Off School Fire District Special Amendment Yes No

CHAIRPERSON

Name: Sarah Rappaport

Mailing Address: 747 Mildred Street

City: Teaneck State: NJ Zip Code: 07666

*(Area) Day Telephone: 201 638-4716 *(Area) Evening Telephone: 201 638-4716

TREASURER

Name: Jacqueline Wilson

Mailing Address: 1261 Beaumont Avenue

City: Teaneck State: NJ Zip Code: 07666

*(Area) Day Telephone: 917-763-4939 *(Area) Evening Telephone: 917-763-4939

Resident Address: 1261 Beaumont Avenue

City: Teaneck State: NJ Zip Code: 07666

DEPOSITORY INFORMATION

Name of Bank or Depository: Dorian Bank

Mailing Address: 500 Cedar Lane

City: Teaneck State: NJ Zip Code: 07666

(Area) Day Telephone: 1-888-674-8264

Account Name: Pagan For Council Account Number: 03 9002738

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>Michael Pagan</i>		
Mailing Address <i>665 River Road</i>		
City <i>Teaneck</i>	State <i>NJ</i>	Zip Code <i>07666</i>
*(Area) Day Telephone <i>201-543-7671</i>		*(Area) Evening Telephone <i>201-543-7671</i>
Name <i>Sarah Rappaport</i>		
Mailing Address <i>747 Mildred Street</i>		
City <i>Teaneck</i>	State <i>NJ</i>	Zip Code <i>07666</i>
*(Area) Day Telephone <i>201-638-4716</i>		*(Area) Evening Telephone <i>201-638-4716</i>
Name <i>Jacqueline Wilson</i>		
Mailing Address <i>1261 Beaumont Avenue</i>		
City <i>Teaneck</i>	State <i>NJ</i>	Zip Code <i>07666</i>
*(Area) Day Telephone <i>917-763-4939</i>		*(Area) Evening Telephone <i>917-763-4939</i>

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 candidate 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.

1/14/16 *Michael Pagan* *[Signature]*
DATE PRINT FULL NAME (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.

Jan. 20, 2016 *Sarah W. Rappaport* *[Signature]*
DATE PRINT FULL NAME (CHAIRPERSON) SIGNATURE (CHAIRPERSON)

Jan. 19, 2016 *Jacqueline Wilson* *[Signature]*
DATE PRINT FULL NAME (TREASURER) 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# _____.

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"/> For State Use Only ELEC RECEIVED APR 13 2016	
CANDIDATE OR COMMITTEE NAME <i>Pagan For Council</i>			
STREET ADDRESS <i>665 River Road</i>			
CITY <i>Teaneck</i>	STATE <i>NJ</i>		ZIP CODE <i>07666</i>
COUNTY <i>Bergen</i>	ELECTION DISTRICT OR MUNICIPALITY <i>Teaneck</i>		
POLITICAL PARTY, IF ANY <i>Democratic</i>	OFFICE SOUGHT <i>Council</i>		
ELECTION DATE <i>May 10, 2016</i>	ELECTION TYPE (CHECK ONE)	<input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> RUN-OFF <input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT <input type="checkbox"/> SPECIAL	
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		\$ <i>7829.41</i>	\$ <i>7829.41</i>
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]		\$ <i>1750.00</i>	\$ <i>1750.00</i>
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS		\$ <i>0</i>	\$ <i>0</i>
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]		\$ <i>0</i>	\$ <i>0</i>
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]		\$ <i>0</i>	\$ <i>0</i>
6. SUB TOTAL (ADD LINES 1 THRU 5)		\$ <i>9579.41</i>	\$ <i>9579.41</i>
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)		\$ <i>0</i>	\$ <i>0</i>
8. TOTAL CONTRIBUTIONS		\$ <i>9579.41</i>	\$ <i>9579.41</i>
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)		\$ <i>0</i>	\$ <i>0</i>
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)		\$ <i>9579.41</i>	\$ <i>9579.41</i>
TABLE II. EXPENDITURES			
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]		\$ <i>4187.57</i>	\$ <i>4187.57</i>
2. DISBURSEMENTS - OTHER [Schedule 2(D)]		\$ <i>254.96</i>	\$ <i>254.96</i>
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]		\$ <i>0</i>	\$ <i>0</i>
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]		\$ <i>0</i>	\$ <i>0</i>
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)		\$ <i>0</i>	\$ <i>0</i>
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)		\$ <i>0</i>	\$ <i>0</i>
7. SUB TOTAL (ADD LINES 1 THRU 6)		\$ <i>4442.53</i>	\$ <i>4442.53</i>
8. REFUNDED DISBURSEMENTS [Schedule F] (-)		\$ <i>0</i>	\$ <i>0</i>
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)		\$ <i>4442.53</i>	\$ <i>4442.53</i>

SCHEDULE A

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

CONTRIBUTOR NAME Alex Morales			EMPLOYER NAME Bergen County Board of Social Service	
CONTRIBUTOR ADDRESS 690 Main St			EMPLOYER ADDRESS 218 Route 17 North	
Metuchen, NJ 08840-1443			Rochelle Park, NJ	
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 3/1/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00
OCCUPATION Human Services				
CONTRIBUTOR NAME Xeno Psi, LLC			EMPLOYER NAME	
CONTRIBUTOR ADDRESS 60 Broad St. 30th Floor			EMPLOYER ADDRESS	
New York, N.Y. 10004				
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 750.00	DATE(S) RECEIVED 2/19/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 750.00
OCCUPATION n/a				
CONTRIBUTOR NAME Robert G. Esposito			EMPLOYER NAME Bergen County	
CONTRIBUTOR ADDRESS 6 Arrowhead Lane			EMPLOYER ADDRESS 1 Bergen County Plaza	
Saddle River, NJ 07458			Hawkenstack, NJ	
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/19/2016	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION Bergen County Director of Community Development			4/6/2016	500.00
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
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	
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	\$ 1,750.00	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 1,750.00	

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
2/28/16	091	Sarah Rappoport 747 Mildred St. Teaneck, NJ 07666	Expenses for Campaign Kick-off Meetings	\$ 300.09	\$ —	\$ —
3/14/16	092	Parano & Associates 492-C Cedar Lane Teaneck, NJ 07666	Field Consulting Services for Campaign	2000.00	—	—
3/21/16	093	Royal Printing Service	250 Lawn Signs	1641.38	—	—
4/8/16	094	Bravo Print + Mail Carlstedt, NJ	Fundraiser Invitations	246.10	—	—
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 4187.57	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 4187.57	\$

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
1/14/16	Debit	AC Deluxe Business Systems Thru Ontario Bank	Check Book, Ledger System	\$ 41.72	\$ —	\$ —
2/16/16	Debit	Staples Hackensack, NJ 07601	Literature Copies & Supplies	193.24	—	—
3/18/16	Debit	Constant Contact (Online Debit)	Email Mktg Sys.	20.00	—	—
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 254.96	\$	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				\$ 254.96	\$	\$
TOTAL, THIS PAGE						
GRAND TOTAL						

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>0</u>
Deposits (Include interest)	\$ <u>9579.41</u>
Disbursements (Include bank charges)	\$ <u>4442.53</u>
Closing Balance, this Report	\$ <u>5136.88</u>
<u>Oritani Bank</u> NAME OF BANK OR DEPOSITORY	<u>Pagan For Council</u> NAME OF ACCOUNT
<u>500 Cedar Lane Teaneck, NJ 07666</u> ADDRESS OF BANK OR DEPOSITORY	
<u>Jacqueline Wilson</u> NAME OF TREASURER	<u>9177634939</u> *TELEPHONE NUMBER (DAY)
<u>1261 Beaumont Avenue Teaneck, NJ 07666</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>April 8, 2016</u> DATE	<u>Michael Pagan</u> PRINT FULL NAME (CANDIDATE)	<u>[Signature]</u> SIGNATURE (CANDIDATE)
_____	_____	_____
_____	_____	_____
<u>April 8, 2016</u> DATE	<u>Jacqueline Wilson</u> PRINT FULL NAME (TREASURER)	<u>[Signature]</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)

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		For State Use Only ELEC RECEIVED APR 22 2016	
CANDIDATE OR COMMITTEE NAME <i>Pagan For Council</i>			
STREET ADDRESS <i>665 River Road</i>			
CITY <i>Teaneck</i>	STATE <i>NJ</i>		ZIP CODE <i>07666</i>
COUNTY <i>Bergen</i>	ELECTION DISTRICT OR MUNICIPALITY <i>Teaneck</i>		
POLITICAL PARTY, IF ANY <i>Democratic</i>	OFFICE SOUGHT <i>Council</i>		
ELECTION DATE <i>May 10, 2016</i>	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT <input type="checkbox"/> SPECIAL	

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	\$ 7829.41	\$ 7829.41
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 1750.00	\$ 1750.00
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)	\$ 9579.41	\$ 9579.41
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 9579.41	\$ 9579.41
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 9579.41	\$ 9579.41

TABLE II. EXPENDITURES	THIS REPORT	CUMULATIVE TO DATE
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 4187.57	\$ 4187.57
2. DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 254.96	\$ 254.96
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)	\$ 4442.53	\$ 4442.53
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 4442.53	\$ 4442.53

SCHEDULE A

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

CONTRIBUTOR NAME <i>Alex Morales</i>		EMPLOYER NAME <i>Bergen County Board of Social Services</i>		
CONTRIBUTOR ADDRESS <i>690 Main St.</i>		EMPLOYER ADDRESS <i>218 Route 17 North</i>		
<i>Metuchen, NJ 08840-1443</i>		<i>Rochelle Park, NJ</i>		
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$ <i>500.00</i>	DATE(S) RECEIVED <i>3/1/2016</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>500.00</i>
OCCUPATION <i>Human Services</i>				
CONTRIBUTOR NAME <i>Michael Aron Flicker</i>		EMPLOYER NAME <i>Xeno Psi, LLC</i>		
CONTRIBUTOR ADDRESS <i>301 W. 57th Street Apt. 46B</i>		EMPLOYER ADDRESS <i>60 Broad Street 30th Floor</i>		
<i>New York, NY 10019</i>		<i>New York, NY 10004</i>		
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$ <i>750.00</i>	DATE(S) RECEIVED <i>2/19/2016</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>750.00</i>
OCCUPATION <i>owner media graphics co</i>				
CONTRIBUTOR NAME <i>Robert G. Esposito</i>		EMPLOYER NAME <i>Bergen County</i>		
CONTRIBUTOR ADDRESS <i>6 Arrowhead Lane</i>		EMPLOYER ADDRESS <i>1 Bergen County Plaza</i>		
<i>Saddle River, NJ 07458</i>		<i>Hackensack, NJ</i>		
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$ <i>500.00</i>	DATE(S) RECEIVED <i>2/19/2016</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>250.00</i>
OCCUPATION <i>Bergen County Director of Community Development</i>		<i>4/6/2016</i> \$ <i>250.00</i>		
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
<input type="checkbox"/>	CHECK IF CURRENCY	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	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <i>1750.00</i>	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ <i>1750.00</i>	

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
2/28/2016	091	Sarah Rappaport 747 Mildred St. Teaneck, NJ 07666	Expenses for Campaign Kick off Meeting	\$ 300.09	\$ —	\$ —
3/14/2016	092	Parano + Associates 492 - C Cedar Lane Teaneck, NJ 07666	Field Consulting Services for Campaign	2,000.00	—	—
3/21/2016	093	Royal Printing Services 495 51st St West New York, NJ 07093	250 Lawn Signs	1,641.38	—	—
4/8/2016	094	Brauo Print + Mail Carlstadt NJ	Fundraiser Invitations	346.10	—	—
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 4,187.57	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 4,187.57	\$

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
1/14/2016	Debit Card	AC Deluxe Business Systems thru Ontario Bank 500 Cedar Lane, Still Hickensack, NJ	Check Book, Ledger System	\$ 41.72	\$ —	\$ —
2/16/2016	Debit card	Staples	Literature Copies and Supplies	193.24	—	—
3/18/2016	Debit Card	Constant Contact (online Debit)	Email Marketing System	20.00	—	—
TOTAL, THIS PAGE				\$ 254.96	\$	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 254.96	\$

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>0</u>
Deposits (Include interest)	\$ <u>9579.41</u>
Disbursements (Include bank charges)	\$ <u>4442.53</u>
Closing Balance, this Report	\$ <u>5136.88</u>

<u>Oritani Bank</u>	<u>Pagan For Council</u>
NAME OF BANK OR DEPOSITORY	NAME OF ACCOUNT
<u>500 Cedar Lane Teaneck, NJ 07666</u>	
ADDRESS OF BANK OR DEPOSITORY	
<u>Jacqueline Wilson</u>	<u>917.763.4939</u>
NAME OF TREASURER	*TELEPHONE NUMBER (DAY)
<u>1261 Beaumont Avenue Teaneck, NJ 07666</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>April 19, 2016</u>	<u>Michael Pagan</u>	<u>[Signature]</u>
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
_____	_____	_____
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
_____	_____	_____
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
<u>April 19, 2016</u>	<u>Jacqueline Wilson</u>	<u>Jacqueline Wilson</u>
DATE	PRINT FULL NAME (TREASURER)	SIGNATURE (TREASURER)

Treasurers for Governatorial 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.

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_____	_____	_____
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)

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE): <input type="checkbox"/> 29 - DAY PRE-ELECTION <input checked="" 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			
CANDIDATE OR COMMITTEE NAME <i>Pagan For Council</i>			
STREET ADDRESS <i>1665 River Rd</i>		Amendment Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
CITY <i>Teaneck</i>	STATE <i>NJ</i>	ZIP CODE <i>07666</i>	
COUNTY <i>Bergen</i>	ELECTION DISTRICT OR MUNICIPALITY		
POLITICAL PARTY, IF ANY <i>Democratic</i>	OFFICE SOUGHT		
ELECTION DATE <i>5/10/2016</i>	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT <input type="checkbox"/> SPECIAL	
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		\$ <i>4531.00</i>	\$ <i>12,360.41</i>
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]		\$ <i>350.00</i>	\$ <i>2100.00</i>
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS		\$ <i>—</i>	\$ <i>—</i>
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]		\$ <i>—</i>	\$ <i>—</i>
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]		\$ <i>—</i>	\$ <i>—</i>
6. SUB TOTAL (ADD LINES 1 THRU 5)		\$ <i>4881.00</i>	\$ <i>14,460.41</i>
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)		\$ <i>—</i>	\$ <i>—</i>
8. TOTAL CONTRIBUTIONS		\$ <i>4881.00</i>	\$ <i>14,460.41</i>
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)		\$ <i>—</i>	\$ <i>—</i>
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)		\$ <i>4881.00</i>	\$ <i>14,460.41</i>
TABLE II. EXPENDITURES			
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]		\$ <i>1617.20</i>	\$ <i>5804.77</i>
2. DISBURSEMENTS - OTHER [Schedule 2(D)]		\$ <i>20.00</i>	\$ <i>274.96</i>
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]		\$	\$
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]		\$	\$
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)		\$	\$
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)		\$	\$
7. SUB TOTAL (ADD LINES 1 THRU 6)		\$ <i>1637.20</i>	\$ <i>6079.73</i>
8. REFUNDED DISBURSEMENTS [Schedule F] (-)		\$ <i>—</i>	\$ <i>—</i>
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)		\$ <i>1637.20</i>	\$ <i>6079.73</i>

SCHEDULE A

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

CONTRIBUTOR NAME <i>Richard Codey</i>			EMPLOYER NAME <i>Election Fund of Senator Codey</i>	
CONTRIBUTOR ADDRESS <i>20 Ford Lane</i>			EMPLOYER ADDRESS <i>347 Mount Pleasant Ave Ste 200</i>	
Roseland, NJ 07068			West Orange, NJ 07052	
CHECK IF CURRENCY <input type="checkbox"/>		AGGREGATE AMOUNT \$ <i>350.00</i>	DATE(S) RECEIVED <i>4-11-16</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>350.00</i>
OCCUPATION <i>Senator</i>				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
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	
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	
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	
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	\$ <i>350.00</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ <i>350.00</i>

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
4-10-16	095	Amurone Ristorante Cedar Lane Teaneck, NJ 07666	Venue for Fund- Raising event	\$ 700	\$ —	\$ —
4-14-16	097	Bergen Media Group 411 Hackensack Ave Hackensack, NJ 07631	Online Advertising	200	—	—
4-15-16	100	North Jersey Media Group	Print media advertising	717.20	—	—
<i>AWARD</i>	<i>D</i>					
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 1617.20	\$ —
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 1617.20	\$ —

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
4-14-16	Debit	Constant Contact Baseline	Email Marketing	\$ 20.00	\$ —	\$ —
<p>(COMPLETE THIS LINE FOR EVERY PAGE USED)</p> <p>TOTAL, THIS PAGE</p>				\$ 20.00	\$ —	\$ —
<p>(COMPLETE THIS LINE FOR LAST PAGE USED)</p> <p>GRAND TOTAL</p>				\$ 20.00	\$ —	\$ —

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.) \$ 5136.88

Funds Transferred from Prior Campaign \$ 0

Deposits (Include interest) \$ 4881.00

Disbursements (Include bank charges) \$ 1637.20

Closing Balance, this Report \$ 8380.68

Aritani Bank Pagan For Council
NAME OF BANK OR DEPOSITORY NAME OF ACCOUNT

500 Cedar Lane Teaneck, NJ 07666
ADDRESS OF BANK OR DEPOSITORY

Jacqueline Wilson 917.763.4939
NAME OF TREASURER *TELEPHONE NUMBER (DAY)

1261 Beaumont Ave Teaneck, NJ 07666
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>April 29, 2016</u> <small>DATE</small>	<u>Michael Pagan</u> <small>PRINT FULL NAME (CANDIDATE)</small>	 <small>SIGNATURE (CANDIDATE)</small>
_____ <small>DATE</small>	_____ <small>PRINT FULL NAME (CANDIDATE)</small>	_____ <small>SIGNATURE (CANDIDATE)</small>
_____ <small>DATE</small>	_____ <small>PRINT FULL NAME (CANDIDATE)</small>	_____ <small>SIGNATURE (CANDIDATE)</small>
<u>April 29, 2016</u> <small>DATE</small>	<u>Jacqueline Wilson</u> <small>PRINT FULL NAME (TREASURER)</small>	 <small>SIGNATURE (TREASURER)</small>

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.

 <small>DATE</small>	 <small>PRINT FULL NAME (CANDIDATE)</small>	 <small>SIGNATURE (CANDIDATE)</small>
_____ <small>DATE</small>	_____ <small>PRINT FULL NAME (CANDIDATE)</small>	_____ <small>SIGNATURE (CANDIDATE)</small>
_____ <small>DATE</small>	_____ <small>PRINT FULL NAME (CANDIDATE)</small>	_____ <small>SIGNATURE (CANDIDATE)</small>
_____ <small>DATE</small>	_____ <small>PRINT FULL NAME (TREASURER)</small>	_____ <small>SIGNATURE (TREASURER)</small>

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE): <input type="checkbox"/> 29 - DAY PRE-ELECTION <input type="checkbox"/> 11 - DAY PRE-ELECTION <input checked="" 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		
CANDIDATE OR COMMITTEE NAME Pagan For Council		
STREET ADDRESS 665 River Road		
CITY Teaneck	STATE NJ	ZIP CODE 07666
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck	
POLITICAL PARTY, IF ANY Democratic	OFFICE SOUGHT Council	
ELECTION DATE 5/10/16	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT <input type="checkbox"/> SPECIAL
Amendment Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
For State Use Only ELEC RECEIVED JUN 17 2016		

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	\$ 1515.04	\$ 13875.45
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 3000.00	\$ 5100.00
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ —	\$ —
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ —	\$ —
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ —	\$ —
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 4515.04	\$ 18,975.45
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 100.00	\$ 100.00
8. TOTAL CONTRIBUTIONS	\$ 4415.04	\$ 18,875.45
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ —	\$ —
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 4415.04	\$ 18,875.45

TABLE II. EXPENDITURES	THIS REPORT	CUMULATIVE TO DATE
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 11,787.27	\$ 17,592.04
2. DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 273.22	\$ 548.18
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ —	\$ —
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ —	\$ —
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ —	\$ —
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ —	\$ —
7. SUB TOTAL (ADD LINES 1 THRU 6)	\$ 12,060.49	\$ 18,140.22
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ —	\$ —
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 12,060.49	\$ 18,140.22

SCHEDULE A

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

CONTRIBUTOR NAME <i>NJ State Laborer's Political Action Committee</i>			EMPLOYER NAME <i>NJ State Laborer's Political Action Committee</i>	
CONTRIBUTOR ADDRESS <i>104 Interchange Plaza Ste 301</i>			EMPLOYER ADDRESS <i>104 Interchange Plaza Suite 301</i>	
<i>Monroe Twp, NJ 08831</i>			<i>Monroe Twp, NJ 08831</i>	
CHECK IF CURRENCY <input type="checkbox"/> AGGREGATE AMOUNT \$ <i>2500.00</i>			DATE(S) RECEIVED <i>4/11/16</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>2500.00</i>
OCCUPATION <i>CPC</i>				
CONTRIBUTOR NAME <i>John Bang</i>			EMPLOYER NAME <i>Unity</i>	
CONTRIBUTOR ADDRESS <i>2422 A Leighton Street</i>			EMPLOYER ADDRESS <i>100 Challenger Rd Suite 302</i>	
<i>Ft. Lee, NJ 07424</i>			<i>Ridgefield Park, NJ 07660-2127</i>	
CHECK IF CURRENCY <input type="checkbox"/> AGGREGATE AMOUNT \$ <i>500.00</i>			DATE(S) RECEIVED <i>5/1/2016</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>500.00</i>
OCCUPATION <i>Manager</i>				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
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	
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	
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	\$ <i>3,000.00</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ <i>3,000.00</i>

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
5/6/16	1004	J. Veach 1337 Dickerson Road Teaneck, NJ 07666	\$ 100.00
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 100.00
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 100.00

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
4-29-16	1001	Parano & Associates 492-C Cedar Lane Teaneck, NJ 07666	Field Consulting Services	\$ 2500.00	\$ —	\$ —
5-1-16	1002	North Jersey Media Group	Print Advertising	358.60	—	—
5-5-16	1003	Bravo Print and Mail Carlstadt, NJ	Flat Mailer	2375.84	—	—
5-6-16	1005	Parano & Associates 492-C Cedar Lane Teaneck, NJ 07666	Final Canvassing + Field Services	4500.00	—	—
5-6-16	1006	Bravo Print and Mail Carlstadt, NJ	Final Canvassing Fliers	1728.05	—	—
5-16-16	Debit	Constant Contact (Online)	Email Marketing	20.00	—	—
5-31-16	1008	Sarah Ruppert 747 Mildred St. Teaneck, NJ 07666	Reimbursement for Election Day Reception	304.78	—	—
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 11,787.27	\$ —
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 11,787.27	\$ —

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
5-31-16	1609	Sarah Pappoport 447 Mildred St. Teaneck, NJ 07666	Reimbursement for Election Day Reception	\$ 273.22	\$ —	\$ —
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 273.22	\$ —
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 273.22	\$ —

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.) \$ 8380.68

Funds Transferred from Prior Campaign \$ —

Deposits (Include interest) \$ 4415.04

Disbursements (Include bank charges) \$ 12,060.49

Closing Balance, this Report \$ 735.23

Oritani Bank Pagan For Council
NAME OF BANK OR DEPOSITORY NAME OF ACCOUNT

560 Cedar Lane Teaneck, NJ 07666
ADDRESS OF BANK OR DEPOSITORY

Jacqueline Wilson 917-763-4939
NAME OF TREASURER *TELEPHONE NUMBER (DAY)

1261 Beaumont Ave. Teaneck, NJ 07666
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.

_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ 5/31/16 DATE	_____ Michael Pagan PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ 5/31/16 DATE	_____ Jacqueline Wilson PRINT FULL NAME (TREASURER)	_____ SIGNATURE (TREASURER)

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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)