



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)
Website: www.elec.nj.gov

FORM C-1

ELEC Received
Oct 09, 2018
9:57 PM

☐ Amendment

CONTRIBUTIONS REPORT TYPE (Select One)

- ☒ Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received 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 \$ 1,600 in the aggregate from one source starting with the 13th 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(s) Name

JOSEPH SIGNORELLO III

Committee Name

SIGNORELLO FOR OFFICE

Street Address

622 ASHWOOD AVE.

Office Sought

MAYOR

City

ROSELLE PARK

State

NJ

Zip Code

07204

*(Area Code) Day Telephone

908-591-1418

*(Area Code) Evening Telephone

908-591-1418

Election Type:
(Select One)

☐ Primary

☐ May Municipal

☐ Fire District

☒ General

☐ Run-Off

☐ Special

Election Date

11/06/2018

County

UNION COUNTY

Legal Name of Election District or Municipality

ROSELLE PARK BOROUGH

Political Party

DEMOCRAT

SECTION II. CONTRIBUTION INFORMATION (Receipt Types: A = Currency or Check, B = In-Kind, C = Loan)

Date Received
09/11/2018

Contributor Name

JOSEPH SIGNORELLO III

Address (Number and Street, City, State, Zip Code)

622 ASHWOOD AVE., ROSELLE PARK NJ 07204

Aggregate Amount

\$1,750.00

Amount

\$750.00

Occupation (If Individual)
CONSULTANT

Receipt
Type: C

Check if
Currency ☐

Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual)

SIGNORELLO CONSULTING LLC, 622 ASHWOOD AVE., ROSELLE PARK NJ 07204

Date Received
09/26/2018

Contributor Name

MICHAEL LAPOLLA

Address (Number and Street, City, State, Zip Code)

2294 MARLBORO RD, SCOTCH PLAINS NJ 07076

Aggregate Amount

\$1,000.00

Amount

\$1,000.00

Occupation (If Individual)
CONSULTANT

Receipt
Type: A

Check if
Currency ☐

Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual)

LOOMIS CONSULTING, 2294 MARLBORO RD, SCOTCH PLAINS NJ 07076

Date Received
09/15/2018

Contributor Name

VANESSA CANGAS

Address (Number and Street, City, State, Zip Code)

157 PALISADE RD

Aggregate Amount

\$500.00

Amount

\$500.00

Occupation (If Individual)
UNEMPLOYED

Receipt
Type:

Check if
Currency ☐

Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual)

Grand Total: \$2,250.00

Registration Number *****

PIN *****

Candidate or Treasurer JOSEPH SIGNORELLO III

Date 10/09/2018

*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.

**SUPPLEMENTAL CONTRIBUTOR INFORMATION****NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION**

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www.elec.nj.gov**FORM C-1****FOR STATE USE ONLY****ELEC RECEIVED****OCT 30 2018****CONTRIBUTIONS REPORT TYPE (CHECK ONE)**

- ☒ Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received 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 \$1,600 in the aggregate from one source starting with the 13TH day before the election up to, and including the day of the election (48-Hour Notice).

Amendment?

☐ Yes ☐ No**SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION**

Candidate(s) Name <i>Joseph Signorello</i>		Election Date <i>11/6/18</i>
Committee Name <i>Signorello for Office</i>		Election District/Municipality <i>Roselle Park</i>
Candidate or Committee Address (Number and Street, City, State, Zip Code) <i>622 Ashmun Ave Roselle Park NJ 0704</i>		
Office Sought <i>Mayor</i>	County <i>Union</i>	*(Area) Day Telephone <i>908-591-1418</i>
Political Party <i>Democrat</i>		*(Area) Evening Telephone

SECTION II. CONTRIBUTION INFORMATION (Receipt Types: A = Currency or Check; B = In-Kind; C = Loan)

Date Received <i>10/15/2018</i>	Contributor Name <i>Roselle Park Democratic Comm. Htee</i>		
Address (Number and Street, City, State, Zip Code) <i>317 Sheridan Ave Roselle Park NJ 0704</i>		Aggregate Amount \$	Amount \$ <i>1917.00</i>
Occupation (If Individual)	Receipt Type <i>B</i>	Check if Currency <input type="checkbox"/>	Description, if In-Kind Contribution <i>MAILERS AND FLYERS</i>
Employer Name (If Individual)		Employer Mailing Address (If Individual)	
Date Received <i>10/19/2018</i>	Contributor Name <i>Roselle Park Democratic Comm. Htee</i>		
Address (Number and Street, City, State, Zip Code) <i>317 Sheridan Ave Roselle Park NJ 0704</i>		Aggregate Amount \$	Amount \$ <i>996.48</i>
Occupation (If Individual)	Receipt Type <i>B</i>	Check if Currency <input type="checkbox"/>	Description, if In-Kind Contribution <i>Postage for Mailers</i>
Employer Name (If Individual)		Employer Mailing Address (If Individual)	
Date Received <i>10/23/2018</i>	Contributor Name <i>Roselle Park Democratic Comm. Htee</i>		
Address (Number and Street, City, State, Zip Code) <i>317 Sheridan Ave Roselle Park NJ 0704</i>		Aggregate Amount \$	Amount \$ <i>1330.11</i>
Occupation (If Individual)	Receipt Type <i>B</i>	Check if Currency <input type="checkbox"/>	Description, if In-Kind Contribution <i>SIGNS</i>
Employer Name (If Individual)		Employer Mailing Address (If Individual)	
Date Received	Contributor Name		
Address (Number and Street, City, State, Zip Code)		Aggregate Amount \$	Amount \$
Occupation (If Individual)	Receipt Type	Check if Currency <input type="checkbox"/>	Description, if In-Kind Contribution
Employer Name (If Individual)		Employer Mailing Address (If Individual)	
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <i>4243.59</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ <i>4243.59</i>
Candidate or Treasurer Signature <i>[Signature]</i>			Date <i>10/24/18</i>