

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.nj.gov		
CANDIDATE OR COMMITTEE NAME Christine McGrath		
STREET ADDRESS 57 Fairway Avenue		
CITY Verona	STATE NJ	ZIP CODE 07044
COUNTY Essex	ELECTION DISTRICT OR MUNICIPALITY Verona	
POLITICAL PARTY, IF ANY	OFFICE SOUGHT Town Council	
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

Amendment Yes No

ELEC RECEIVED Only
MAY - 3 2019

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	\$ 1015.00	\$ 8,163.00
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 350.00	\$ 3,040.00
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]	\$ 2000.00	\$ 2500.00
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 3,365.00	\$ 13,703.00
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$	\$
8. TOTAL CONTRIBUTIONS	\$	\$
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$	\$
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 3,365.00	\$ 13,703.00

TABLE II. EXPENDITURES		
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 4,838.89	\$ 8,617.40
2. DISBURSEMENTS - OTHER [Schedule 2(D)]	\$	\$
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$	\$
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$	\$
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$	\$
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$	\$
7. SUB TOTAL (ADD LINES 1 THRU 6)	\$ 4838.89	\$ 8617.40
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$	\$
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 4838.89	\$ 8617.40

SCHEDULE A

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

CONTRIBUTOR NAME <i>Joseph Wilson</i>		EMPLOYER NAME		
CONTRIBUTOR ADDRESS <i>213 Highland Ave</i>		EMPLOYER ADDRESS		
<i>Upper Montclair, NJ 07043</i>				
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>350.00</i>	DATE(S) RECEIVED <i>4-12-19</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>350.00</i>
OCCUPATION <i>retired</i>				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE		\$ <i>350.00</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL		\$ <i>350.00</i>

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

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)			
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 <i>Christine McGrath</i>		EMPLOYER NAME	
LENDER ADDRESS <i>57 Fairway Ave</i>		EMPLOYER ADDRESS	
<i>Verona, NJ 07044</i>			
OCCUPATION <i>none</i>			
CO-SIGNER NAME <i>none</i>		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD <i>\$ 2000.00</i>	
DATE(S) RECEIVED <i>4-26-19</i>	AGGREGATE AMOUNT <i>\$ 2500.00</i>	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 <i>\$</i>	
DATE(S) RECEIVED	AGGREGATE AMOUNT <i>\$</i>	CHECK IF CURRENCY <input type="checkbox"/>	
TOTAL AMOUNT OF LOANS RECEIVED THIS REPORT PERIOD		<i>\$ 2000.00</i>	

ADJUSTMENT SCHEDULE
Refund of Contributions

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
			\$
(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
4-16-19		MyVerona.com LLC 68 Newman Ave Verona, NJ 07044	Advertising	\$ 500.00	\$ 500.00	\$
4-22-19		USPS 682 Bloomfield Ave Verona, NJ 07044	Postage	\$ 256.00	256.00	
4-24-19		USPS 682 Bloomfield Ave. Verona, NJ 07044	Postage	\$ 28.00	28.00	
4-29-19		Nation Bu. Ides 5205. Grand Ave. 2nd floor Los Angeles, CA 90071	Website	\$ 83.00	83.00	
4-19-19	131	Christine McGrath 57 Fairway Ave. Verona, NJ 07044	reimbursement -check	\$ 49.00	49.00	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 916.00	\$ 916.00	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)					\$	\$
TOTAL, THIS PAGE				\$ 916.00	\$ 916.00	\$
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
4-3-18		Facebook 1 Hacker Way Menlo Park, CA 94025	Advertising	\$ 82.43	\$ 82.43	\$
4-19-18	132	Publicis Solutions LLC P.O. Box 73 Caldwell, NJ 070060073	marketing	\$ 3,767.92	\$ 3,767.92	\$
		Stripe 510 Townsend Street SAN FRANCISCO, CA 94103 - 4918	Credit card fees	\$ 47.04	47.04	
4-12		USPS 682 Blauvelt Ave Verona, NJ 07044	postage	25.50	\$ 25.50	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 3,822.89	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 4,133.61	\$

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
				\$	\$	\$
			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
				\$
(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
				\$
			TOTAL OUTSTANDING OBLIGATIONS	\$

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
					\$
				SCHEDULE F TOTAL	\$

SCHEDULE G
Recipients of In-Kind Contributions

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.)

\$ 6559.49

Funds Transferred from Prior Campaign

\$ 0

Deposits (Include interest)

\$ 3,365.00

Disbursements (Include bank charges)

\$ 4,935.89

Closing Balance, this Report

\$ 3,088.60

Investor's Bank

McGrath for VeronA TO-4 Counc. 1

NAME OF BANK OR DEPOSITORY

NAME OF ACCOUNT

725 Bloomfield Ave.

Verona, NJ 07044

ADDRESS OF BANK OR DEPOSITORY

Lonna Murphy

973-897-7498

NAME OF TREASURER

*TELEPHONE NUMBER (DAY)

77 Franklin Street, Verona, NJ 07044

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.

5-1-19
DATE

Christine McGrath
PRINT FULL NAME (CANDIDATE)

Christine McGrath
SIGNATURE (CANDIDATE)

DATE

PRINT FULL NAME (CANDIDATE)

SIGNATURE (CANDIDATE)

DATE

PRINT FULL NAME (CANDIDATE)

SIGNATURE (CANDIDATE)

5-1-19
DATE

Lonna Murphy
PRINT FULL NAME (TREASURER)

Lonna Murphy
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)