

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) Web site http://www.elec.state.nj.us/

FORM D-1 FOR STATE USE ONLY

ELEC RECEIVED APR 1 4 2010

PLEASE TYPE OR PRINT					
Candidate Name EMIL (YITZ) ST	ERN				
Candidate Committee Name			_		
STERN FOR COUN	CIL				
Address (Number and Street, City, State, Zip 309 Edgewood A	Code) ve., Teaneck, N	1J 0'	7666		
*(Area) Day Telephone (201) 837-7330			(Area) Evening Te	lephone 837-7330	
County Bergen	Legal Name of Election D Teaneck	District	or Municipality		
Election Date 5/11/10	Political Party, if any n /	/a		Office Sought Councilme	mber
Election Type (CHECKONE)			Amendment		
☐ Primary ☐ General ☐	School		☐ Yes		:
Municipal □ Run-Off □	Special		I No No		
CHAIRPERSON					
Name Joseph Korn					
Mailing Address 310 Edgewood Ave.					
City Teaneck		State NJ			Zip_Code 07666
*(Area) Day Telephone	*	(Area) (2	Evening Telephon	e 81	
TREASURER					
Name Gilla Stern					
Mailing Address 309 Edgewood Ave.					
^{City} Teaneck	(State NJ			Zip Code 0 7 6 6 6
*(Area) Day Telephone (201) 837-7330		(Area) (2	Eyening Telephor	9 3 0	
Resident Address					
same		State			Zıp Code
City		Siale			Zip Code
DEPOSITORYINFORMATION					
Name of Bank or Depository				 -	
CROSS RIVER BANK Mailing Address '					
885 Teaneck Road		State			Zip Code
Teaneck*		State NJ			Zip Code 0 7 6 6 6
(Area) Day Telephone (201) 808-7000	· · · · · · · · · · · · · · · · · · ·				
Account Name STERN FOR COUNCIL		Accoun	t Number 20	00121240	
New Jersey Election Law Enforcement Commission January 20	05			· · · · · · · · · · · · · · · · · · ·	Form D-1

Page 1 of 2

Name Gilla Ste: Mailing Address			
Mailing Address	rn		
309 Edgewo	ood Ave.		
City Teaneck		State NJ	Zip Code 07666
*(Area) Day Telephone (201) 837	- 7330 · -	*(Area) Evening Telep (201) 837-7	
Name Emil Ster	n		
Mailing Address 309 Edgewo	ood Ave.		The state of the s
City Teaneck	. 1	State NJ	Zip Code 07666
*(Area) Day Telephone (201) 837	- 7330	*(Area) Evening Telep (201) 837-7	
Name			
Mailing Address			
City		State	Zıp Code
*(Area) Day Telephone		*(Area) Evening Telep	phone
committee, establish, authoriz	n this document are true. I further co ze the establishment of, maintain, o	er participate directly or indirectly that if any of the statement	ctly in the management or control of ar
political committee or continu punishment	n this document are true. I further ce ze the establishment of, maintain, o ung political committee. I am aware EMIL (YITZ) STE PRINT FULL NAME (CANDIDATE)	ertify that I have not, and will represent the participate directly or indirectly that if any of the statement ERN	ctly in the management or control of an issare willfully false, I may be subject to
committee, establish, authorize political committee or continue punishment. DATE I certify that the statements of punishment.	n this document are true. I further content to the establishment of, maintain, or using political committee. I am aware EMIL (YITZ) STERMIL (YITZ) STERMIT FULL NAME (CANDIDATE)	ertify that I have not, and will represent the participate directly or indirectly that if any of the statement ERN SIGNATURE.	ctly in the management or control of an is are willfully false, I may be subject to white the subject of the control of an is are willfully false, I may be subject to white the subject of the control of an is are will will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to white the control of an is are will be subject to the control of an is are will be subject to white the control of an is are will be subject to the control of an is are will be subject to the control of an is are will be subject to the control of an is are will be subject to the control of an is are will be subject to the control of an interest to
committee, establish, authorize political committee or continue punishment. Date I certify that the statements of punishment.	n this document are true. I further can be the establishment of, maintain, our ground political committee. I am award EMIL (YITZ) STE PRINT FULL NAME (CANDIDATE) CHAIRPERSON/TREA on this document are true. I am award true. I am award true. JOSEPH. KORN	ertify that I have not, and will represent the participate directly or indirectly that if any of the statement ERN SIGNATURE.	ctly in the management or control of an is are willfully false, I may be subject to the subject to the control of an is are willfully false, I may be subject to the subject to the control of the control of an is are will will be subject to the control of the control of an is are will be subject to the control of an include the
political committee or continuing punishment. DATE L certify that the statements of	n this document are true. I further content to the establishment of, maintain, or using political committee. I am aware EMIL (YITZ) STE PRINT FULL NAME (CANDIDATE) CHAIRPERSON/TREA on this document are true. I am aware true.	ertify that I have not, and will represent the participate directly or indirectly that if any of the statement ERN SIGNATURE.	not during the existence of the candidated in the management or control of an is are willfully false, I may be subject to the candidate of the

EN JERS

CANDIDATE - SWORN STATEMENT

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) Web site http://www.elec.state.nj.us/

FORM A-1

FOR STATE USE ONLY

1973	ELEC RECEIVED						
PLEASE TYPE OR PRINT Candidate Name	APR 1 4 2010						
Candidate Committee Name FOR COUNCIL							
Address (Number and Street, City, State, Zip Code) 309 Edgewood Ave., Teaneck, NJ 07666							
*(Area) Day Telephone *(Area) Evenir							
	837-7330						
County Bergen Legal Name of Election District or Muni Teaneck							
Election Date 5/11/10 Political Party, if any n/a Office Soug	ht cılmember						
Election Type (CHECK ONE) Amendment							
Primary General School Yes							
Municipal □ Run-Off □ Special □ No							
I, the undersigned, do hereby certify as follows . The total amount expended or to be expended on behalf of my candidacy by me or behalf of my candidacy.	ov any other candidate, person, or						
1 The total amount expended or to be expended on behalf of my candidacy by me or committee shall be zero, or shall not, in the aggregate, exceed \$4,000 for this election	on						
I am aware that in the event the total amount expended or to be expended on behalf of my candidacy by me or by any other candidate, person or committee shall, in the aggregate, exceed \$4,000, I am required to file a "Report of Contributions and Expenditures," Form R-1, on each subsequent reporting date							
3 I am aware that if I receive a contribution in excess of \$300 in the aggregate from one s (cash) contribution in any amount, I am required to report the contribution to the Contributor Information," Form C-1, including the identity of the source and the aggregation, if the contributor is an individual, his/her occupation and the name and address	e Commission on "Supplemental ate total of contributions therefrom,						
I am aware that if I receive a contribution in excess of \$1,200 in the aggregate from or before the election up to, and including, the day of the election, I am required to notify "Supplemental Contributor Information," Form C-1, within 48 hours of receipt of the cor and the aggregate amount received therefrom during the period, and, if the contributor and the name and address of his/her employer	y the Commission in writing on the ntribution and to identify the source						
I am aware that if I make, incur, or authorize an expenditure of money or other thing of value in excess of \$1,200 in the aggregate to support or defeat a candidate or public question, starting with the 13 TH 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 Form E-1, "Supplemental Expenditure Information"							
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							
I certify that the statements on this document are true. I am aware that if any of the stateme punishment.	nts are willfully false, I may be subject to						
	$\mathcal{A}_{\mathcal{A}}$						
Candidate Signature Da	ate 4/12/10						
illum () 1	*1/1 */ /0						

SUPPLEMENTAL EXPENDITURE INFORMATION

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) Web site http://www.elec.state.nj.us/

FOR STATE USE ONLY **ELEC RECEIVED**

FORM E-1

To be filed within 48 hours of expenditure by a candidate joint candidates committee or a political committee expending in excess of \$1,200 starting with the 13TH day prior to the election up to, and MAY 06 2010

including, the di	ay of the election					4		
Candidate or C	ommittee Name	STERN FOR C		Elect	on Date 5/11/10	Amendr ☐ Yes	1	
Address /Numb	or and Street City				5/11/10	L) TEX	F 140	
309 Edg	jewood Ave	v, State, Zip Code) • , Teaneck , N	J 07666					
County Bergen Teaneck *(Area) Day Telephone								
Committee Treasurer Name Gilla Stern *(Area) Evening Telephone								
EXPENDITURE	INFORMATION		1		PLEASE PRINT OR TY			
Payment Date	Check No 9/	Purpose /UNTING	1081AGE	Ar \$	mount Incurred/Not Paid	Amou \$	nt Disbursed 3000. —	
Payment Dete Check No 9/ Purpose LINTING INSTAGE Amount Incurred/Not Paid 3 000 Full Name of Payee SINEN STAMEGIES Full Mailing Address 575 LIVEN NALE ND. LIVEN NALE, NJ 07675								
Full Mailing Ad	dress 5	75 KIVELYALÉ	LD.	4110	ENVALE, NJ O	7675		
1 70	n Behalf of Candi	idate(s)/Committee(s)	(Identify Recip	ent)				
Candidate/Com	mittee Full Name		Election E	ate_	Election District or Mu	inicipality	Prorated Amount \$	
								
		<u></u>						
				T A.	mount Incurred/Not Paid	Amou	nt Disbursed	
Payment Date	Check No	Purpose		\$ \$	mount incurred not haid	\$	iit Disbursed	
Full Name of Pa	ayee							
Full Mailing Ad	dress							
Expenditures of	n Behalf of Cand	idate(s)/Committee(s)	(Identify Recip	ient)				
Candidate/Com	mittee Full Name)	Election E	ate	Election District or Mu	nicipality	Prorated Amount \$	
				•		-		
				/				
Payment Date	Check No	Purpose		A S	mount Incurred/Not Paid	Amou \$	nt Disbursed	
Full Name of Pa	ayee	L	/	1Y_	· · · · · · · · · · · · · · · · · · ·	<u></u>		
Full Mailing Ad	dress							
Expenditures of	on Behalf of Cand	idate(s)/Committee(s)	(Identify Recip	lent)				
Candidate/Com	mittee Full Name		Election I	ate	Election District or Mu	inicipality	Prorated Amount \$	
							}	
		EDVDACCHEED)	TOTAL	THIS	SPAGE \$		3000.	
		ERYPAGE USED) (STPAGE USED)		•	TOTAL \$	1-1	n000	
	reasurer Signatur		~		Date	5/5/1		
New Jersey Election Law! *Leave this field blank	nforcement Commission of your telephone number	is unlisted Pursuant to N.J.S.A.	47 1A-1 1 an unlisted	í telephi	one number is not a public record a	nd must not be	Form E-1 Revised 12/2009 provided on this form	

EN LASE A Enforcement & Commission & FIEC &

SUPPLEMENTAL CONTRIBUTOR INFORMATION

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) Web site http://www.elec.state.ni.us/ FORM C-1
FOR STATE USE ONLY
ELEC RECEIVED
MAY 0.6 2010

1973	Web site http://www.elec state nj us/							ורוו מת למוח		
CONTRIBUTIONS REPORT TYPE (CHECK ONE)										
[1/] Committee filing either the Form A-1, A-2, or A-4 and receiving a contribution in excess of \$300 in										
the aggregate from one source in the election, or any currency (cash) contributions Amendment? Committee receiving a contribution in excess of \$1,200 in the aggregate from one source starting								_		
Committee receiving a contribution in excess of \$1,200 in the aggregate from one source starting with the 13 ^{τH} day before the election up to, and including the day of the election (48-Hour Notice)								☐ Yes	IP No	
SECTION I. CANDIDATE, JO	SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION									
Candidate or Committee Name STERN FOR COUNCIL Election Date 5/11/10								0		
Candidate or Committee Address (Number and Street, City, State, Zip Code) 309 Edgewood Ave., Teaneck, NJ 07666										
*(Area) Day Telephone *(Area) Evening Telephone										
Office Sought County Bergen Election District/Municipality Teaneck										
Committee Treasurer Name Gilla Stern	•					Political P	arty			
SECTION II. CONTRIBUTION	ON INFO	RMAT	ION (Rece	eipt T	ypes: A = Cu	rrency or	Check; B = In	-Kind; C = Lo	oan)	
Date Received 5/4/1	0		butor Nam	_	NATHAN		7.7			
Address (Number and Street	City Sta	te Zip	Code) LAN				ate Amount 500.	Amoun \$	500	
0 1 (((1) 1 -1) -1)	reliet		Receipt T	_	Check if Currency	Descrip	tion, if In-Kind	Contribution		
Employer Name (If Individual) Employer Mailing Address (If Individual)										
Date Received		Contri	butor Nam	е				-		
Address (Number and Street	, City, Sta	te, Zıp	Code)			Aggreg: \$	ate Amount	Amoun \$	t	
Occupation (If Individual)			Receipt T		Check if Currency] <u>`</u>	tion, if In-Kind	Contribution		
Employer Name (If Individua	1)		•	Emp	oloyer Mailing A	address (If I	Individual)			
Date Received		Contr	ibutor Nam	ė						
Address (Number and Street	, City, Sta	te, Zip	Code)			Aggreg:	ate Amount	Amoun \$	t	
Occupation (if Individual)			Receipt T	ype	Check if Currency	Descrip	tion, if In-Kind	Contribution		
Employer Name (if Individua	l)			Emp	oloyer Mailing A	ddress (If	Individual)			
Date Received		Contr	ibutor Nam	e			-			
Address (Number and Street	, City, Sta	te, Zip	Code)			Aggreg \$	ate Amount	Amoun \$	t	
Occupation (If Individual)			Receipt T	ype	Check if Currency	Descrip	tion, if In-Kind	Contribution		
Employer Name (If Individua	1)	-		Emp	oloyer Mailing A	ddress (If	Individual)			
(COMPLETE THIS LINE FOR	REVERY	AGE	JSED)	1	TOTAL, THI	SPAGE	\$		500.	
(COMPLETE THIS LINE FO			`		GRAND	TOTAL	\$	- , /	900.	
Candidate or Treasurer Sign	nature ` ¿	17.	+ 1 C	7	•		Date	5/5/1		
_		11/1	WOO				<u> </u>		orm C-1 Revised 12/2008	

SUPPLEMENTAL CONTRIBUTOR INFORMATION

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

FORM C-1 FOR STATE USE ONLY

P O Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) Web site http://www.elec.state.nj.us/								
CONTRIBUTIONS REPORT TYPE (CHECK ONE)	THE CHEC STATE IN L	<u> </u>		MAY 1 2 2010				
Committee filing either the Form A-1, A-2, or A-4 and receiving a contribution in excess of \$300 in								
the aggregate from one source in the election, or any currency (cash) contributions Committee receiving a contribution in excess of \$1,200 in the aggregate from one source starting								
with the 13 TH day before the election up to, and including the day of the election (48-Hour Notice)								
SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION								
Candidate or Committee Name STERN FOR C			tion Date	/11/10				
			5	/11/10				
Candidate or Committee Address (Number and Street, 309 Edgewood Ave., Teaneck,	City, State, Zip Code NJ 07666		·					
*(Area) Day Telephone		*(Area) Evening	Telephone					
Office Sought County Bergen		Election Distric	t/Municipality	,				
Committee Treasurer Name Gilla Stern		Political Party						
SECTION II. CONTRIBUTION INFORMATION (Rec		rrency or Chec	k; B = In-Kin	d; C = Loan)				
Date Received 5/1//b Contributor Nam	e RUT	H BODNO	:K					
Address (Number and Street, City, State Zip Code)		Aggregate An	00 . —	Amount 500. —				
Occupation (if Individual) Receipt T HOMEMAKEN Receipt T	ype Check if Currency	Description, if	In-Kind Contr	noutuan				
Employer Name (If Individual)	Employer Mailing A	ddress (If Individ	ual)					
Date Received 5/1/10 Contributor Nam	E JACK EIZ	KOWITZ						
Address (Number and Street, City, State, Zip Code)	NJ 07666	Aggregate An	Dunt	Amount 500				
Occupation (if Individual) FINANCIAL SCRVICES Receipt T	yee Check if Currency	Description, if	In-Kind Contr	ibution				
Employer Name (If Individual)	Employer Mailing A	ddress (If Individ	ual)					
Date Received 5/7/16 Contributor Nam	e MICHAEL	WIDES						
Address (Number and Street, City State, Zip Gode)	NJ 07631	Aggregate Ag \$	ount 758. –	Amount 350. —				
Occupation (if Individual) Receipt T	Currency	Description, if		ibution				
Employer Name (If Individual) WILDES & WEIN PEUG	Employer Mailing A		wy Ny	10022				
Date Received Contributor Name	e	· · · · · · · · · · · · · · · · · · ·						
Address (Number and Street, City, State, Zip Code)		Aggregate An	iount	Amount \$				
Occupation (If Individual) Receipt Ty	ype Check if Currency	Description, #	In Kind Contro	bution				
Employer Name (If Individual)	Employer Mailing A	ddress (If Individi	ıal)					
	L	<u> </u>		/3/0				
(COMPLETE THIS LINE FOR EVERY PAGE USED)	TOTAL, THIS	PAGE \$		170.				
(COMPLETE THIS LINE FOR LAST PAGE USED)	GRAND 1		/	350.				
Candidate or Treasurer Signature		Date	5/8	/10				

EN JERSE

SUPPLEMENTAL CONTRIBUTOR INFORMATION

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

FORM C-1

FOR STATE USE ONLY

## FIFE ## (609) 292	P O Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) Web site http://www.elec.state.nj.us/							
CONTRIBUTIONS REPORT TYPE	. 1-	MAY 1 2 2010						
the aggregate from one source in Committee receiving a contribution with the 13 TH day before the elect	source starting	Amendment? Yes Mo						
SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION								
Candidate or Committee Name STERN FOR COUNCIL Election Date 5/11/10								
Candidate or Committee Address (Number and Street, City, State Zip Code) 309 Edgewood Ave., Teaneck, NJ 07666								
*(Area) Day Telephone (Area) Evening Telephone								
Office Sought Council member Council	Bergen		-		District/Municipa neck	ality		
Committee Treasurer Name Gilla Stern				Political Pa	arty ————			
SECTION II. CONTRIBUTION INFO			ypes: A = Cui	rrency or	Check; B = In-	Kind; C = Loan)		
Date Received 5/1/10		IN L	EALTY CA					
Address (Number and Street, City, Sta 25 MAIN \$1.	HAUCENSAUL			\$ /	ate Amount	Amount 500		
Occupation (If Individual)	Receipt I		Check if Currency]	tion, if In-Kind C	Contribution		
Employer Name (If Individual)		1	loyer Mailing A	•	·			
Date Received 5/7//9	Contributor Nam	ZHA	EN FOR	assemi	BLY			
Address (Number and Street, City, Sta	ate, 21p Code) KVČ. / KSSA	K, N	J 07055	Aggrega \$	ite'Amount	Amount \$ 1500		
Occupation (If Individual)	Receipt T	Гуре	Check if Currency	Descript	tion, if In-Kind C	ontribution		
Employer Name (If Individual)			loyer Mailing A	ddress (if i	ndıvıdual)			
Sate Received	Contributor Nam	ie						
Address (Number and Street, City, Sta				\$	ate Amount	Amount \$		
Occupation (If Individual)	Receipt T		Check if Currency	7	tion, if In-Kind C	ontribution		
Employer Name (If Individual)		\geq	lover Mailing Ad	ddress (if ir	ndividual)			
Date Received	Contributor Nam	ie						
Address (Number and Street, City Sta				\$	ate Amount	Amount \$		
Occupation (If Individual)	Receipt T		Check if Currency	Descript	on, if In-Kind C	ontribution		
Employer Name (If Individual)		Empl	loyer Mailing Ac	idress (if ir	ndividual)			
COMPLETE THIS LINE FOR EVERY P	'AGE USED)		TOTAL, THIS	PAGE	\$	3000 3000		
COMPLETE THIS LINE FOR LAST	PAGE USED)		GRAND T	OTAL	\$	3000.		
Candidate or Treasurer Signature	un St				Date 5/	3/10		

Form C-1 Revised, 12/2008

EN JERSA

SUPPLEMENTAL CONTRIBUTOR INFORMATION

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

P O Box 185, Trenton, NJ 08625-0185

FORM C-1

FOR STATE USE ONLY

LLEC RECEIVED

(609) 292-				i NJ 1-888-313- elec state nj us		35) نـ	32)	ELE	C RECI	EIVĘI	0
the aggregate from one source in the election, or any currency (cash) contributions Amend Committee receiving a contribution in excess of \$1,200 in the aggregate from one source starting								AY 14 2 ndment? Yes	2010 No		
SECTION I CANDIDATE, JOINT CAN			<u> </u>	<u> </u>							
Candidate or Committee Name	FRN FC						Election Date	5/	11/10		
Candidate or Committee Address (Nun 309 Edgewood Ave.,	ber and S Teane	treet, Cit	y, St	ate, Zip Code) 07666							
*(Area) Day Telephone					*(Are	a) Ev	ening Telepho	ne		, ,	
Office Sought County Bergen Election District/Municipality Teaneck											
Committee Treasurer Name Gilla Stern		•			Poliție N	7 a	arty				
SECTION II CONTRIBUTION INFO	RMATION	l (Recei	pt Ty	ypes: A = Cur	rency	or	Check; B = In	-Kind	, C = Loai	1)	
Date Received 5/12/10	Contribute	r Name	1	PANNE ZAY	AT						-
Address (Number and Street, City, Sta	te, Zin Coo	e) CK., N	T	07666	Ag \$	grega	ate Amount		Amount \$	500	_
Occupation (If Individual) Home MAKEN	Re	ceipt Typ		Check If Currency	De	scrip	tion, if In-Kind	Contri	bution		
Employer Name (If Individual)	•	Ī	Emp	loyer Mailing Ad	dres	s (If I	Individual)		•		`•
Date Received 5/12/10	Contribute		IUI	HALLY KU	112	-					
Address (Number and Street, City, Sta	te, Zip Coo	le)CLIFF	\$, 1	J 07632	Ag \$	greg	ate Amount		Amount . \$	1000	_
Occupation (If Individual) REAL ESTATE	Re	ceipt Typ	oe'	Check if Currency	De	scrip	tion, if In-Kind	Contri	bution		
Employer Name (If Individual) THE KAMSON COM				loyer Mailing Ad	ddres	s (If	Individual)				
Date Received 5/14/10	Contribute	or Name	J	PAVITY CAL	MEL						
	VENO09	NJ 8		3/	\$		ate Amount		Amount \$	100	٠. ١
Occupation (If Individual)	Ré	celpt Typ		Check if Currency]	•	ition, if In-Kind	Contri	bution		
Employer Name (If Individual)		1	Émp	loyer Mailing A	ddres	s (If <i>H</i> 9.	Individual) , EDGEWAT	Ex,	NJ 070	20	
Date Received	Contribute	or Name					,	/			مسسد
Address (Number and Street, City, Sta	te, Zip Coo	ie)			Ag \$	greg	ate Amount		Amount \$		
Occupation (If Individual)	Re	ceipt Tyr	oe	Check if Currency	De	scrip	otion, if In-Kind	Contn	bution		
Employer Name (If Individual)	•		Émp	loyer Mailing A	ddres	s (if	Individual)			^	
(COMPLETE THIS LINE FOR EVERY	AGEUSE	D)		TOTAL, THIS	PAG	E	\$		250	10.	<u></u>
(COMPLETE THIS LINE FOR LAST	PAGE US	ED)		GRAND 1	ОТА	L _	\$ <u>_</u> _		25	00 . 1	
Candidate or Treasurer Signature	ر ر						Date 5	2/10			

SUPPLEMENTAL CONTRIBUTOR INFORMATION

FORM C-1 FOR STATE USE ONLY

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

\^.\\\/////	AASD 24G 14GD WAMAN GISC 25GG 13 GS						
CONTRIBUTIONS REPORT TYPE (CHECK ONE) Committee filing either the Form A-1, A-2, or A-4 and receiving a contribution in excess of \$300 in							
the aggregate from one source in the election, or any currency (cash) contributions Amendment?							
□ Committee receiving a contribution in excess of \$1,200 in the aggregate from one source starting with the 13 [™] day before the election up to, and including the day of the election (48-Hour Notice) □ Yes □ No							
SECTION I. CANDIDATE, JOINT CAN	DIDATES, OR PO	LITICALCOMMITT					
Candidate or Committee Name STERN FOR COUNCIL Election Date 5/11/10							
Candidate or Committee Address (Number and Street, City, State, Zip Code) 309 Edgewood Ave., Teaneck, NJ 07666							
*(Area) Day Telephone	•		*(Area) Evening Telep				
Office Sought Councilmember Councilmember	Bergen		Election District/Muni Teaneck	cipality			
Committee Treasurer Name Gilla Stern			Political Party				
SECTION II. CONTRIBUTION INFO			irrency or Check; B =	in-Kind; C = Loan)			
Date Received 5/13/10	Contributor Name	* UCON SO					
Address (Number and Street, City Sta	1 //		Aggregate Amount \$	• / • / •			
Occupation (If Individual)	Receipt V	Currency [Description, if In-Kin				
Employer Name (If Individual) SOKOL, BEHA & FLOURING	o	Employer Mailing /	Address (If Individual)	exemster, of 07601			
Date Received	Contributor Name	e	•	· /			
Address (Number and Street, City, Sta	te, Zıp Code)		Aggregate Amount	Amount \$			
Occupation (if Individual)	Occupation (If Individual) Receipt Type Check if Description, if In-Kind Contribution						
Employer Name (If Individual) Currency Employer Mailing Address (If Individual)							
Employer Name (If Individual)	.!		Address (If Individual)				
Employer Name (If Individual) Date Received	Contributor Nam	Employer Mailing	Address (If Individual)				
		Employer Mailing	Address (If Individual) Aggregate Amount	Amount \$			
Date Received		Employer Mailing	Aggregate Amount	\$			
Date Received Address (Number and Street, City, Sta	te, Zip Code)	e ype Check if Currency	Aggregate Amount	\$			
Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual) Date Received	Receipt Ty Contributor Name	e Check if Currency Employer Mailing	Aggregate Amount \$ Description, if In-Kin	\$			
Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual)	Receipt Ty Contributor Name	e Check if Currency Employer Mailing	Aggregate Amount \$ Description, if In-Kin	\$			
Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual) Date Received	Receipt Ty Contributor Name	e Check if Currency Employer Mailing	Aggregate Amount \$ Description, if In-Kin Address (If Individual) Aggregate Amount	\$ d Contribution Amount			
Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual) Date Received Address (Number and Street, City, State Occupation)	Receipt Ty Contributor Name	e ype Check if Currency Employer Mailing A	Aggregate Amount \$ Description, if In-Kin Address (If Individual) Aggregate Amount \$	\$ d Contribution Amount			
Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual) Date Received Address (Number and Street, City, State Occupation (If Individual)	Contributor Name	e ype Check if Currency Employer Mailing A	Aggregate Amount \$ Description, if In-Kin Address (If Individual) Aggregate Amount \$ Description, if In-Kin	Amount \$ d Contribution			
Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual) Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual)	Contributor Name	e Check if Currency Employer Mailing A e Check if Currency Employer Mailing A Employer Mailing A TOTAL, THI	Aggregate Amount \$ Description, if In-Kin Address (If Individual) Aggregate Amount \$ Description, if In-Kin	Amount \$ Id Contribution			
Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual) Date Received Address (Number and Street, City, State Occupation (If Individual) Employer Name (If Individual) (COMPLETE THIS LINE FOR EVERY FOR EVER	Contributor Name	e Check if Currency Employer Mailing A e Check if Currency Employer Mailing A Employer Mailing A TOTAL, THI	Aggregate Amount \$ Description, if In-Kin Address (If Individual) Aggregate Amount \$ Description, if In-Kin Address (If Individual)	Amount \$ d Contribution			

FORM R-1	REPORT	OF CONTR		NS AND		REPORT (CHECK (
NEW JERS	\dashv	11 - DAY PRE-ELECTION								
P O Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)						20 - DAY POS				
(609) 292-8700 or Toll Free Within NJ 1-866-313-ELEC (3532) Web site http://www.elec.state.nj.us/						Apr 15,				
CANDIDATE OR C			-		\neg	Oct 15,				
STERM STREET ADDRESS	Y FOR COUNCII					Jan 15,				
	s Edgewood Ave	•				Amendment Yes No 🗹				
CITY	STATE ZIP CODE Teaneck NJ 07666					For Stat	e Us	e Only		
COUNTRY		, , ,		R MUNICIPALITY	$\overline{}$	ELI	EC R	ECEIVED		
Berge	en	Tĕàñè	CR"			.n	JN 1	1 2010		
POLITICAL PARTY n/a	POLITICAL PARTY, IF ANY OFFICE SOUGHT Councilmember							2010		
ELECTION DATE 5/11	/10	ELECTION TY (CHECK ONE)		PRIMARY RUN-OFF		MUNICIPAL [SCHOOL [SENERAL SPECIAL		
SUMMARY TAB	LES DO NOT ATTEM			LES I AND II UNT N COMPLETED	ΓłL					
TABLE I. RECEI	PTS					THIS REPORT	Ci	UMULATIVE TO DATE		
1 MONETARY CONTRIBUTIONS OF \$300 OR LESS				\$	11387.	\$	11387			
2 MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY				\$	7850	\$	7850.			
CONTRIBUTIONS [Schedule A] 3 IN-KIND CONTRIBUTIONS OF \$300 OR LESS				\$	258.11	\$	V58.11			
4 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]				\$	/	\$				
5 LOANS RECEI [Schedule C]	VED IN EXCESS OF \$	300 AND ALL C	URRENC	Y LOANS	\$	/	\$	/		
6 SUB TOTAL			(ADD L	INES 1 THRU 6)	\$	19495.11	\$	19495.11		
7 REFUND OF E	EXCESSIVE CONTRIB	JTIONS (Adjust	ment Sche	edule} (-)	\$	/	\$	/		
8 TOTAL CONTI	RIBUTIONS				\$	19495.11	\$	19495.11		
9 ADD FUNDS T	RANSFERRED FROM	PRIOR CAMPA	AIGN	(+)	\$	-	\$			
10 TOTAL RECE	IPTS		(ADD	LINE 8 + LINE 9)	\$	19495.11	\$	19495.11		
TABLE II. EXPE	INDITURES		·							
1 DISBURSEME	ENTS -CAMPAIGN EX	PENSES (Sched	dule 1(D)]		\$	15920,06	\$	15922.06		
	ENTS - OTHER [Sched				\$	100.	\$	100.		
	ENTS - CONTRIBUTIO S/COMMITTEES (Sche		OTHER		\$	/	\$	/		
4 CONTRIBUTI	ONS MADE ON BEHA ount Schedules 1(D) an	LF OF OTHERS	3		\$	/	\$	/		
5 IN-KIND CON	ITRIBUTIONS OF \$300	OR LESS (TAI	BLE I, LINI	E 3)	\$	258.11	\$	258.11		
6 IN-KIND CON	ITRIBUTIONS IN EXC	ESS OF \$300 (T	ABLE I, LI	NE 4)	\$	-	\$	/		
7 SUB TOTAL			(ADD I	LINES 1 THRU 6) \$	16280.17	\$	16280.17		
8 REFUNDED	DISBURSEMENTS [Sc	hedule F]		(-)\$	/	\$			
9 TOTAL EXPE	ENDITURES		(LINE	7 MINUS LINE 8	\$	16280 17	\$	16280.17		

SCHEDULE A

Monetary Contributions in Excess of		Contributions				
CONTRIBUTOR NAME LEON SOKOL	EMPLOYER NAME SOKOL, BEHOT	r & FIORENZO				
CONTRIBUTOR ADDRESS 2 Wadsworth Ct.	EMPLOYER ADDRESS 433 Hackensack Ave.					
Teaneck NJ 07666	Hackensack NJ 07601					
CHECK IF AGGREGATE AMOUNT CURRENCY \$ \$ 500.00	DATE(S) RECEIVED 5/13/10	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00				
accorney						
CONTRIBUTOR NAME JOANNE ZAYAT	employer name n/a					
CONTRIBUTOR ADDRESS 598 Warwick Ave.	EMPLOYER ADDRESS					
Teaneck NJ 07666						
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD				
OCCUPATION homemaker	5/12/10	\$ 500.00				
CONTRIBUTOR NAME RICHARD KURTZ	EMPLOYER NAME THE KAMSON (CORP.				
CONTRIBUTOR ADDRESS 270 Sylvan Ave.	EMPLOYER ADDRESS 270 Sylvan A	Ave.				
Englewood Cliffs NJ 07632	Englewood C	liffs NJ 07632				
CHECK IF AGGREGATE AMOUNT CURRENCY \$ 1000.00	DATE(S) RECEIVED 5/12/10	AMOUNT(S) RECEIVED THIS PERIOD \$ 1000.00				
CONTRIBUTOR NAME	EMPLOYER NAME					
DAVID CARMEL	self					
CONTRIBUTOR ADDRESS 231 Broad Ave.	EMPLOYER ADDRESS 523 River	Rđ.				
Englewood NJ 07631	Edgewater 1	NJ 07020				
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED 5/12/10	AMOUNT(S) RECEIVED THIS PERIOD \$ 1000.00				
OCCUPATION attorney	37127.0					
CONTRIBUTOR NAME RUTH BODNER	EMPLOYER NAME n/a	· · · · · · · · · · · · · · · · · · ·				
CONTRIBUTOR ADDRESS 1410 Somerset Gate	EMPLOYER ADDRESS					
Teaneck NJ 07666						
CHECK IF AGGREGATE AMOUNT CURRENCY \$ 500.00	DATE(S) RECEIVED 5/7/10	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00				
OCCUPATION homemaker						
(COMPLETE THIS LINE FOR EVERY PAGE USED) TO	OTAL, THIS PAGE	3500.00				
(COMPLETE THIS LINE FOR LAST PAGE USED) G	RAND TOTAL	<u></u>				

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

CONTRIBUTOR NAME	EMPLOYER NAME	
JACK EIZIKOWITZ	ICTI	
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	
255 Frances St.	525 Washing	ton Blvd.
Teaneck NJ 07666	Jersey City	, NJ
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
000110471011	5/7/10	\$ 500.00
rinancial services	CMDLOVED NAME	
CONTRIBUTOR NAME MICHAEL WILDES	EMPLOYER NAME WILDES & WE	INBERG
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	•
250 Allison Ct.	515 Madison	a Ave.
Englewood NJ 07631	New York N	
CHECK IF AGGREGATE AMOUNT CURRENCY (1) \$ 350.00	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
	5/7/10	\$ 350.00
accorney		<u> </u>
CONTRIBUTOR NAME GARY SCHAER/SCHAER FOR ASSEMBL	EMPLOYER NAME Y STATE OF	NJ
CONTRIBUTOR ADDRESS 511 Passaic Ave.	EMPLOYER ADDRESS Trenton N	IJ
Passaic NJ 07055		
CHECK IF AGGREGATE AMOUNT CURRENCY \$ 1500.00	DATE(S) RECEIVED 5/7/10	AMOUNT(S) RECEIVED THIS PERIOD \$ 1500.00
OCCUPATION NJ State Assembly] 3,7,10	1300.00
CONTRIBUTOR NAME	EMPLOYER NAME	A
DAVID SANZARI	ALSAN REAL	TY
CONTRIBUTOR ADDRESS 11 Stonewall Dr.	EMPLOYER ADDRESS 25 Main St	•
Saddle River NJ 07458	Hackensack	NJ 07601
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
100///(2//01 — 4	5/7/10	\$ 1500.00
OCCUPATION real estate		
CONTRIBUTOR NAME NATHAN LINDENBAUM	EMPLOYER NAME n/a	•
CONTRIBUTOR ADDRESS 464 Winthrop Rd.	EMPLOYER ADDRESS	
Teaneck NJ 07666		,,,
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
1001(121101 = 14	5/4/10	\$ 500.00
OCCUPATION retired		
		4350.00
(COMPLETE THIS LINE FOR EVERY PAGE USED) TO	OTAL, THIS PAGE	\$ 4350.00
(COMPLETE THIS LINE FOR LAST PAGE USED) GI	RAND TOTAL	\$ 7850.00
	. h	

PAYMENT DATE	CHECK	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
4/27/10	68	COUNTY SEAT Hackensack NJ	advertising	\$ 175.00	\$ 175.00	l V
=	06	VICCARO PRINTING Paramus, NJ	letters/ envelopes	419.97	419.97	I
5/6/10	16	SILVER STRATEGIES Rivervale, NJ	mailer design/ printing	3000.00	3000.00	ı
5/9/10	92	VICCARO PRINTING Paramus, NJ	flyers	171.20	171.20	J
5/10/10	93	POPPY'S Teaneck, NJ	breakfast	70.00	70.00	ı
5/13/10	94	MCCLINTOCK ASSOC. Scotch Plains, NJ	labels	233.71	233.71	ı
5/13/10	95	Y. KARL Teaneck, NJ	photographer	200.00	200.00	ı
5/15/10	96	SILVER STRATEGIES Rivervale, NJ	maller design/ printing	5800.00	5800.00	ı
5/15/10	98	E. Stern Teaneck, NJ	reimburse printing/off. su	548.16 supp.	548.16	i
5/15/10	66	E. Stern Teaneck, NJ	reımburse postaqe	3469.12	3469.12	I
			TOTAL THIS PAGE	14087.16	\$ 14087.16	۱ ن
(COMPLETE TH	IIS LINE FOF	(COMPLETE THIS LINE FOR EVERT PAGE USED)	GRAND TOTAL	1	l ₩	ι 6
New Jersey Election Law Enforcement Commission	inforcement Commi	sion	d &			FORM R-1 Revised 12/2008

			•			
PAYMENT DATE	CHECK	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
5/16/10	100	AGE GRAPHICS Long Bottom, OH	lawn sıgns	\$ 1030.00	\$ 1030.00	l ω
5/17/10	101	EDEN WOK New York, NY	<pre>party food/ platters/utensils</pre>	705.00	705.00	ı
5/26/10	102	STREAM SEND Sacrameato, CA	emaıl marketıng	06.66	06.66	1
	. ———					
	-			·		
				· · · · · · ·		
			6	1834.90	\$ 1834.90	ا نئ
(COMPLETE THE	S LINE FOR	(COMPLETE THIS LINE FOR EVERY PAGE USED)	GRAND TOTAL	15922.06	\$15922.06	t
(COMPLETE IN		(COMPLETE THIS LINE FOR LAST PAGE USED)				
New Jersey Election Law Enforcement Commission	forcement Commi	tors	q ⁹			FORM R-1 Revised 12/2008

(

SCHEDULE 2(D) - DISBURSEMENTS Other

CHECK	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
, -	CONG. BNAI YESHURUN Teaneck, NJ	donation	100.00	100.00	l ω
		DOAG SIDE LATOR	\$ 100.00	\$ 100.00	\$
Щ "	(COMPLETE THIS LINE FOR EVERY PAGE USED)	GRAND TOTAL	\$ 100.00	\$ 100.00	ì o
4 '					

STATEME	NT OF CAMPAIGN DEPOSITORY AND CAMPAIG	N TREASURER
Opening Balance, this re (Insert closing balance of la- insert zero)	report st report, or, if this is the first report filed by this entity for this election,	s
Funds Transferred from	n Prior Campaign	\$
Deposits (Include interest)	\$ 19237.00 \$ 1602.06 \$ 3214.94
Disbursements (Include	bank charges)	\$ /6022.06
Closing Balance, this R	eport	\$ 3214.94
CROSS RIVER	-	TERN FOR COUNCIL
885 Teaneck		NAME OF ACCOUNT
Joy Tealleck	ADDRESS OF BANK OR DEPOSITORY	
GILLA STERN	The state of the s	
NAME OF TREASURER 309 Edgewood	Ave., Teaneck, NJ 07666	*TELEPHONE NUMBER (DAY)
	ADDRESS OF TREASURER	
	CERTIFICATION	
	is on this document are true, and that the contribution amounts recare that if any of the statements are willfully false, I may be subject to EMIL (YITZ) STERN	
DATE		TURE (CANDIDATE)
UATE	PRINT POLE NAME (CANDIDATE) SIGNA	TORE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	TURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	TURE (CANDIDATE)
5/27/10	GILLA STERN JA	UV Ha
DATE		TURE (TREASURER)
	al and Legislative candidates are required to receive training with the N Check here I if you have completed the training and enter your Treas	
	DECLARATION OF FINAL REPORT	
that all filing entities continu	n applicable Declaration below as well as Certification above. Chapter ue to file reports with the Commission until all campaign business is wortions or other monies received by this election fund have been disburs ins, and that the election fund has wound up its business and has been	ound up and the fund is dissolved sed, that there are no outstanding
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	ATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	ATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	ATURE (CANDIDATE)
DATE	PRINT FULL NAME (TREASURER) SIGNA	TURE (TREASURER)

FORM R-1	REPORT	OF CONTR		NS AND		REPORT (CHECK 29 - DAY PR		
	SEY ELECTION LAV PO Box 185, Tre 92-8700 or Toll Free V Web site http://v	nton, NJ 08625 Vithin NJ 1-888-	-0185 313-ELEC (11 - DAY PR 20 - DAY PC Apr 15, July 15,	ST-EI	LECTION
CANDIDATE OR C STERN	OMMITTEE NAME 1 FOR COUNCI					Oct 15,		
STREET ADDRESS 309 F	S Edgewood Ave	•	-			Amendment Yes		
CITY Teane	eck	STATE NJ	ZIP CODE 076			For Sta		<i>'</i>
COUNTY Berge	en	ELECTION DI	STRICT OR	MUNICIPALITY	,	ELEC F	RECI	EIVED
POLITICAL PARTY	, IF ANY	OFFICE SOUC	SHT Llmembe	er		JUN 2	2 5 2	010
ELECTION DATE 5/11	/10	ELECTION TY (CHECK ONE		PRIMARY RUN-OFF		MUNICIPAL SCHOOL		SENERAL SPECIAL
SUMMARY TAB	LES DO NOT ATTEN				ΓIL			
TABLE I. RECEI	PTS					THIS REPORT	Cl	JMULATIVE TO DATE
	ONTRIBUTIONS OF \$				\$	11387.	\$	11387
	ONTRIBUTIONS IN EX INS [Schedule A]	(CESS OF \$300	AND ALL	CURRENCY	\$	7850	\$	7850.
3 IN-KIND CONT	RIBUTIONS OF \$300	OR LESS			\$	258.11	\$	258.11
4 IN-KIND CONT	RIBUTIONS IN EXCES	SS OF \$300 [Sc	hedule B]	!	\$	/	\$	/
5 LOANS RECEING [Schedule C]	VED IN EXCESS OF \$	300 AND ALL C	URRENCY	LOANS	\$		\$	/
6 SUB TOTAL			(ADD LII	NES 1 THRU 5)	\$	19495.11	\$	19495.11
7 REFUND OF E	XCESSIVE CONTRIBI	JTIONS [Adjust	ment Sched	iule} (-)	\$	/	\$	/
8 TOTAL CONTR	RIBUTIONS				\$	19495.11	\$	19495.11
9 ADD FUNDS T	RANSFERRED FROM	PRIOR CAMPA	AIGN	(+)	\$	-	\$	
10 TOTAL RECEI	PTS		(ADD L	INE 8 + LINE 9)	\$	19495.11	\$	19495.11
TABLE II. EXPE	NDITURES							
1 DISBURSEME	NTS -CAMPAIGN EXI	PENSES (Sched	dule 1(D)]		\$	15920.06	\$	15922.06
2 DISBURSEMENTS - OTHER [Schedule 2(D)] 3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER			\$	100.	\$	100,1		
3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]			\$		\$			
CANDIDATES/COMMITTEES [Schedule 3(D)] 4 CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]			\$	/	\$			
5 IN-KIND CON	TRIBUTIONS OF \$300	OR LESS (TA	BLE I, LINE	3)	\$	258.11	\$	258.11
6 IN-KIND CON	TRIBUTIONS IN EXCE	SS OF \$300 (T	ABLE I, LIN	IE 4)	\$,	\$	1
7 SUB TOTAL			(ADD LI	NES 1 THRU 6)	\$	16280.17	\$	16280.17
8 REFUNDED D	DISBURSEMENTS (Sc	hedule F]		(-)	\$		\$	-
9 TOTAL EXPE	NDITURES		(LINE 7	MINUS LINE 8)	\$	16280 17	\$	16280.17

SCHEDULE A Monetary Contributions in Excess of \$300 and Ali Currency Contributions

CONTRIBUTOR NAME	EMPLOYER NAME	
LEON SOKOL	SOKOL, BEHO!	r & FIORENZO
CONTRIBUTOR ADDRESS 2 Wadsworth Ct.	EMPLOYER ADDRESS 433 Hackensa	ack Ave.
Teaneck NJ 07666	Hackensack N	NJ 07601
CHECK IF AGGREGATE AMOUNT CURRENCY \$ \$ 500.00 AMOUNT STATE OF THE STAT	DATE(S) RECEIVED 5/13/10	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00
CONTRIBUTOR NAME JOANNE ZAYAT	EMPLOYER NAME n/a	
CONTRIBUTOR ADDRESS 598 Warwick Ave.	EMPLOYER ADDRESS	
Teaneck NJ 07666		
CHECK IF AGGREGATE AMOUNT CURRENCY \$ \$	DATE(S) RECEIVED 5/12/10	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00
OCCUPATION homemaker		
CONTRIBUTOR NAME RICHARD KURTZ	EMPLOYER NAME THE KAMSON (CORP.
CONTRIBUTOR ADDRESS 270 Sylvan Ave.	EMPLOYER ADDRESS 270 Sylvan <i>l</i>	Ave.
Englewood Cliffs NJ 07632	Englewood Cl	liffs NJ 07632
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
	5/12/10	\$ 1000 . 00
OCCUPATION real estate		
CONTRIBUTOR NAME	EMPLOYER NAME	
DAVID CARMEL	self	
CONTRIBUTOR ADDRESS 231 Broad Ave.	EMPLOYER ADDRESS 523 River F	Rd.
Englewood NJ 07631	Edgewater N	
CHECK IF AGGREGATE AMOUNT CURRENCY S	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
OCCUPATION attorney	5/12/10	\$ 1000.00
CONTRIBUTOR NAME RUTH BODNER	EMPLOYER NAME n/a	
CONTRIBUTOR ADDRESS 1410 Somerset Gate	EMPLOYER ADDRESS	
Teaneck NJ 07666		
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
CURRENCY \$ 500.00 OCCUPATION homemaker	5/7/10	\$ 500.00
	OTAL, THIS PAGE	3500.00 \$
(COMPLETE THIS DIRE FOR EVERT PAGE USED)	THE TABLE	_
(COMPLETE THIS LINE FOR LAST PAGE USED) GI	RAND TOTAL	\$

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

CONTRIBUTOR NAME	EMPLOYER NAME	
JACK EIZIKOWITZ	ICTI	
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	
255 Frances St.	525 Washing	yton Blvd.
Teaneck NJ 07666	Jersey City	
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
CURRENCY \$ 500.00 OCCUPATION financial services	5/7/10	\$ 500.00
CONTRIBUTOR NAME	EMPLOYER NAME	
MICHAEL WILDES	WILDES & WE	EINBERG
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	
250 Allison Ct.	515 Madisor	Ave.
Englewood NJ 07631	New York N	VY 10022
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
10011121101 — [0	5/7/10	\$ 350 . 00
OCCUPATION attorney		
CONTRIBUTOR NAME GARY SCHAER/SCHAER FOR ASSEMBL	EMPLOYER NAME Y STATE OF	ŊJ
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS Trenton N	17
511 Passaic Ave.	Trencon r	10
Passaic NJ 07055		
CHECK IF AGGREGATE AMOUNT	DATE(\$) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
	5/7/10	\$ 1500.00
OCCUPATION NJ State Assembly		
CONTRIBUTOR NAME	EMPLOYER NAME	
DAVID SANZARI	ALSAN REAL	ТҮ
CONTRIBUTOR ADDRESS 11 Stonewall Dr.	EMPLOYER ADDRESS 25 Main St	•
Saddle River NJ 07458	Hackensack	NJ 07601
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
CURRENCY \$ 1500.00	5/7/10	\$ 1500.00
OCCUPATION real estate]	
CONTRIBUTOR NAME NATHAN LINDENBAUM	EMPLOYER NAME n/a	
CONTRIBUTOR ADDRESS 464 Winthrop Rd.	EMPLOYER ADDRESS	
Teaneck NJ 07666		
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
0011110.	5/4/10	\$ 500.00
OCCUPATION retired		
	<u> </u>	
(COMPLETE THIS LINE FOR EVERY PAGE USED) TO	TAL, THIS PAGE	\$ 4350.00
	•	7850.00
(COMPLETE THIS LINE FOR LAST PAGE USED) GI	RAND TOTAL	\$ 7830.00

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
4/27/10	89	COUNTY SEAT Hackensack NJ	advertısing	\$ 175.00	\$ 175.00	l 9
=	06	VICCARO PRINTING Paramus, NJ	letters/ envelopes	419.97	419.97	I
5/6/10	91	SILVER STRATEGIES Rivervale, NJ	mailer design/ printing	3000.00	3000.00	ſ
5/9/10	92	VICCARO PRINTING Paramus, NJ	flyers	171.20	171.20	l
5/10/10	93	POPPY'S Teaneck, NJ	breakfast	70.00	70.00	ı
5/13/10	94	MCCLINTOCK ASSOC. Scotch Plains, NJ	labels	233.71	233.71	I
5/13/10	95	Y. KARL Teaneck, NJ	photographer	200.00	200.00	i
5/15/10	96	SILVER STRATEGIES Rivervale, NJ	mailer design/ printing ,	5800.00	5800.00	ì
5/15/10	98	E. Stern Teaneck, NJ	reimburse printing/off. supp	548.16 pp.	548.16	1
5/15/10	66	E. Stern Teaneck, NJ	reimburse postage	3469.12	3469.12	ı
HT ETE TH	IN FOR	(COMPLETE THIS LINE FOR EVERY PAGE (ISED)	TOTAL THIS PAGE	14087.16	\$ 14087.16	- \$
(COMPLETE TH	IIS LINE FOF	(COMPLETE THIS LINE FOR LAST PAGE USED)	GRAND TOTAL	1	l 69	Ι ()
New Jersey Election Law Enforcement Commission	Enforcement Commi	ssion	£ 9			FORM R-1 Revised 12/2008

PAYMENT DATE	CHECK	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
5/16/10	100	AGE GRAPHICS Long Bottom, OH	lawn sıgns	1030.00	\$ 1030.00	l G
5/17/10	101	EDEN WOK New York, NY	<pre>party food/ platters/utensils</pre>	705.00	705.00	ı
5/26/10	102	STREAM SEND Sacrameato, CA	emaıl marketıng	06*66	06.66	I
	·					
COMPLETE TH		COMPANY ETE TURE I NIE END EVEDV DAGE 118ED	TOTAL THIS DAGE	1834.90	\$ 1834.90	ا ن
		(COMPLETE THIS LINE FOR LYEN FASE USED)	S S TOTAL S S S S S S S S S S S S S S S S S S S	15922.06	\$15922.06	ا دی
	IS LINE TO	(LAS) PAGE USED)	פאשונים			
New Jersey Election Law Enforcement Commission	inforcement Commi	ssion	q g			FORM R-1 Revised 12/2008

SCHEDULE 2(D) - DISBURSEMENTS Other

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
5/15/10	97	CONG. BNAI YESHURUN Teaneck, NJ	donation	\$ 100.00	100.00	l €7
HA SES (GANCO)	IN I NE	COMPLETE THIS LINE SOD EVEDY DAGE LISED)	TOTAL THIS PAGE	\$ 100.00	\$ 100.00	\$
(COMPLETE TH	IIS LINE FOR		GRAND TOTAL	\$ 100.00	\$ 100.00	Î

FORM R-1 Revised 12/2008

STATEM	ENT OF CAMPAIGN DEPOSITORY AND CA	MPAIGN TREASURER
Opening Balance, this (Insert closing balance of la insert zero)	report ast report, or, if this is the first report filed by this entity for this	s election, s
Funds Transferred from	n Prior Campaign	\$
Deposits (Include interes	st)	\$ /9137.00
Disbursements (Include	a bank charges)	s /6022.06 s 3214.94
Closing Balance, this I	Report	\$ 3214.94
CROSS RIVER		STERN FOR COUNCIL NAME OF ACCOUNT
		NAME OF ACCOUNT
00) Teametr	Rd., Teaneck, NJ 07666 ADDRESS OF BANK OR DEPOSITORY	
GILLA STERN	ADDITION OF STREET	
NAME OF TREASURER		*TELEPHONE NUMBER (DAY)
309 Edgewood	Ave., Teaneck, NJ 07666	
	ADDRESS OF TREASURER	······································
	CERTIFICATION	
	nts on this document are true, and that the contribution ar	
designated by law I am av	vare that if any of the statements are willfully false, I may be s	subject to punishment
5 Milio	EMIL (YITZ) STERN	Thut ST.
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE)	SIGNATURE (CANDIDATE)
5/27/10	GILLA STERN	JUV HI
DATE	PRINT FULL NAME (TREASURER)	SIGNATURE (TREASURER)
UAIE	PRINT FULL INAME (TREASURER)	SIGNATURE (TREASURER)
	nal and Legislative candidates are required to receive training. Check here if you have completed the training and enter	
	DECLARATION OF FINAL REPO	RT
	gn applicable Declaration below as well as Certification above tue to file reports with the Commission until all campaign busi	
	utions or other monies received by this election fund have be ons, and that the election fund has wound up its business and	
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)

New Jersey Election Law Enforcement Commission

11

FORM R-1 Revised 12/2008
*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.

FORM R-1	REPORT	OF CONTR		NS AND		REPORT (CHECK 29 - DAY PR		
NEW JERS	SEY ELECTION LAV			MISSION		11 - DAY PRI		
(609) 2	P O Box 185, Tre 192-8700 or Toll Free W	Vithin NJ 1-888-	-313-ELEC	(3532)		20 - DAY PO Apr 15,	ST-EL	ECTION
CANDIDATE OD O	Web site http://w	www elec state n	ıj us/		\dashv	July 15, 24	10	_
CANDIDATE OR C STERN	OMMITTEE NAME N FOR COUNCII	, L				Oct 15, Jan 15,		-
STREET ADDRESS								No 🗗
CITY	Edgewood Ave	STATE	ZIP CODE	<u> </u>	┥	Amendment Yes For Stat	==	
Teane	eck	ŊJ	070	666				·
COUNTY Berge	en	ELECTION DIS	STRICT OF	RMUNICIPALITY		ELEC RE	-	
POLITICAL PARTY n/a	(, IF ANY	OFFICE SOUC	GHT i1memb	er		JUL 1	5 20	110
ELECTION DATE 5/11/10 ELECTION TYPE PRIMARY (CHECK ONE) RUN-OFF				MUNICIPAL [SCHOOL [ENERAL PECIAL		
SUMMARY TAB	LES DO NOT ATTEM			ES I AND II UNT N COMPLETED	ΊL			
TABLE I RECEI	PTS					THIS REPORT	CU	MULATIVE TO DATE
1 MONETARY C	ONTRIBUTIONS OF \$3	300 OR LESS		•	\$	100.	\$	11487
	ONTRIBUTIONS IN EX NS [Schedule A]	CESS OF \$300) AND ALL	CURRENCY	\$	<u> </u>	\$	1850.
	RIBUTIONS OF \$300	OR LESS			\$		\$	258.11
4 IN-KIND CONT	RIBUTIONS IN EXCES	3S OF \$300 [Sc	chedule B}		\$		\$	-
	VED IN EXCESS OF \$	300 AND ALL C	CURRENCY	LOANS	\$		\$	-
[Schedule C] 6 SUB TOTAL		-	(ADD LI	NES 1 THRU 5)	\$	108	\$	19595 11
7 REFUND OF E	XCESSIVE CONTRIBU	JTIONS [Adjust	iment Sche	dule] (-)	\$	-	\$	
8 TOTAL CONTR	RIBUTIONS				\$	100 -	\$	19595.11
9 ADD FUNDS T	RANSFERRED FROM	PRIOR CAMPA	AIGN	(+)	\$		\$	
10 TOTAL RECEI	PTS		(ADD L	INE 8 + LINE 9)	\$	100.	\$	19595.11
TABLE II. EXPE	NDITURES							
1 DISBURSEME	NTS -CAMPAIGN EXF	PENSES [Sched	dule 1(D)]	_ ::-	\$	00 [0]	\$	15922.06
2 DISBURSEMENTS - OTHER [Schedule 2(D)] 3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER			\$	3314.94	\$	7414. 94		
CANDIDATES/COMMITTEES [Schedule 3(D)]			\$		\$			
CANDIDATES/COMMITTEES [Schedule 3(D)] 4 CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]			\$		\$			
5 IN-KIND CON	TRIBUTIONS OF \$300	OR LESS (TAF	BLE I, LINE	. 3)	\$		\$	258.11
6 IN-KIND CON	TRIBUTIONS IN EXCE	:SS OF \$300 (T	ABLE I, LIN	NE 4)	\$		\$	
7 SUB TOTAL			(ADD LI	INES 1 THRU 6)	\$	3314.94	\$	19595.11
8 REFUNDED D	DISBURSEMENTS [Sch	redule F]		(-)	\$		\$	
9 TOTAL EXPE	NDITURES		(LINE 7	MINUS LINE 8)	\$	3314.94	\$	19596.11

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.)		\$ 3214.94
Funds Transferred from Prior Campaign		<u>s</u>
Deposits (Include interest)		\$ 100 /
Disbursements (Include	bank charges)	s 3314.94
Closing Balance, this F	Report	\$
CROSS RIVER BANK		STERN FOR COUNCIL
NAME OF BANK OR DEPOSITORY NAME OF ACCOUNT		
•	Rd., Teaneck, NJ 07666 ADDRESS OF BANK OR DEPOSITORY	
GILLA STERN NAME OF TREASURER		STELEDUONE NUMBER (DAY)
	Ave., 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 aw	are that if any of the statements are willfully false, I may be subject to	bunishment
7/13/10	EMIL (YITZ) STERN	and_
DATE		TURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	ATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	ATURE (CANDIDATE)
0) 11.0	GILLA STERN	70 V. 10
DAKE	<u></u>	TURE (TREASURER)
Treasurers for Gubernators Enforcement Commission	/ al and Legislative candidates are required to receive training with the l Check here ☐ if you have completed the training and enter your Trea	New Jersey Election Law surer Training ID#
DECLARATION OF FINAL REPORT		
	DECLARATION OF FINAL REPORT	
	n applicable Declaration below as well as Certification above. Chapter ue to file reports with the Commission until all campaign business is we	
certify that all contributions or other obligation	tions or other monies received by this election fund have been disburs ns, and that the election fund has wound up its business and has been	sed, that there are no outstanding in dissolved
1/13/10	EMIL (YITZ) STERN	Ellin &
DATE	PRINT FULL NAME (CANDIDATE) SIGNA	ATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE)	ATURE (CANDIDATE)
DATE	PRINT FULL NAME (CANDIDATE)	ATURE (CANDIDATE)
1/13/10	GILLA STERN D	on Atr
DATE	PRINT FULL NAME (TREASURER)	TURE (TREASURER)