



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
MAR 21 2016

PLEASE TYPE OR PRINT

Candidate Name
 Henry J. Pruitt

Candidate Committee Name
 Pruitt for Township Council

Address (Number and Street, City, State, Zip Code)
 113 Vorhees Street, Teaneck, NJ 07666

*(Area) Day Telephone (201) 837-1838 *(Area) Evening Telephone (201) 837-1838

County Bergen Legal Name of Election District or Municipality Teaneck

Election Date 5/10/2016 Political Party, if any N/A Office Sought Township Council

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

CHAIRPERSON

Name
 Kimberly M. Parson

Mailing Address
 138 Stuyvesant Road

City Teaneck State New Jersey Zip Code 07666

*(Area) Day Telephone (201) 519-9143 *(Area) Evening Telephone (201) 833-1203

TREASURER

Name
 James D. Brown

Mailing Address
 108 Copley Avenue

City Teaneck State NJ Zip Code 07666

*(Area) Day Telephone (201) 615-6522 *(Area) Evening Telephone (201) 615-6522

Resident Address
 Same as Above

City State Zip Code

DEPOSITORY INFORMATION

Name of Bank or Depository
 Lakeland Bank

Mailing Address
 417 Cedar Lane

City Teaneck State NJ Zip Code 07666

(Area) Day Telephone 201-836-7717

Account Name Pruitt for Township Council Account Number 625415942

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

Name
 NONE

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

Name

Mailing Address

City State Zip Code

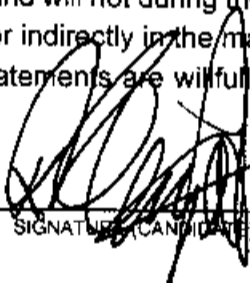
*(Area) Day Telephone *(Area) Evening Telephone

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 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.

3/12/16
 DATE

Henry J. Pruitt
 PRINT FULL NAME (CANDIDATE)

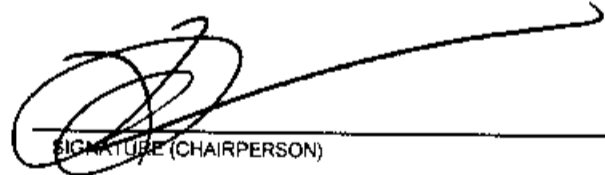

 SIGNATURE (CANDIDATE)

CHAIRPERSON/TREASURER CERTIFICATION

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3/12/16
 DATE

Kimberly Parson
 PRINT FULL NAME (CHAIRPERSON)


 SIGNATURE (CHAIRPERSON)

3/12/16
 DATE

James D. Brown
 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# _____



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*(Area) Evening Telephone
 (201) 837-1838

County
 Bergen

Legal Name of Election District or Municipality
 Teaneck

Election Date
 5/10/2016

Political Party, if any
 N/A

Office Sought
 Township Council

Election Type: (CHECK ONE)

Primary General May Municipal Run-Off School Fire District Special Amendment Yes No

CHAIRPERSON

Name
 Eunice Z. Pruitt

Mailing Address
 113 Vorhees Street

City
 Teaneck

State
 NJ

Zip Code
 07666

*(Area) Day Telephone
 (201) 837-1838

*(Area) Evening Telephone
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TREASURER

Name
 James D. Brown

Mailing Address
 108 Copley Avenue

City
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State
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Name
 NONE

Mailing Address

City	State	Zip Code
------	-------	----------

*(Area) Day Telephone	*(Area) Evening Telephone
-----------------------	---------------------------

Name

Mailing Address

City	State	Zip Code
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*(Area) Day Telephone	*(Area) Evening Telephone
-----------------------	---------------------------

Name

Mailing Address

City	State	Zip Code
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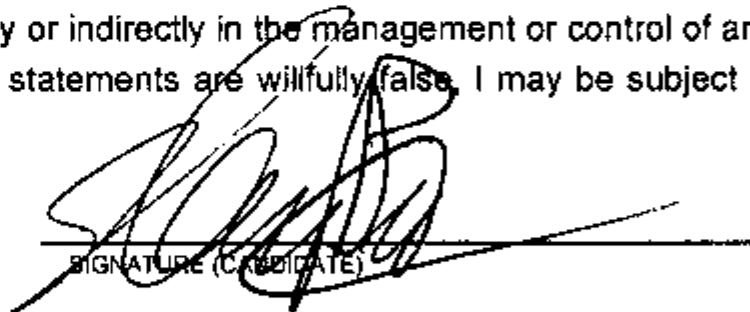
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5/3/16
 DATE

Henry J. Pruitt
 PRINT FULL NAME (CANDIDATE)


 SIGNATURE (CANDIDATE)

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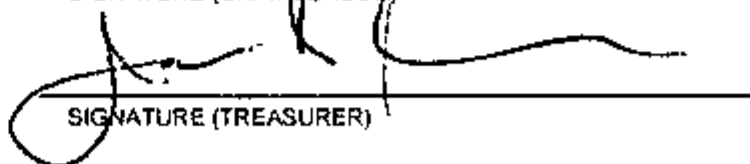
5/3/16
 DATE

Eunice Z. Pruitt
 PRINT FULL NAME (CHAIRPERSON)


 SIGNATURE (CHAIRPERSON)

5/3/16
 DATE

James D. Brown
 PRINT FULL NAME (TREASURER)


 SIGNATURE (TREASURER)

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ELEC RECEIVED
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MAY 09 2016
MAY 09 2016

Pruitt for Township Council

CID #: 0902600604M20160

(CANDIDATE / COMMITTEE NAME)

I certify that the report indicated below, is true and correct. I am aware that if any statements on the report are willfully false, I may be subject to punishment.

REPORT (Check relevant report)

- FORM D-1
- FORM D-2
- FORM DX
- FORM A-1
- FORM A-2

- FORM C-1
- FORM E-1
- FORM R-1 (29-DAY PREELECTION)
- FORM R-1 (11-DAY PREELECTION)
- FORM R-1 (20-DAY POSTELECTION)
- OTHER

5/2/16 Henry J. Pruitt [Signature]
DATE PRINT FULL NAME SIGNATURE (CANDIDATE)

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5/2/16 James D. Brown [Signature]
DATE PRINT FULL NAME SIGNATURE (TREASURER)

5/2/16 Erin Zita Pruitt [Signature]
DATE PRINT FULL NAME SIGNATURE (CHAIRPERSON)

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CID #: 0902600604M20160

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5/2/16 James D. Brown [Signature]
DATE PRINT FULL NAME SIGNATURE (TREASURER)

5/2/16 Erin Zita Pruitt [Signature]
DATE PRINT FULL NAME SIGNATURE (CHAIRPERSON)

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 14 2016
CANDIDATE OR COMMITTEE NAME Pruitt for Township Council		
STREET ADDRESS 113 Vorhees Street		
CITY Teaneck	STATE NJ	
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck	
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member	
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 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	\$ 2,955.00	\$ 2,955.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 1,700.00	\$ 1,700.00
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]	\$ 5,000.00	\$ 5,000.00
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 9,655.00	\$ 9,655.00
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 9,655.00	\$ 9,655.00
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 9,655.00	\$ 9,655.00

TABLE II. EXPENDITURES		
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 3,932.32	\$ 3,932.32
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)	\$ 3,932.32	\$ 3,932.32
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 3,932.32	\$ 3,932.32

SCHEDULE A

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

CONTRIBUTOR NAME James W. Pruitt		EMPLOYER NAME NONE		
CONTRIBUTOR ADDRESS 40 Thomas Place		EMPLOYER ADDRESS		
New Rochelle, NY 10801-2408				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/18/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Harriet McFeeters		EMPLOYER NAME NONE		
CONTRIBUTOR ADDRESS 819 East 168th Street		EMPLOYER ADDRESS		
Bronx, NY 10459				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/17/2016	AMOUNT(S) RECEIVED THIS PERIOD \$500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Ick Gyun Lee		EMPLOYER NAME World of Wings		
CONTRIBUTOR ADDRESS 6 Van Buren Court		EMPLOYER ADDRESS 1775 Windsor Road		
Cresskill, NJ 17626		Teaneck, NJ 07666		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 300.00	DATE(S) RECEIVED 3/13/2006	AMOUNT(S) RECEIVED THIS PERIOD \$ 300.00
OCCUPATION Owner				
CONTRIBUTOR NAME Bennie Hadnott, CPA		EMPLOYER NAME Watson Rice, LLP		
CONTRIBUTOR ADDRESS PO Box 2148		EMPLOYER ADDRESS 5 Penn Plaza		
Teaneck, NJ 07666		New York, NY 10001		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED 3/13/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 400.00
OCCUPATION Accountant				
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	\$ 1,700.00	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 1,700.00	

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

CONTRIBUTOR NAME NONE		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	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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

LENDER NAME Henry J. Pruitt		EMPLOYER NAME NONE	
LENDER ADDRESS 113 Vorhees Street		EMPLOYER ADDRESS	
Teaneck, NJ 07666			
OCCUPATION Retired			
CO-SIGNER NAME N/A		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD \$ 5,000.00	
DATE(S) RECEIVED 2/24/2016	AGGREGATE AMOUNT \$ 5,000.00	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		\$ 5,000.00	

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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
3/9/2016	101	Cole Media, 105 Lock Street, Newark NJ	Flyer Design & Printing	\$ 1,000.00	\$ 1,000.00	
3/9/2016	101a	Silk City Calendar Co., 375 Totowa Ave, Paterson, NJ		1,450.00	1,450.00	
3/10/2016	102	Edith Morrison, 446 W. Hudson Ave., Englewood, NJ	Catering for Kickoff Reception	400.00	400.00	
3/17/2016	Debit Card	GoDaddy.com	Domain Names	96.23	96.23	
3/21/2016	Debit Card	GoDaddy.com	Domain Names	24.34	24.34	
3/26/2016	104	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Room Rental - Kickoff	125.00	125.00	
4/5/2016	105	Rufus Parson, 138 Stuyvesant Rd., Teaneck NJ	Printing, Copying, Supplies	383.12	383.12	
4/5/2016	106	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Supplies & Postage	376.16	376.16	
4/7/2016	107	Party With Us, 20 Grand Avenue, Englewood NJ	Decorations - Kickoff	77.47	77.47	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -

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
			NONE	\$	\$	\$
				TOTAL, THIS PAGE	\$	\$
				GRAND TOTAL	\$	\$

(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
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				1. \$
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				2. \$
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				3. \$

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
		NONE		\$
TOTAL OUTSTANDING OBLIGATIONS				\$

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
SCHEDULE F TOTAL					\$

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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 \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$

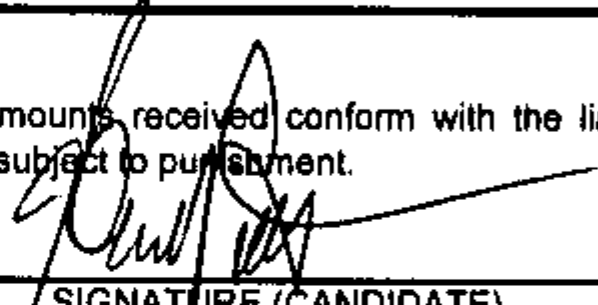
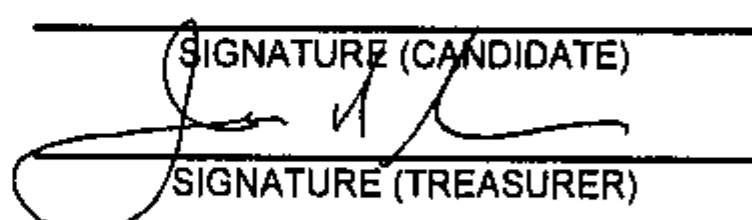
STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

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>0</u>
Deposits (Include interest)	\$ <u>9,655.00</u>
Disbursements (Include bank charges)	\$ <u>3,932.32</u>
Closing Balance, this Report	\$ <u>5,722.68</u>

Lakeland Bank	Pruitt for Township Council
NAME OF BANK OR DEPOSITORY	NAME OF ACCOUNT
417 Cedar Lane teaneck, NJ 07666	
James D. Brown	201-615-6522
NAME OF TREASURER	*TELEPHONE NUMBER (DAY)
108 Copley Avenue 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>4/11/16</u> DATE	<u>Henry J. Pruitt</u> PRINT FULL NAME (CANDIDATE)	 SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u>4/11/16</u> DATE	<u>James D. Brown</u> PRINT FULL NAME (TREASURER)	 SIGNATURE (TREASURER)

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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.

<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (TREASURER)	<u> </u> 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 MAY 09 2016	
CANDIDATE OR COMMITTEE NAME Pruitt for Township Council			
STREET ADDRESS 113 Vorhees Street			
CITY Teaneck	STATE NJ		ZIP CODE 07666
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck		
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member		
ELECTION DATE 5/10/16	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> GENERAL <input type="checkbox"/> RUN-OFF		
		<input type="checkbox"/> SCHOOL <input type="checkbox"/> SPECIAL <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	\$ 2,955.00	\$ 2,955.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 1,700.00	\$ 1,700.00
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]	\$ 5,000.00	\$ 5,000.00
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 9,655.00	\$ 9,655.00
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 9,655.00	\$ 9,655.00
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 9,655.00	\$ 9,655.00

TABLE II. EXPENDITURES		
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 3,932.32	\$ 3,932.32
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)	\$ 3,932.32	\$ 3,932.32
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 3,932.32	\$ 3,932.32

SCHEDULE A

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

CONTRIBUTOR NAME James W. Pruitt		EMPLOYER NAME NONE		
CONTRIBUTOR ADDRESS 40 Thomas Place		EMPLOYER ADDRESS		
New Rochelle, NY 10801-2408				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/18/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Harriet McFeeters		EMPLOYER NAME NONE		
CONTRIBUTOR ADDRESS 819 East 168th Street		EMPLOYER ADDRESS		
Bronx, NY 10459				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/17/2016	AMOUNT(S) RECEIVED THIS PERIOD \$500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Ick Gyun Lee		EMPLOYER NAME World of Wings		
CONTRIBUTOR ADDRESS 6 Van Buren Court		EMPLOYER ADDRESS 1775 Windsor Road		
Cresskill, NJ 17626		Teaneck, NJ 07666		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 300.00	DATE(S) RECEIVED 3/13/2006	AMOUNT(S) RECEIVED THIS PERIOD \$ 300.00
OCCUPATION Owner				
CONTRIBUTOR NAME Bennie Hadnott, CPA		EMPLOYER NAME Watson Rice, LLP		
CONTRIBUTOR ADDRESS PO Box 2148		EMPLOYER ADDRESS 5 Penn Plaza		
Teaneck, NJ 07666		New York, NY 10001		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED 3/13/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 400.00
OCCUPATION Accountant				
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	\$ 1,700.00	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 1,700.00	

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

CONTRIBUTOR NAME NONE		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	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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

LENDER NAME Henry J. Pruitt		EMPLOYER NAME NONE	
LENDER ADDRESS 113 Vorhees Street		EMPLOYER ADDRESS	
Teaneck, NJ 07666			
OCCUPATION Retired			
CO-SIGNER NAME N/A		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD \$ 5,000.00	
DATE(S) RECEIVED 2/24/2016	AGGREGATE AMOUNT \$ 5,000.00	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		\$ 5,000.00	

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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
			See Attached	\$	\$	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$	\$	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				\$	\$	\$

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
3/9/2016	101	Cole Media, 105 Lock Street, Newark NJ	Flyer Design & Printing	\$ 1,000.00	\$ 1,000.00	
3/9/2016	101a	Silk City Calendar Co., 375 Totowa Ave, Paterson, NJ		1,450.00	1,450.00	
3/10/2016	102	Edith Morrison	Catering for Kickoff Reception	400.00	400.00	
3/17/2016	Debit Card	GoDaddy.com	Domain Names	96.23	96.23	
3/21/2016	Debit Card	GoDaddy.com	Domain Names	24.34	24.34	
3/26/2016	104	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Room Rental - Kickoff	125.00	125.00	
4/5/2016	105	Rufus Parson, 138 Stuyvesant Rd., Teaneck NJ	Printing, Copying, Supplies	383.12	383.12	
4/5/2016	106	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Supplies & Postage	376.16	376.16	
4/7/2016	107	Party With Us, 20 Grand Avenue, Englewood NJ	Deorations - Kickoff	77.47	77.47	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -

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

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 0
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				1. \$ 0
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				2. \$ 0
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				3. \$ 0

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
		NONE		\$
			TOTAL OUTSTANDING OBLIGATIONS	\$ 0.00

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
				SCHEDULE F TOTAL	\$ 0.00

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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.)

\$ 0

Funds Transferred from Prior Campaign

\$ 0

Deposits (Include interest)

\$ 9,655.00

Disbursements (Include bank charges)

\$ 3,932.32

Closing Balance, this Report

\$ 5,722.68

Lakeland Bank

Pruitt for Township Council

NAME OF BANK OR DEPOSITORY

NAME OF ACCOUNT

417 Cedar Lane teaneck, NJ 07666

ADDRESS OF BANK OR DEPOSITORY

James D. Brown

201-615-6522

NAME OF TREASURER

*TELEPHONE NUMBER (DAY)

108 Copley Avenue 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.

4/11/16 5/2/16
DATE

Henry J. Pruitt

PRINT FULL NAME (CANDIDATE)

SIGNATURE (CANDIDATE)

DATE

PRINT FULL NAME (CANDIDATE)

SIGNATURE (CANDIDATE)

4/11/16 6/2/16
DATE

PRINT FULL NAME (CANDIDATE)

SIGNATURE (CANDIDATE)

James D. Brown

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# _____

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 MAY 10 2016	
CANDIDATE OR COMMITTEE NAME Fruitt for Township Council			
STREET ADDRESS 113 Vorhees Street			
CITY Teaneck	STATE NJ		ZIP CODE 07666
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck		
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member		
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	
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	\$ 2,955.00	\$ 2,955.00	
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 1,700.00	\$ 1,700.00	
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]	\$ 5,000.00	\$ 5,000.00	
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 9,655.00	\$ 9,655.00	
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0	
8. TOTAL CONTRIBUTIONS	\$ 9,655.00	\$ 9,655.00	
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0	
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 9,655.00	\$ 9,655.00	
TABLE II. EXPENDITURES			
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 3,932.32	\$ 3,932.32	
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)	\$ 3,932.32	\$ 3,932.32	
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0	
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 3,932.32	\$ 3,932.32	

SCHEDULE A

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

CONTRIBUTOR NAME James W. Pruitt			EMPLOYER NAME NONE	
CONTRIBUTOR ADDRESS 40 Thomas Place			EMPLOYER ADDRESS	
New Rochelle, NY 10801-2408				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/18/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Harriet McFeeters			EMPLOYER NAME NONE	
CONTRIBUTOR ADDRESS 819 East 168th Street			EMPLOYER ADDRESS	
Bronx, NY 10459				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/17/2016	AMOUNT(S) RECEIVED THIS PERIOD \$500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Ick Gyun Lee			EMPLOYER NAME World of Wings	
CONTRIBUTOR ADDRESS 6 Van Buren Court			EMPLOYER ADDRESS 1775 Windsor Road	
Cresskill, NJ 17626			Teaneck, NJ 07666	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 300.00	DATE(S) RECEIVED 3/13/2006	AMOUNT(S) RECEIVED THIS PERIOD \$ 300.00
OCCUPATION Owner				
CONTRIBUTOR NAME Bennie Hadnott, CPA			EMPLOYER NAME Watson Rice, LLP	
CONTRIBUTOR ADDRESS PO Box 2148			EMPLOYER ADDRESS 5 Penn Plaza	
Teaneck, NJ 07666			New York, NY 10001	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED 3/13/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 400.00
OCCUPATION Accountant				
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	\$ 1,700.00
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ 1,700.00

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

CONTRIBUTOR NAME NONE		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	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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

LENDER NAME Henry J. Pruitt		EMPLOYER NAME NONE	
LENDER ADDRESS 113 Vorhees Street		EMPLOYER ADDRESS	
Teaneck, NJ 07666			
OCCUPATION Retired			
CO-SIGNER NAME N/A		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD \$ 5,000.00	
DATE(S) RECEIVED 2/24/2016	AGGREGATE AMOUNT \$ 5,000.00	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		\$ 5,000.00	

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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
3/9/2016	101	Cole Media, 105 Lock Street, Newark NJ	Flyer Design & Printing	\$ 1,000.00	\$ 1,000.00	
3/9/2016	101a	Silk City Calendar Co., 375 Totowa Ave, Paterson, NJ		1,450.00	1,450.00	
3/10/2016	102	Edith Morrison	Catering for Kickoff Reception	400.00	400.00	
3/17/2016	Debit Card	GoDaddy.com	Domain Names	96.23	96.23	
3/21/2016	Debit Card	GoDaddy.com	Domain Names	24.34	24.34	
3/26/2016	104	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Room Rental - Kickoff	125.00	125.00	
4/5/2016	105	Rufus Parson, 138 Stuyvesant Rd., Teaneck NJ	Printing, Copying, Supplies	383.12	383.12	
4/5/2016	106	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Supplies & Postage	376.16	376.16	
4/7/2016	107	Party With Us, 20 Grand Avenue, Englewood NJ	Decorations - Kickoff	77.47	77.47	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -

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

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 0
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				1. \$ 0
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				2. \$ 0
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				3. \$ 0

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
		NONE		\$
TOTAL OUTSTANDING OBLIGATIONS				\$ 0.00

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
SCHEDULE F TOTAL					\$ 0.00

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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 \$

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE):
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) <i>www.elec.state.nj.us</i>		<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, _____
CANDIDATE OR COMMITTEE NAME Pruitt for Township Council		Amendment Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
STREET ADDRESS 113 Vorhees Street		
CITY Teaneck	STATE NJ	ZIP CODE 07666
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck	
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member	
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
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	\$ 2,955.00	\$ 2,955.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 1,700.00	\$ 1,700.00
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]	\$ 5,000.00	\$ 5,000.00
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 9,655.00	\$ 9,655.00
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 9,655.00	\$ 9,655.00
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 9,655.00	\$ 9,655.00
TABLE II. EXPENDITURES		
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 3,932.32	\$ 3,932.32
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)	\$ 3,932.32	\$ 3,932.32
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 3,932.32	\$ 3,932.32

SCHEDULE A

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

CONTRIBUTOR NAME James W. Pruitt		EMPLOYER NAME NONE		
CONTRIBUTOR ADDRESS 40 Thomas Place		EMPLOYER ADDRESS		
New Rochelle, NY 10801-2408				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/18/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Harriet McFeeters		EMPLOYER NAME NONE		
CONTRIBUTOR ADDRESS 819 East 168th Street		EMPLOYER ADDRESS		
Bronx, NY 10459				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00	DATE(S) RECEIVED 2/17/2016	AMOUNT(S) RECEIVED THIS PERIOD \$500.00
OCCUPATION Retired				
CONTRIBUTOR NAME Ick Gyun Lee		EMPLOYER NAME World of Wings		
CONTRIBUTOR ADDRESS 6 Van Buren Court		EMPLOYER ADDRESS 1775 Windsor Road		
Cresskill, NJ 17626		Teaneck, NJ 07666		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 300.00	DATE(S) RECEIVED 3/13/2006	AMOUNT(S) RECEIVED THIS PERIOD \$ 300.00
OCCUPATION Owner				
CONTRIBUTOR NAME Bennie Hadnott, CPA		EMPLOYER NAME Watson Rice, LLP		
CONTRIBUTOR ADDRESS PO Box 2148		EMPLOYER ADDRESS 5 Penn Plaza		
Teaneck, NJ 07666		New York, NY 10001		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED 3/13/2016	AMOUNT(S) RECEIVED THIS PERIOD \$ 400.00
OCCUPATION Accountant				
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	\$	1,700.00
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$	1,700.00

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

CONTRIBUTOR NAME NONE		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	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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

LENDER NAME Henry J. Pruitt		EMPLOYER NAME NONE	
LENDER ADDRESS 113 Vorhees Street		EMPLOYER ADDRESS	
Teaneck, NJ 07666			
OCCUPATION Retired			
CO-SIGNER NAME N/A		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD \$ 5,000.00	
DATE(S) RECEIVED 2/24/2016	AGGREGATE AMOUNT \$ 5,000.00	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		\$ 5,000.00	

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

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
3/9/2016	101	Cole Media, 105 Lock Street, Newark NJ	Flyer Design & Printing	\$ 1,000.00	\$ 1,000.00	
3/9/2016	101a	Silk City Calendar Co., 375 Totowa Ave, Paterson, NJ		1,450.00	1,450.00	
3/10/2016	102	Edith Morrison	Catering for Kickoff Reception	400.00	400.00	
3/17/2016	Debit Card	GoDaddy.com	Domain Names	96.23	96.23	
3/21/2016	Debit Card	GoDaddy.com	Domain Names	24.34	24.34	
3/26/2016	104	Dr. Henry Prujitt, 113 Vorhees St. Teaneck NJ	Room Rental - Kickoff	125.00	125.00	
4/5/2016	105	Rufus Parson, 138 Stuyvesant Rd., Teaneck NJ	Printing, Copying, Supplies	383.12	383.12	
4/5/2016	106	Dr. Henry Prujitt, 113 Vorhees St. Teaneck NJ	Supplies & Postage	376.16	376.16	
4/7/2016	107	Party With Us, 20 Grand Avenue, Englewood NJ	Decorations - Kickoff	77.47	77.47	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 3,932.32	\$ 3,932.32	\$ -

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

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 0
TOTAL, THIS PAGE				
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				1. \$ 0
				2. \$ 0
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				3. \$ 0

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
2/24/16	Henry J. Pruitt	113 Vorhees Street, Teaneck, NJ	Loan	\$ 5,000.00
			TOTAL OUTSTANDING OBLIGATIONS	\$ 5,000.00

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
				SCHEDULE F TOTAL	\$ 0.00

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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.) \$ 0

Funds Transferred from Prior Campaign

\$ 0

Deposits (Include interest)

\$ 9,655.00

Disbursements (Include bank charges)

\$ 3,932.32

Closing Balance, this Report

\$ 5,722.68

Lakeland Bank

Pruitt for Township Council

NAME OF BANK OR DEPOSITORY

NAME OF ACCOUNT

417 Cedar Lane teaneck, NJ 07666

ADDRESS OF BANK OR DEPOSITORY

James D. Brown

201-615-6522

NAME OF TREASURER

*TELEPHONE NUMBER (DAY)

108 Copley Avenue 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>5/27/16</u>	Henry J. Pruitt	
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
____	____	____
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
____	____	____
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
5/27/16	James D. Brown	____
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.

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 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		For State Use Only ELEC RECEIVED MAY 09 2016		
CANDIDATE OR COMMITTEE NAME Pruitt for Township Council				
STREET ADDRESS 113 Vorhees Street				
CITY Teaneck	STATE NJ		ZIP CODE 07666	
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck			
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member			
ELECTION DATE	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			\$ 1,205.00	\$ 4,160.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]			\$ 1,000.00	\$ 2,700.00
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]			\$ 0.00	\$ 5,000.00
6. SUB TOTAL (ADD LINES 1 THRU 5)			\$ 2,205.00	\$ 11,860.00
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)			\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS			\$ 2,205.00	\$ 11,860.00
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)			\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)			\$ 2,205.00	\$ 11,860.00
TABLE II. EXPENDITURES				
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]			\$ 1,549.56	\$ 5,481.88
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)			\$ 1,549.56	\$ 5,481.88
8. REFUNDED DISBURSEMENTS [Schedule F] (-)			\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)			\$ 1,549.56	\$ 5,481.88

SCHEDULE A

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

CONTRIBUTOR NAME New Jersey State Laborers' Political Action Comm.			EMPLOYER NAME N/A	
CONTRIBUTOR ADDRESS 104 Interchange Plaza, Suite 301 Monrow Twp, NJ 08831			EMPLOYER ADDRESS N/A	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 1,000.00	DATE(S) RECEIVED 4/14/16	AMOUNT(S) RECEIVED THIS PERIOD \$ 1,000.00
OCCUPATION N/A				
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	\$ 1,000.00
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ 1,000.00

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

CONTRIBUTOR NAME <p align="center">NONE</p>		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 NONE		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
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$

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
4/12/2016	Debit Card	North Jersey Media Group	Newspaper Advertising	\$ 204.78	204.78	
4/12/2016	Debit Card	The Jewish Standard	Newspaper Advertising	540.00	540.00	
4/12/2016	Debit Card	The Jewish Link	Newspaper Advertising	600.00	600.00	
4/19/2016	Debit Card	North Jersey Media Group	Newspaper Advertising	204.78	204.78	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 1,549.56	\$ 1,549.56	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 1,549.56	\$ 1,549.56	\$ -

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

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				1. \$
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				2. \$
				3. \$

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
		NONE		\$
TOTAL OUTSTANDING OBLIGATIONS				\$

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
SCHEDULE F TOTAL					\$

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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 \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$

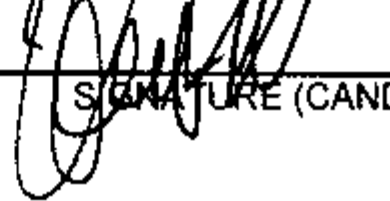
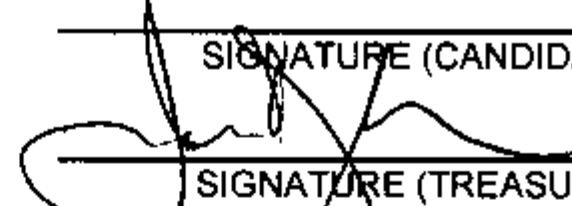
STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

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>5,722.68</u>
Funds Transferred from Prior Campaign	\$ <u>0</u>
Deposits (Include interest)	\$ <u>2,205.00</u>
Disbursements (Include bank charges)	\$ <u>1,549.56</u>
Closing Balance, this Report	\$ <u>6,378.12</u>

Lakeland Bank	Pruitt for Township Council
NAME OF BANK OR DEPOSITORY 417 Cedar Lane Teaneck NJ 07666	NAME OF ACCOUNT
ADDRESS OF BANK OR DEPOSITORY	
James D. Brown	201-615-6522
NAME OF TREASURER 108 Copley Avenue Teaneck, NJ 07666	*TELEPHONE NUMBER (DAY)
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.

4/29/16	Henry J. Pruitt	
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
4/29/16	James D. Brown	
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# _____

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 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 Pruitt for Township Council		
STREET ADDRESS 113 Vorhees Street		
CITY Teaneck	STATE NJ	ZIP CODE 07666
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck	
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member	
Amendment Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
RECEIVED MAY 10 2016		
ELECTION DATE	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	\$ 1,205.00	\$ 4,160.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 1,000.00	\$ 2,700.00
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]	\$ 0.00	\$ 5,000.00
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 2,205.00	\$ 11,860.00
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 2,205.00	\$ 11,860.00
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 2,205.00	\$ 11,860.00
TABLE II. EXPENDITURES		
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 1,549.56	\$ 5,481.88
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)	\$ 1,549.56	\$ 5,481.88
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 1,549.56	\$ 5,481.88

SCHEDULE A

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

CONTRIBUTOR NAME New Jersey State Laborers' Political Action Comm.			EMPLOYER NAME N/A	
CONTRIBUTOR ADDRESS 104 Interchange Plaza, Suite 301			EMPLOYER ADDRESS N/A	
Monrow Twp, NJ 08831				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 1,000.00	DATE(S) RECEIVED 4/14/16	AMOUNT(S) RECEIVED THIS PERIOD \$ 1,000.00
OCCUPATION N/A				
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	\$ 1,000.00
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ 1,000.00

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

CONTRIBUTOR NAME <p align="center">NONE</p>		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 <p align="center">NONE</p>		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
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$

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
4/12/2016	Debit Card	North Jersey Media Group	Newspaper Advertising	\$ 204.78	\$ 204.78	
4/12/2016	Debit Card	The Jewish Standard	Newspaper Advertising	540.00	540.00	
4/12/2016	Debit Card	The Jewish Link	Newspaper Advertising	600.00	600.00	
4/19/2016	Debit Card	North Jersey Media Group	Newspaper Advertising	204.78	204.78	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL THIS PAGE	\$ 1,549.56	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				GRAND TOTAL	\$ 1,549.56	\$ -

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

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				1. \$
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				2. \$
				3. \$

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
		NONE		\$
TOTAL OUTSTANDING OBLIGATIONS				\$

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
SCHEDULE F TOTAL					\$

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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 \$

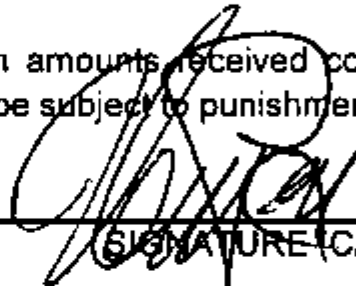
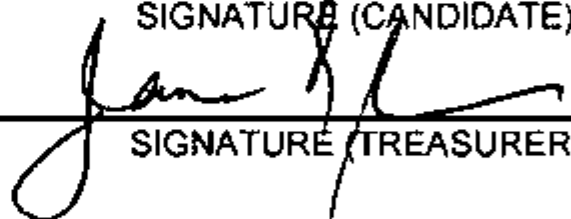
STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

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>5,722.68</u>
Funds Transferred from Prior Campaign	\$ <u>0</u>
Deposits (Include interest)	\$ <u>2,205.00</u>
Disbursements (Include bank charges)	\$ <u>1,549.56</u>
Closing Balance, this Report	\$ <u>6,378.12</u>

<u>Lakeland Bank</u>	<u>Pruitt for Township Council</u>
<small>NAME OF BANK OR DEPOSITORY</small> 417 Cedar Lane Teaneck NJ 07666	<small>NAME OF ACCOUNT</small>
<small>ADDRESS OF BANK OR DEPOSITORY</small>	
<u>James D. Brown</u>	<u>201-615-6522</u>
<small>NAME OF TREASURER</small> 108 Copley Avenue Teaneck, NJ 07666	<small>*TELEPHONE NUMBER (DAY)</small>
<small>ADDRESS OF TREASURER</small>	

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>5/9/16</u>	<u>Henry J. Pruitt</u>	
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u> </u>	<u> </u>	<u> </u>
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u>5/9/16</u>	<u>James D. Brown</u>	
<small>DATE</small>	<small>PRINT FULL NAME (TREASURER)</small>	<small>SIGNATURE (TREASURER)</small>

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.

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.

<u> </u>	<u> </u>	<u> </u>
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u> </u>	<u> </u>	<u> </u>
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u> </u>	<u> </u>	<u> </u>
<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 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 Pruitt for Township Council			
STREET ADDRESS 113 Vorhees Street			
CITY Teaneck	STATE NJ	ZIP CODE 07666	
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck		
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member		
		Amendment Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
For State Use Only ELEC RECEIVED MAY 31 2016			
ELECTION DATE	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	
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		\$ 1,205.00	\$ 4,160.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]		\$ 1,000.00	\$ 2,700.00
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]		\$ 0.00	\$ 5,000.00
6. SUB TOTAL (ADD LINES 1 THRU 5)		\$ 2,205.00	\$ 11,860.00
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)		\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS		\$ 2,205.00	\$ 11,860.00
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)		\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)		\$ 2,205.00	\$ 11,860.00
TABLE II. EXPENDITURES			
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]		\$ 1,549.56	\$ 5,481.88
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)		\$ 1,549.56	\$ 5,481.88
8. REFUNDED DISBURSEMENTS [Schedule F] (-)		\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)		\$ 1,549.56	\$ 5,481.88

SCHEDULE A

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

CONTRIBUTOR NAME New Jersey State Laborers' Political Action Comm.		EMPLOYER NAME N/A		
CONTRIBUTOR ADDRESS 104 Interchange Plaza, Suite 301		EMPLOYER ADDRESS N/A		
Monrow Twp, NJ 08831				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 1,000.00	DATE(S) RECEIVED 4/14/16	AMOUNT(S) RECEIVED THIS PERIOD \$ 1,000.00
OCCUPATION N/A				
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	\$ 1,000.00	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 1,000.00	

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

CONTRIBUTOR NAME <p align="center">NONE</p>		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 NONE		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
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$

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
4/12/2016	Debit Card	North Jersey Media Group	Newspaper Advertising	\$ 204.78	204.78	
4/12/2016	Debit Card	The Jewish Standard	Newspaper Advertising	540.00	540.00	
4/12/2016	Debit Card	The Jewish Link	Newspaper Advertising	600.00	600.00	
4/19/2016	Debit Card	North Jersey Media Group	Newspaper Advertising	204.78	204.78	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL THIS PAGE	\$ 1,549.56	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				GRAND TOTAL	\$ 1,549.56	\$ -

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
			NONE	\$	\$	\$
				\$	\$	\$
				\$	\$	\$

(COMPLETE THIS LINE FOR EVERY PAGE USED)

TOTAL, THIS PAGE

\$

(COMPLETE THIS LINE FOR LAST PAGE USED)

GRAND TOTAL

\$

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

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				1. \$
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				2. \$
				3. \$

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
02/24/16	Henry J. Pruitt	113 Vorhees St., Teaneck NJ	Loan	\$ 5,000.00
			TOTAL OUTSTANDING OBLIGATIONS	\$ 5,000.00

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
				SCHEDULE F TOTAL	\$

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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 \$


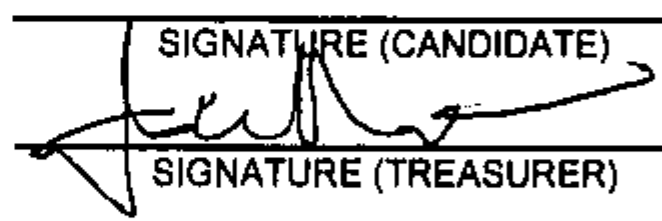
STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

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>5,722.68</u>
Funds Transferred from Prior Campaign	\$ <u>0</u>
Deposits (Include interest)	\$ <u>2,205.00</u>
Disbursements (Include bank charges)	\$ <u>1,549.56</u>
Closing Balance, this Report	\$ <u>6,378.12</u>

Lakeland Bank	Pruitt for Township Council
NAME OF BANK OR DEPOSITORY 417 Cedar Lane Teaneck NJ 07666	NAME OF ACCOUNT
James D. Brown	201-615-6522
NAME OF TREASURER 108 Copley Avenue Teaneck, NJ 07666	*TELEPHONE NUMBER (DAY)
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>5/27/16</u> DATE	<u>Henry J. Pruitt</u> PRINT FULL NAME (CANDIDATE)	 SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
<u>5/27/16</u> DATE	<u>James D. Brown</u> 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# _____

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 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 (800) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) www.elec.state.nj.us		For State Use Only ELEC RECEIVED MAY 31 2016
CANDIDATE OR COMMITTEE NAME Pruitt for Township Council		
STREET ADDRESS 113 Vorhees Street		
CITY Teaneck	STATE NJ	
COUNTY Bergen	ELECTION DISTRICT OR MUNICIPALITY Teaneck	
POLITICAL PARTY, IF ANY N/A	OFFICE SOUGHT Council Member	
ELECTION DATE	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
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	\$ 915.00	\$ 5,075.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 0.00	\$ 2,700.00
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$	\$
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ 6,308.41	\$ 6,308.41
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ 0.00	\$ 5,000.00
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 7,223.41	\$ 19,083.41
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 7,223.41	\$ 19,083.41
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 7,223.41	\$ 19,083.41
TABLE II. EXPENDITURES		
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 5,715.12	\$ 11,197.00
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)	\$ 6,308.41	\$ 6,308.41
7. SUB TOTAL (ADD LINES 1 THRU 6)	\$ 12,023.53	\$ 17,505.41
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 12,023.53	\$ 17,505.41

SCHEDULE A

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

CONTRIBUTOR NAME NONE		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				
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	\$	0.00
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$	0.00

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

CONTRIBUTOR NAME Friends of Mohammed Hameeduddin/Schwartz for Teaneck		EMPLOYER NAME	
CONTRIBUTOR ADDRESS PO Box 2030		EMPLOYER ADDRESS	
Teaneck, NJ 07666			
	AGGREGATE AMOUNT \$ 6,308.41	DATE(S) RECEIVED 5/2/16, 5/10/16	AMOUNT(S) RECEIVED THIS PERIOD \$ 6,308.41
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S) Printing and Postage			
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	\$ 6,308.41
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 6,308.41

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

LENDER NAME NONE		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		\$ 0.00	

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
		NONE	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$

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
4/26/2016	Debit Card	North Jersey Media Group	Advertising	\$ 204.78	\$ 204.78	
5/3/2016	Debit Card	North Jersey Media Group	Advertising	600.32	600.32	
5/3/2016	108	Jerald Parson, 138 Stuyvesant Rd., Teaneck NJ	Website Expense	300.00	300.00	
5/3/2016	109	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Printing Supplies	521.02	521.02	
5/5/2016	110	Dr. Henry Pruitt, 113 Vorhees St. Teaneck NJ	Postage	94.00	94.00	
5/6/2016	111	All County Media, 77 Hudson Street Hackensack NJ	Writing & Design of Materials	3,745.00	3,745.00	
5/13/2016	113	Edith Morrison, 446 W. Hudson Ave., Englewood, NJ	Catering	250.00	250.00	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 5,715.12	\$ 5,715.12	\$ -
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 5,715.12	\$ 5,715.12	\$ -

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
			NONE	\$	\$	\$
			TOTAL, THIS PAGE	\$	\$	\$
			GRAND TOTAL	\$	\$	\$

(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
		NONE		\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$
TOTAL, THIS PAGE				
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				1. \$
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				2. \$
				3. \$

SCHEDULE E
Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
02/24/16	Henry J. Pruitt	113 Vorhees St., Teaneck, NJ	Loan	\$ 1,578.00
	Note: \$3,422 of original \$5,000 loan has been forgiven.			
			TOTAL OUTSTANDING OBLIGATIONS	\$ 1,578.00

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
			NONE		\$
				SCHEDULE F TOTAL	\$

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
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 \$


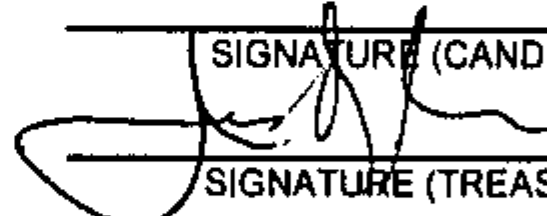
STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

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>6,378.12</u>
Funds Transferred from Prior Campaign	\$ <u>0</u>
Deposits (Include interest)	\$ <u>915.00</u>
Disbursements (Include bank charges)	\$ <u>5,715.12</u>
Closing Balance, this Report	\$ <u>1,578.00</u>

<u>Lakeland Bank</u>	<u>Pruitt for Township Council</u>
<small>NAME OF BANK OR DEPOSITORY</small>	<small>NAME OF ACCOUNT</small>
<u>417 Cedar Lane Teaneck NJ 07666</u>	
<small>ADDRESS OF BANK OR DEPOSITORY</small>	
<u>James D. Brown</u>	<u>201-615-6522</u>
<small>NAME OF TREASURER</small>	<small>*TELEPHONE NUMBER (DAY)</small>
<u>108 Copley Avenue Teaneck, NJ 07666</u>	
<small>ADDRESS OF TREASURER</small>	

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>5/27/16</u>	<u>Henry J. Pruitt</u>	
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u> </u>	<u> </u>	<u> </u>
<small>DATE</small>	<small>PRINT FULL NAME (CANDIDATE)</small>	<small>SIGNATURE (CANDIDATE)</small>
<u> </u>	<u> </u>	<u> </u>
<u>5/27/16</u>	<u>James D. Brown</u>	
<small>DATE</small>	<small>PRINT FULL NAME (TREASURER)</small>	<small>SIGNATURE (TREASURER)</small>

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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.

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