

This is a Filer Registration form.

**This form does not make
you a participant in the
Campaign Finance Program.**

**In order to become a
participant, you must file the
2008A Certification form by
April 25, 2008.**



New York City Campaign Finance Board

40 Rector Street, New York, NY 10006 • Tel.: (212) 306-7100 • Fax: (212) 306-7143/44
Web site: www.nycffb.info • E-mail: csumail@nycffb.info

FILER REGISTRATION 2008A SPECIAL ELECTION – CITY COUNCIL DISTRICT 30

INSTRUCTIONS PLEASE READ FIRST!

This Filer Registration must be filed before the candidate files any disclosure statements with the Campaign Finance Board (“CFB”) for the 2008A special election, Council District 30. The filing of this form will not make the committee eligible for public funds. In order to join the Campaign Finance Program (“Program”) to become eligible for matching funds, a Certification must be filed by April 25, 2008.

Complete the entire Filer Registration. Enter “N/A” to indicate items which do not apply. Incomplete forms will not be accepted. All pages must be submitted. You must notify the CFB if any changes to the information occur. Any changes to the information provided require an amendment to the Filer Registration. Call the Candidate Services Unit at (212) 306-7100 for more information on amending the Filer Registration.

1. Enter the candidate’s name, address information, and telephone numbers. A candidate is any person who may run in the 2008 special election for City Council member, whether or not that person anticipates participating in the New York City Campaign Finance Program. Remember that the candidate’s home address is an address to which legal notices may be sent and that you must promptly notify the CFB of any changes to it.
2. Enter the candidate’s employment information.
3. The office sought is City Council District 30.
4. Enter the name, address, date authorized with the Board of Elections, and other information for all authorized committee(s). Candidates who anticipate participating in the Program may use only one political committee to raise and spend funds for the 2008A special election. This political committee is called the candidate’s “principal committee.” The principal committee receives all public funds for which the candidate qualifies. It cannot have been authorized or used for any other election or be the authorized committee for any other candidate. If you do not anticipate participating in the Program, you may have multiple committees authorized for the 2008A special election and joint committees with other candidates, and not have a principal committee. However, for CFB operational purposes, you must identify one committee as your “primary” committee.

By entering an e-mail address, you are giving the CFB permission to send your campaign e-mail. Please be advised that all communications, both written and oral, will be directed to the principal/primary committee address and phone number. The CFB strongly advises against using a P.O. Box for this committee address.

5. Enter the principal/primary committee’s treasurer’s name, address information and telephone number. Remember that the treasurer’s home address is an address to which legal notices may be sent and that you must promptly notify the CFB of any changes to it.

6. Enter the principal/primary committee's treasurer's employment information.
7. On the "Schedule of Accounts," list all accounts held since January 2006 by each authorized committee that is listed on this form. Indicate the type and purpose of the account, including whether the bank account has been or will be used exclusively for soliciting non-matchable contributions by Program participants for disbursements to political clubs, candidates, or political committees as well as payments of debts for past elections or transfers to non-covered committees.
8. If you intend to accept credit card contributions, enter the acquirer name(s) and unique merchant account number(s).
9. Identify any liaison the CFB is authorized to contact so that the CFB may provide all relevant information in a timely manner.
10. If you have retained a consultant for the purpose of complying with campaign finance requirements, enter the consultant's name, address information, and telephone numbers, if you want the CFB to contact the consultant.
11. Select the contact order in which you would like the CFB to contact representatives of your campaign. Keep in mind that while we will contact these representatives, the candidate and treasurer(s) remain ultimately responsible for the campaign's compliance and are jointly and severally liable with the committee for any penalties assessed by the CFB.
12. For candidates who do not anticipate joining the Program: Candidates who do not anticipate joining the Program may authorize and use multiple political committees for the 2008A special election, including joint committees with other candidates. If you do not anticipate joining the Program and have multiple committees active for the 2008A special election, enter the names of all other committees authorized for the 2008A special election, and the name, address information, and telephone number of the treasurer of each of these committees. Remember that the home address of each treasurer is an address to which legal notices will be sent and that you must promptly notify the CFB of any changes to it. The CFB recommends against having more than one authorized committee for the 2008A special election.
13. If you have authorized any political committees for purposes other than the 2008A special election, these political committees must be listed if they have not been terminated.
14. The candidate must read, initial each clause, sign, and date the Candidate Verification.
15. The treasurer of each committee authorized for the 2008A special election must read, initial each clause, sign, and date the Treasurer Verification.

THIS FORM MUST BE SUBMITTED BEFORE THE FIRST DISCLOSURE STATEMENT THE CAMPAIGN FILES FOR THE 2008 SPECIAL ELECTION.

PLEASE NOTE THAT THE FILING OF THIS FORM OR CFB DISCLOSURE STATEMENTS IS NOT A STATEMENT OF INTENT TO BECOME A CANDIDATE, FOR ANY OFFICE, OR TO JOIN THE NEW YORK CITY CAMPAIGN FINANCE PROGRAM.



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FILER REGISTRATION

2008A SPECIAL ELECTION – CITY COUNCIL DISTRICT 30

1. CANDIDATE NAME AND HOME ADDRESS

CFB USE ONLY

MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS					APARTMENT NUMBER
CITY		STATE	ZIP CODE	DAYTIME TELEPHONE ()	EXT. EVENING TELEPHONE ()
FAX ()		E-MAIL ADDRESS			

2. CANDIDATE EMPLOYMENT

EMPLOYER NAME					
STREET ADDRESS					
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE ()			EXT.	FAX ()	

3. OFFICE SOUGHT

CITY COUNCIL DISTRICT 30

COMMITTEES AUTHORIZED BY CANDIDATE

Candidates who anticipate participating in the Program must authorize and use only one political committee to raise and spend funds for the 2008A special election. This is your principal committee.

Candidates who do not anticipate participating in the Program may authorize and use multiple political committees to raise and spend funds for the 2008A special election but still must identify a "primary" committee below. Enter the requested information for **all** other active committees in Section 12 (Committees Authorized for the 2008A special election) and/or Section 13 (Committees Authorized for other elections).

Attach additional form page(s) if the non-participating candidate has more than two (2) additional authorized committees.

4. PRINCIPAL/PRIMARY COMMITTEE

COMMITTEE NAME					
STREET ADDRESS					APARTMENT NUMBER
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE ()		EXT.	EVENING TELEPHONE ()		FAX ()
DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS			WEB SITE ADDRESS(ES)		

MAILING ADDRESS (IF DIFFERENT)

STREET ADDRESS					APARTMENT NUMBER
CITY			STATE	ZIP CODE	
IF JOINT COMMITTEE, LIST OTHER CANDIDATES (NON-PARTICIPANTS ONLY)			E-MAIL ADDRESS		

5. TREASURER NAME AND HOME ADDRESS

MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS				APARTMENT NUMBER	
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE () EXT.			EVENING TELEPHONE ()		
FAX ()			E-MAIL ADDRESS		

6. TREASURER EMPLOYMENT

EMPLOYER NAME					
STREET ADDRESS					
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE () EXT.			FAX ()		

7. SCHEDULE OF ACCOUNTS

BANK/DEPOSITORY NAME					
CITY			STATE	ZIP CODE	
ACCOUNT NUMBER					
ACCOUNT NAME (IF ANY)			TYPE OF ACCOUNT		PURPOSE OF ACCOUNT
DATE OPENED	MONTH	DATE	YEAR	<input type="checkbox"/> CHECKING	<input type="checkbox"/> 2008A SPECIAL ELECTION
DATE CLOSED (IF ANY)	MONTH	DATE	YEAR	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> 2008A SPECIAL ELECTION ACCOUNT FOR SOLICITING NON-MATCHABLE CONTRIBUTIONS
CURRENT BALANCE \$	MONTH	DATE	YEAR	<input type="checkbox"/> MONEY MARKET	<input type="checkbox"/> OTHER (SPECIFY)
				<input type="checkbox"/> OTHER (SPECIFY)	

BANK/DEPOSITORY NAME					
CITY			STATE	ZIP CODE	
ACCOUNT NUMBER					
ACCOUNT NAME (IF ANY)			TYPE OF ACCOUNT		PURPOSE OF ACCOUNT
DATE OPENED	MONTH	DATE	YEAR	<input type="checkbox"/> CHECKING	<input type="checkbox"/> 2008A SPECIAL ELECTION
DATE CLOSED (IF ANY)	MONTH	DATE	YEAR	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> 2008A SPECIAL ELECTION ACCOUNT FOR SOLICITING NON-MATCHABLE CONTRIBUTIONS
CURRENT BALANCE \$	MONTH	DATE	YEAR	<input type="checkbox"/> MONEY MARKET	<input type="checkbox"/> OTHER (SPECIFY)
				<input type="checkbox"/> OTHER (SPECIFY)	

8. UNIQUE MERCHANT ACCOUNT(S)

For candidates who anticipate joining the Program: If you intend to accept credit card contributions, you must provide your acquirer's name(s) and unique merchant account number(s).

ACQUIRER'S NAME	UNIQUE MERCHANT ACCOUNT NUMBER
ACQUIRER'S NAME	UNIQUE MERCHANT ACCOUNT NUMBER
ACQUIRER'S NAME	UNIQUE MERCHANT ACCOUNT NUMBER
ACQUIRER'S NAME	UNIQUE MERCHANT ACCOUNT NUMBER

ATTACH ADDITIONAL FORM PAGE(S) IF THE AUTHORIZED COMMITTEES HAVE ADDITIONAL BANK OR UNIQUE MERCHANT ACCOUNTS.

9. CAMPAIGN LIAISONS OTHER THAN TREASURER

MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS				APARTMENT NUMBER	
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE () EXT.			EVENING TELEPHONE ()		
FAX ()			E-MAIL ADDRESS		
MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS				APARTMENT NUMBER	
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE () EXT.			EVENING TELEPHONE ()		
FAX ()			E-MAIL ADDRESS		
MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS				APARTMENT NUMBER	
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE () EXT.			EVENING TELEPHONE ()		
FAX ()			E-MAIL ADDRESS		
MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS				APARTMENT NUMBER	
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE () EXT.			EVENING TELEPHONE ()		
FAX ()			E-MAIL ADDRESS		

10. CAMPAIGN CONSULTANT

MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS				APARTMENT NUMBER	
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE () EXT.			EVENING TELEPHONE ()		
FAX ()			E-MAIL ADDRESS		
CONSULTANT ENTITY NAME (IF APPLICABLE)					

11. CONTACT ORDER

Select the contact order in which you would like the CFB to contact representatives of your campaign:

- The candidate should be contacted: First Second Third Fourth
- The treasurer should be contacted: First Second Third Fourth
- The liaison should be contacted: First Second Third Fourth N/A
- The consultant should be contacted: First Second Third Fourth N/A

Although the CFB will attempt to refer to this order for most communications, the CFB may deviate from this order. Additionally, certain written audit and legal notices will be sent directly to the candidate and the treasurer notwithstanding the order requested by the campaign.

12. ADDITIONAL 2008A COMMITTEE (NON-PARTICIPANTS ONLY)

COMMITTEE NAME					
STREET ADDRESS					APARTMENT NUMBER
CITY	STATE	ZIP CODE	DAYTIME TELEPHONE ()	EXT.	EVENING TELEPHONE ()
MAILING ADDRESS (IF DIFFERENT)					
CITY			STATE		ZIP CODE
FAX ()			E-MAIL ADDRESS		
DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS			WEB SITE ADDRESS(ES)		
IF JOINT COMMITTEE, LIST OTHER CANDIDATES					

TREASURER NAME AND HOME ADDRESS

MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS					APARTMENT NUMBER
CITY	STATE	ZIP CODE	DAYTIME TELEPHONE ()	EXT.	EVENING TELEPHONE ()
FAX ()			E-MAIL ADDRESS		

TREASURER EMPLOYMENT

EMPLOYER NAME					
STREET ADDRESS					
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE ()			EXT.	FAX ()	

ADDITIONAL 2008A COMMITTEE (NON-PARTICIPANTS ONLY)

COMMITTEE NAME					
STREET ADDRESS					APARTMENT NUMBER
CITY	STATE	ZIP CODE	DAYTIME TELEPHONE ()	EXT.	EVENING TELEPHONE ()
MAILING ADDRESS (IF DIFFERENT)					
CITY			STATE		ZIP CODE
FAX ()			E-MAIL ADDRESS		
DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS			WEB SITE ADDRESS(ES)		
IF JOINT COMMITTEE, LIST OTHER CANDIDATES					

TREASURER NAME AND HOME ADDRESS

MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS					APARTMENT NUMBER
CITY	STATE	ZIP CODE	DAYTIME TELEPHONE ()	EXT.	EVENING TELEPHONE ()
FAX ()			E-MAIL ADDRESS		

TREASURER EMPLOYMENT

EMPLOYER NAME					
STREET ADDRESS					
CITY			STATE	ZIP CODE	
DAYTIME TELEPHONE ()			EXT.	FAX ()	

13. ADDITIONAL AUTHORIZED COMMITTEES (ALL CANDIDATES)

In this section, list each additional committee (including any "political action committees") authorized by the candidate (other than committees authorized for the 2008A special election) required to file Board of Elections or Federal Election Commission disclosure statements that has not been terminated. Indicate the date of the last election in which the committee was involved, if any, the office sought, and whether the committee is a joint committee.

Attach additional form page(s) if the candidate has more than four (4) additional authorized committees.

COMMITTEE NAME				LAST ELECTION: DATE, OFFICE			
MR.	MRS.	MS.	TREASURER NAME: LAST	FIRST			M.I.
DAYTIME TELEPHONE ()			EXT.	EVENING TELEPHONE ()		FAX ()	
DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS							
IF JOINT COMMITTEE, LIST OTHER CANDIDATES							

COMMITTEE NAME				LAST ELECTION: DATE, OFFICE			
MR.	MRS.	MS.	TREASURER NAME: LAST	FIRST			M.I.
DAYTIME TELEPHONE ()			EXT.	EVENING TELEPHONE ()		FAX ()	
DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS							
IF JOINT COMMITTEE, LIST OTHER CANDIDATES							

COMMITTEE NAME				LAST ELECTION: DATE, OFFICE			
MR.	MRS.	MS.	TREASURER NAME: LAST	FIRST			M.I.
DAYTIME TELEPHONE ()			EXT.	EVENING TELEPHONE ()		FAX ()	
DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS							
IF JOINT COMMITTEE, LIST OTHER CANDIDATES							

COMMITTEE NAME				LAST ELECTION: DATE, OFFICE			
MR.	MRS.	MS.	TREASURER NAME: LAST	FIRST			M.I.
DAYTIME TELEPHONE ()			EXT.	EVENING TELEPHONE ()		FAX ()	
DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS							
IF JOINT COMMITTEE, LIST OTHER CANDIDATES							

TO PROTECT YOUR PRIVACY, THE CFB WILL NOT PROVIDE SPECIFIC INFORMATION RELATED TO YOUR CAMPAIGN TO ANY INDIVIDUAL OR ENTITY NOT LISTED ON THIS FILER REGISTRATION UNLESS SUCH DISCLOSURE IS REQUIRED PURSUANT TO THE FREEDOM OF INFORMATION LAW, ARTICLE 6 OF THE PUBLIC OFFICES LAW ("FOIL") OR OTHER LAW.

BY PROVIDING AN E-MAIL ADDRESS ANYWHERE ON THIS FORM, YOU ARE GIVING THE CFB PERMISSION TO SEND YOUR CAMPAIGN E-MAIL ON ANY MATTER. THE CFB WILL SEND E-MAIL TO THE PRINCIPAL/PRIMARY COMMITTEE'S E-MAIL ADDRESS, IF ANY, UNLESS YOU SPECIFICALLY STATE AN ALTERNATIVE E-MAIL ADDRESS.

ENTER HERE THE TOTAL NUMBER OF PAGES SUBMITTED: _____

14. CANDIDATE VERIFICATION

INDICATE YOUR AGREEMENT TO EACH PARAGRAPH BY INITIALING THE LINE TO THE RIGHT. (Forms missing initials for any item will not be accepted.)

I hereby verify that I have not accepted, and I will not accept, any contribution or contributions from any one contributor for the 2008A special election that exceed(s) the applicable contribution limit set forth in Section 3-703(1)(f) of the New York City Administrative Code ("New York City Campaign Finance Act" or the "Act"); that I have not used, and I will not use, my personal funds or property (or that of my spouse, domestic partner, or unemancipated children) for these elections, except as contributions that do not exceed any applicable limit set forth in Section 3-703(1)(h) of the Act (except if I am a non-participant candidate); that I have not accepted and will not accept directly or indirectly any contributions from a corporation, partnership, LLC, or LLP and that I will abide by all other applicable requirements of Title 3, Chapter 7 of the Act and the Campaign Finance Board Rules (the "Rules"), including requirements for campaign finance disclosure statements and recordkeeping.*

initial here

I understand that I am responsible for reading, understanding, and knowing the contents of the Act and the Rules. I also understand that I, the committee(s) I authorize for the 2008A special election, and my agents are required to abide by the terms and conditions of the Act and the Rules applicable to the 2008A special election, even if amended, regardless whether I elect to join the Program.

initial here

I understand that my home address, the primary committee address, and the Treasurer's home address as provided above are the addresses to which legal notices, including correspondence and legal papers, may be sent as a courtesy to me. I further understand that if it becomes necessary to update these addresses, I am responsible for promptly notifying the CFB, in writing, of the new addresses.

initial here

I understand that failure to abide by the requirements of the Act or Rules may result in the imposition of such penalties as are provided in Section 3-711 of the Act and other applicable law or rules. The Act provides for penalties up to \$10,000 per violation, and higher penalties for expenditure limit violations (three times the amount by which the spending limit has been exceeded) and for failing to provide a response to the draft audit report (up to 10% of public funds received). I further understand that I, the committee(s) I authorize for the 2008A special election, the treasurer(s) of those committee(s), and any other of my agents, are jointly and severally liable for the payment of civil penalties assessed by the Board.

initial here

I verify that the information on this document is true and complete to the best of my knowledge and belief. I understand that intentionally or knowingly making a false statement, including but not limited to in the form of an electronic submission, or intentionally or knowingly violating any provision of the Act, is a Class A misdemeanor pursuant to Section 3-711(3) of the Act.

initial here

I understand that knowingly making a false written statement, including but not limited to in the form of an electronic submission, is a Class A misdemeanor pursuant to New York State Penal Law Section 210.45.

initial here

I understand that knowingly offering false written information, including but not limited to in the form of an electronic submission, with the belief that it will become a part of the records of a public office and with the intent to defraud, is a Class E felony pursuant to New York State Penal Law Section 175.35.

initial here

CANDIDATE SIGNATURE

* The law does not impose any limitations on the aggregate value of contributions a candidate may make to his or her own campaign with his or her personal funds and property as long as that candidate will not be a participant in the New York City Campaign Finance Program.

15. TREASURER VERIFICATION

INDICATE YOUR AGREEMENT TO EACH PARAGRAPH BY INITIALING THE LINE TO THE RIGHT. (Forms missing initials for any item will not be accepted.) The treasurer for each committee active for the 2008A special election must fully initial and submit this verification. If you need additional copies of this treasurer verification, you may copy the blank form. Please indicate committee(s) active for the 2008A special elections for which you are treasurer:

I hereby verify that I am treasurer of the committee(s) listed above, each of which is authorized by the candidate to be involved in the 2008A special election (the "Committee(s)").

initial here

I hereby verify that the Committee(s) have not accepted and will not accept any contribution or contributions from any one contributor for the 2008A special election that exceed(s) the applicable contribution limit set forth in Section 3-703(1)(f) of the New York City Administrative Code (the "Administrative Code"); that the Committee(s) have not accepted and will not accept directly or indirectly any contributions from a corporation, partnership, LLC, or LLP, and that I, on behalf of the Committee(s), will abide by all other applicable requirements of the Act and the Rules, including requirements for campaign finance disclosure statements and recordkeeping.*

initial here

I understand that I am responsible for reading, understanding, and knowing the contents of the Act and the Rules. I also understand that I, the candidate, the committee(s) authorized by the candidate for the 2008A special election, and the candidate's agents, are required to abide by the terms and conditions of the Act and the Rules applicable to the 2008A special election, regardless whether the candidate elects to join the Program.

initial here

I understand that the addresses provided for the Committee(s), and/or my home address, are the address(es) to which legal notices, including correspondence and legal papers, will be sent. I further understand that if it becomes necessary to update any address, I am responsible for promptly notifying the CFB, in writing, of it.

initial here

I understand that failure to abide by the requirements of the Act or Rules may result in the imposition of such penalties as are provided in Section 3-711 of the Act and other applicable law or rules. The Act provides for penalties up to \$10,000 per violation and higher penalties for expenditure limit violations (three times the amount by which the spending limit has been exceeded) and for failing to provide a response to the draft audit report (up to 10% of public funds received). I further understand that I, the candidate, the committee(s) authorized by the candidate for the 2008A special election, and any other agent of the candidate are jointly and severally liable for the payment of civil penalties assessed by the Board.

initial here

I verify that the information on this document is true and complete to the best of my knowledge and belief. I understand that intentionally or knowingly making a false statement, including but not limited to in the form of an electronic submission, or intentionally or knowingly violating any provision of the Act, is a Class A misdemeanor, pursuant to Section 3-711(3) of the Act.

initial here

I understand that knowingly making a false written statement, including but not limited to in the form of an electronic submission, is a Class A misdemeanor pursuant to New York State Penal Law Section 210.45.

initial here

I understand that knowingly offering false written information, including but not limited to in the form of an electronic submission, with the belief that it will become a part of the records of a public office and with the intent to defraud, is a Class E felony pursuant to New York State Penal Law Section 175.35.

initial here

TREASURER SIGNATURE

* The law does not impose any limitations on the aggregate value of contributions a candidate may make to his or her own campaign with his or her personal funds and property as long as that candidate will not be a participant in the New York City Campaign Finance Program. 4/17/08