

SMALL CAMPAIGN REGISTRATION



A candidate may register as a small campaign if he/she does not plan to raise or spend more than \$1,000. Once registered as a Small Campaign, the candidate is not required to submit disclosure statements to the CFB as long as he/she does not raise or spend more than \$1,000. If the campaign ever raises or spends more than \$1,000, the candidate must submit a complete Filer Registration or Certification to the CFB, and file itemized disclosure statements covering all financial activity.



New York City Campaign Finance Board

100 Church Street, 12th Floor, New York, NY 10007 • 212.409.1800
www.nycffb.info • CSUmail@nycffb.info

SMALL CAMPAIGN REGISTRATION

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.

IMPORTANT INFORMATION—PLEASE READ

Complete the entire Small Campaign Registration. All mandatory fields have been marked with an “*”. All pages must be submitted by mail or hand-delivery with original signatures of the candidate and treasurer (if applicable). Incomplete or illegible forms will not be accepted. If there are any changes to the information provided, you must amend the Small Campaign Registration by submitting an amended Small Campaign Registration, a Change of Contact Information Form, or a Change of Bank Account Form.

Communications, both written and oral, will be directed to the candidate’s, treasurer’s, and/or principal committee’s address, telephone number, and/or email address.

You must notify the CFB of any changes to the information.

C-Access is the CFB’s interactive website for campaigns, providing secure online access to campaign information and compliance notices. Campaign-specific usernames and passwords will be issued to both the candidate and treasurer (if applicable) upon acceptance of the Small Campaign Registration.

It is mandatory that email addresses be provided for both the candidate and treasurer (if applicable) as part of your registration with the CFB.

Reminder: Public servants are prohibited from using government resources for their campaigns. Do not list any government phone, email, or address as campaign contact information on this form. Government resources may only be included under the employment information of the candidate, treasurer, or campaign liaison(s) (if applicable).



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SMALL CAMPAIGN REGISTRATION

1. ELECTION CYCLE (MUST CHECK ONLY ONE)						
<input type="checkbox"/> 2017 PRIMARY/GENERAL ELECTION CYCLE		<input type="checkbox"/> SPECIAL ELECTION: _____			<input type="checkbox"/> OFF-YEAR: _____	
2. CANDIDATE NAME AND HOME ADDRESS						CFB USE ONLY
Enter the candidate's name, address, telephone numbers, and email address. Note: the candidate's home address is an address to which legal notices may be sent. You must promptly notify the CFB of any changes.						CANDIDATE I.D. _____ COMMITTEE I.D. _____
MR.	MRS.	MS.	LAST*	FIRST*	M.I.	
STREET ADDRESS*					APARTMENT/SUITE/FLOOR	
CITY*			STATE*	ZIP CODE*		
DAY TELEPHONE* ()			EVENING TELEPHONE ()			
EMAIL ADDRESS*						
3. CANDIDATE EMPLOYMENT						
Enter the candidate's employment information.						
EMPLOYER NAME*						
STREET ADDRESS					APARTMENT/SUITE/FLOOR	
CITY			STATE	ZIP CODE		
TELEPHONE ()						
4. OFFICE SOUGHT						
Enter the office sought, borough or Council district #, and party registration.						
OFFICE			BOROUGH OR COUNCIL DISTRICT #			
PARTY REGISTRATION (OPTIONAL)						
5. PRINCIPAL/PRIMARY COMMITTEE (IF APPLICABLE)						
Enter the committee name, address, New York State Board of Elections (NYS BOE) Filer ID Number, date registered with the NYS BOE, and other information of the committee.						
COMMITTEE NAME					NYS BOE FILER ID	
STREET ADDRESS			APARTMENT/SUITE/FLOOR	NYS BOE REGISTRATION DATE		
CITY			STATE	ZIP CODE		
DAY TELEPHONE ()			EVENING TELEPHONE ()			
EMAIL ADDRESS			WEBSITE ADDRESS(ES)			

6. TREASURER NAME AND HOME ADDRESS (IF APPLICABLE)

Enter the treasurer's name, address, telephone numbers, and email address.

Note: the treasurer's home address is an address to which legal notices may be sent. You must promptly notify the CFB of any changes.

MR.	MRS.	MS.	LAST	FIRST	M.I.
STREET ADDRESS				APARTMENT/SUITE/FLOOR	
CITY			STATE	ZIP CODE	
DAY TELEPHONE ()			EVENING TELEPHONE ()		
EMAIL ADDRESS					

7. TREASURER EMPLOYMENT (IF APPLICABLE)

Enter the treasurer's employment information.

EMPLOYER NAME					
STREET ADDRESS				APARTMENT/SUITE/FLOOR	
CITY			STATE	ZIP CODE	
TELEPHONE ()					

8. SCHEDULE OF ACCOUNTS (IF APPLICABLE)

List the primary bank account opened by your committee and indicate the type and purpose of the account.

PRIMARY BANK ACCOUNT

BANK/DEPOSITORY NAME								
CITY			STATE	ZIP CODE				
ACCOUNT NAME (IF ANY)								
ACCOUNT NUMBER				TYPE OF ACCOUNT (SELECT ONE)		PURPOSE OF ACCOUNT (SELECT ONE)		
DATE OPENED		MONTH	DAY	YEAR	<input checked="" type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> MONEY MARKET <input type="checkbox"/> OTHER (SPECIFY) _____		<input checked="" type="checkbox"/> PRIMARY/GENERAL OR SPECIAL ELECTION <input type="checkbox"/> SEGREGATED ACCOUNT FOR SOLICITING NON-MATCHABLE CONTRIBUTIONS <input type="checkbox"/> OTHER (SPECIFY) _____	
CURRENT BALANCE \$		MONTH	DAY	YEAR				

9. CANDIDATE AND TREASURER VERIFICATION

I/we hereby verify that neither the expected total cumulative receipts nor the expected total cumulative expenditures, including expenditures made with the candidate's personal funds, will exceed \$1,000. If the amount is exceeded, I/we will submit a Filer Registration or Certification and all subsequent required disclosure statements, beginning on or before the deadline to file the next disclosure statement. The first such statement filed will include all prior financial activity beginning at the inception of the campaign.

CANDIDATE SIGNATURE*

TREASURER SIGNATURE