CANDIDATE - SWORN STATEMENT								FORM A-1	
Election Law Enforcement Commission	CANDIDATE - SWORN STATEME NEW JERSEY ELECTION LAW ENFORCEMENT (P.O. Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC					COMMISSION		ELEC Received Feb 28, 2019 10:54 AM	
1973		www.elec.				Amendment			
Candidate Name JOHN QUATTROCCH	СНІ					Office Sought COUNCIL OR MUNICIPAL OFFICE			
Candidate Committee I JOHN QUATTROCCH									
Street Address 44 AFTERGLOW WAY	/								
City VERONA		State NJ	Zip Code 07044		*(Area Code) Day Telephone 201-563-2567			Area Code) Eve. Telephone 73-857-7284	
Committee Email (Option	nal)			Comm	iittee W	ebsite (Optional)	·		
Election Type: (Select One)								ection Date 5/14/2019	
County ESSEX COUNTY		Legal Name of Election District VERONA BOROUGH				Municipality		olitical Party ONPARTISAN	
 The total amound committee shall be 2. I am aware that other candidate, 	e zero, or shall not, in th it in the event the total a person or committee	kpended ne aggreg imount e shall, in	gate, exc xpended the age	ceed \$5 or to b gregate	,100 foi e expei , excee	this election. nded on behalf of r ed \$5,100, I am	my can	er candidate, person, or didacy by me or by any d to file a "Report of	
3. I am aware th currency (cash) c Contributor Inforn	I Expenditures," Form R at if I receive a contrib contribution in any amou nation," Form C-1, inclu- utor is an individual, his.	ution in nt, I am ding the i	excess of required identity of	of \$300 to repo of the so	in the rt the c ource a	aggregate from o ontribution to the (nd the aggregate t	Commis otal of d	ssion on "Supplemental contributions therefrom,	
day before the el the "Supplementa	ection up to, and includ al Contributor Informatic	ing, the c on, " Forr ved there	day of the m C-1, w	e election vithin 48 pring the	on, I an 3 hours	of receipt of the o	the Co contribu		

5. I am aware that if I make, incur, or authorize an expenditure of money or other thing of value in excess of \$1,600 in the aggregate to support or defeat a candidate or public question, starting with the 13th day before the election up to and including the day of the election, I am required to notify the Commission in writing within 48 hours of the expenditure on the "Supplemental Expenditure Information," Form E-1.

6. I am aware that I, as a candidate, am required to designate a campaign treasurer and a campaign depository and that I am required to file with the Commission a "Certificate of Organization and Designation of Campaign Treasurer and Depository," Form D-1, no later than 10 days after receipt of any contribution on behalf of my candidacy or 10 days after making any expenditure on behalf of my candidacy, whichever comes first.

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

Registration Numbe	r	PIN	*****
Candidate JOHN	QUATTROCCHI	Date	02/28/2019

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.