



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
Phone: (609) 292-8700
Website: www.elec.nj.gov

FORM D-1

ELEC Received
Oct 20, 2023 11:22 AM

Amendment

Candidate Name (required)

DOMINIC FERRY

Office Sought

SCHOOL BOARD

Candidate Committee Name

COMMITTEE TO ELECT DOMINIC FERRY FOR VERONA BOE

Street Address

88 WOODLAND AVENUE

City

State

Zip Code

\*Day Telephone

\*Evening Telephone

VERONA

NJ

07044

973-417-2993

973-417-2993

Committee Email (Optional)

Committee Website (Optional)

Election Type:

School Board

Election Date

11/07/2023

County

ESSEX COUNTY

Legal Name of Election District or Municipality

VERONA BD OF ED

Political Party

NONPARTISAN

CHAIRPERSON

Name

ANGELIKY ATSIOS

Mailing Address

88 WOODLAND AVE

City

State

Zip Code

\*Day Telephone

\*Evening Telephone

VERONA

NJ

07044

201-394-8906

201-394-8906

TREASURER (required)

Name

JORDAN FERRY

Mailing Address

88 WOODLAND

City

State

Zip Code

\*Day Telephone

\*Evening Telephone

VERONA

NJ

07044

201-619-4500

Resident Address

City

State

Zip Code

DEPOSITORY INFORMATION

Name of Bank or Depository

WELLS FARGO

Mailing Address

350 CENTRE STREET

City

State

Zip Code

Day Telephone

NUTLEY

NJ

07110

Account Name

DOMINC FERRY

Account Number

\*\*\*\*\*9476

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.

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

Name

**DOMINIC FERRY**

Mailing Address

**88 WOODLAND AVE**

City

**VERONA**

State

**NJ**

Zip Code

**07044**

\*Day Telephone

**973-417-2993**

\*Evening Telephone

**973-417-2993**

Name

Mailing Address

City

State

Zip Code

\*Day Telephone

\*Evening Telephone

Name

Mailing Address

City

State

Zip Code

\*Day Telephone

\*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.

Registration Number

\*\*\*\*\*

PIN

\*\*\*\*\*

**DOMINIC FERRY**

**10/20/2023**

Candidate (required)

Date

**CHAIRPERSON/TREASURER CERTIFICATION: I certify that the statements on this document are true. I am aware that if any of the** statements are willfully false, I may be subject to punishment.

Registration Number

PIN

Treasurer (required)

Date

Registration Number

PIN

Chairperson

Date

Treasurers for Gubernatorial and Legislative candidates are required to receive training with the NJ ELEC. If you have completed the training enter your Treasurer Training ID#

*\*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.*