

CONTINUING POLITICAL COMMITTEE - REGISTRATION STATEMENT AND DESIGNATION OF ORGANIZATIONAL DEPOSITORY

FORM D-4

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/](http://www.elec.state.nj.us/)

PLEASE TYPE OR PRINT

COMMITTEE NAME REAL TEANECK DEMOCRATS		FOR STATE USE ONLY ELEC RECEIVED APR 07 2008
IDENTIFYING TITLE OR ACRONYM, IF ANY		
ADDRESS (NUMBER AND STREET, CITY, STATE, ZIP CODE) PO BOX 3178 TEANECK, NJ 07666		
*(AREA) DAY TELEPHONE		
*(AREA) EVENING TELEPHONE		FOR STATE USE ONLY Acronym Approval Yes _____ No _____
COUNTY BERGEN	MUNICIPALITY TEANECK	
IDENTIFICATION NUMBER	POLITICAL PARTY, IF ANY DEMOCRAT	
TYPE OF FILING <input checked="" type="checkbox"/> Initial Registration Statement <input type="checkbox"/> Additional Depository <input type="checkbox"/> Amendment (please specify below) <input type="checkbox"/> Deputy Treasurer		

1. CHAIRPERSON

NAME EMIL (YITZ) STERN		
MAILING ADDRESS PO BOX 3178		
CITY TEANECK	STATE NJ	ZIP CODE 07666
*(AREA) DAY TELEPHONE	*(AREA) EVENING TELEPHONE	OCCUPATION Program Analyst
EMPLOYER NAME AND ADDRESS COUNTY OF BERGEN, One Bergen County Plaza, Hackensack, NJ 07601		

2. TREASURER

NAME MARK SCHWARTZ		
MAILING ADDRESS 641 Cumberland		
CITY Teaneck	STATE NJ	ZIP CODE 07666
RESIDENT ADDRESS, IF DIFFERENT FROM MAILING ADDRESS		
CITY	STATE	ZIP CODE
*(AREA) DAY TELEPHONE	*(AREA) EVENING TELEPHONE	OCCUPATION Manager
EMPLOYER NAME AND ADDRESS NEW YORK WATER MANAGEMENT, 641 Cumberland Ave., Teaneck, NJ 07666		

3. DEPOSITORY INFORMATION

NAME OF BANK OR DEPOSITORY LAKELAND BANK		
MAILING ADDRESS 417 Cedar Lane		
CITY Teaneck	STATE NJ	ZIP CODE 07666
(AREA) DAY TELEPHONE 201-836-8300		
ACCOUNT NAME REAL TEANECK DEMOCRATS		ACCOUNT NUMBER 625405113

3. DEPOSITORY INFORMATION (continued)

NAME OF BANK OR DEPOSITORY

MAILING ADDRESS

CITY

STATE

ZIP CODE

(AREA) DAY TELEPHONE

ACCOUNT NAME

ACCOUNT NUMBER

4. List the name(s), mailing address(es) and telephone number(s) of any person(s) authorized to sign checks or otherwise make transactions.

NAME **EMIL (YITZ) STERN**

MAILING ADDRESS **PO Box 3178**

CITY **Teaneck**

STATE **NJ**

ZIP CODE **07666**

*(AREA) DAY TELEPHONE

*(AREA) EVENING TELEPHONE

NAME **MARK SCHWARTZ**

MAILING ADDRESS **641 Cumberland**

CITY **Teaneck**

STATE **NJ**

ZIP CODE **07666**

*(AREA) DAY TELEPHONE

*(AREA) EVENING TELEPHONE

NAME

MAILING ADDRESS

CITY

STATE

ZIP CODE

*(AREA) DAY TELEPHONE

*(AREA) EVENING TELEPHONE

5 General Organizational Category or Affiliation: (CHECK ONE)

BUSINESS

IDEOLOGICAL GROUP

PUBLIC QUESTION

LABOR UNION

CIVIC ASSOCIATION

SUPPORT

PROFESSIONAL ASSOCIATION

TRADE ASSOCIATION

OPPOSE

OTHER _____

INDEPENDENT COMMITTEE IN SUPPORT OF, OR OPPOSITION TO, A CANDIDATE OR OFFICEHOLDER

6. List the names/ mailing addresses of the persons (other than chairperson) or entities having direct or indirect control over the affairs of the continuing political committee. (This includes, but is not limited to persons in whose name or at whose direction or suggestion the committee solicits funds or makes contributions) none

Name of Person or Entity

Mailing Address

City

State, Zip

Occupation

Employer Name

Employer Mailing Address

City, State, Zip

*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.

6. (Continued)

Name of Person or Entity	Mailing Address
	City
	State, Zip
Occupation	Employer Name
	Employer Mailing Address
	City, State, Zip

7. List the names/ mailing addresses of the persons or entities not already listed in question #6 who, directly or through an agent, participated in the initial organization of the continuing political committee none

Name of Person or Entity	Mailing Address
	City
	State, Zip
Occupation	Employer Name
	Employer Mailing Address
	City, State, Zip

Name of Person or Entity	Mailing Address
	City
	State, Zip
Occupation	Employer Name
	Employer Mailing Address
	City, State, Zip

Use Additional Sheets if Necessary

8 Describe the economic, political or other particular interests and objectives to be advanced by the continuing political committee

To foster and promote the traditional democratic values to which Teaneck has always aspired. To support candidates for office who have a similar vision.

9 List the name and resident address of a New Jersey resident who has been designated by the continuing political committee as the agent of the continuing political committee to accept service of legal process

NAME EMIL (YITZ) STERN

RESIDENT ADDRESS 309 Edgewood Avenue

CITY Teaneck

STATE NJ

ZIP CODE 07666

10 Has any New Jersey candidate (other than a federal candidate) established, authorized the establishment of, maintained or participated directly or indirectly in the management or control of this continuing political committee, or will any New Jersey candidate do so in the future?

_____ YES

_____ NO

11 What is the total amount of money this continuing political committee estimates it will raise (Please estimate to the best of your ability)

This calendar year? \$ 1,000.

Next calendar year? \$ 1,000.

12 How much of the total amount of money raised is expected to be spent for New Jersey election-related activity during (Please estimate to the best of your ability)

This calendar year? \$ 1,000.

Next calendar year? \$ 1,000.

13 What percentage of the total amount of money raised will be used for New Jersey election-related activity during (Please estimate to the best of your ability)

This calendar year? 100 %

Next calendar year? 100 %

14 Is making contributions to New Jersey candidates or committees, or otherwise engaging in New Jersey election-related activity expected to be a major purpose of this continuing political committee?

_____ YES

_____ NO

15 Besides engaging in election-related activity, what other types of expenditures will be made by this continuing political committee?

undetermined

16 Will this continuing political committee solicit any of its funds from the public for New Jersey election-related activity

inside New Jersey
 outside New Jersey
 *both inside and outside New Jersey

* If "both," what percentage of the funds are expected to be raised outside New Jersey?

_____ %

17 Will this continuing political committee solicit contributions with the stated or principal purpose of making contributions to New Jersey candidates or committees?

YES NO

18 Does this continuing political committee file with the Federal Election Commission?


YES NO

TREASURER/CHAIRPERSON CERTIFICATION

I certify that the statements on this document are true and correct I further certify that no candidate has established, authorized the establishment of, maintained or participated directly or indirectly in the management or control of the continuing political committee, and no candidate shall be permitted to do so during the existence of the continuing political committee I am aware that if any of the statements are willfully false, I am subject to punishment

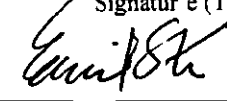
4/2/08
Date

MARK SCHWARTZ
Print Full Name (Treasurer)


Signature (Treasurer)

4/2/08
Date

EMIL (YITZ) STERN
Print Full Name (Chairperson)


Signature (Chairperson)



COMMITTEE - SWORN STATEMENT

To be used only by a continuing political committee, political party committee, or a legislative leadership committee

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

P O Box 185, Trenton, NJ 08625-0185
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Web site http //www elec state nj us/

FORM A-3

FOR STATE USE ONLY

ELEC RECEIVED
MAY 22 2008

PLEASE TYPE OR PRINT

Full Committee Name, Address (Number & Street, City, State, Zip Code)

REAL TEANECK DEMOCRATS
POB 3178
Teaneck, NJ 07666

Calendar Year Period
Jan 1st to Dec 31st, 2008

First Report Filed?
[X] Yes [] No

Committee Type (CHECK ONE) [X] Continuing Political [] Political Party [] Legislative Leadership

ELEC Identification Number
J 0260 0001 11 Q2008

[] "X" If address is different from
address previously reported

Amendment?
[] Yes [X] No

Committee Chairperson and Treasurer Certification

I, the undersigned, do hereby certify as follows
The total amount to be expended by this committee shall be zero, or shall not, in the aggregate, exceed \$4,300 during the calendar year period indicated above. I have read the additional filing information on this form. I certify that my statements on this document are true. I am aware that if any of the statements are willfully false, I may be subject to punishment.

5/9/08

DATE

COMMITTEE CHAIRPERSON SIGNATURE

EMIL STERN

PRINT COMMITTEE CHAIRPERSON'S NAME

POB 3178

ADDRESS

Teaneck, NJ 07666

CITY, STATE ZIP

5/9/08

DATE

COMMITTEE TREASURER SIGNATURE

MARK SCHWARTZ

PRINT COMMITTEE TREASURER'S NAME

641 Cumberland

ADDRESS

Teaneck, NJ 07666

CITY STATE ZIP

Additional Filing Information

In the event the total expended by this committee, in the aggregate, exceeds \$4,300 at any point in the calendar year, this committee is required to file a "Receipts and Expenditures Quarterly Report," Form R-3, on each subsequent quarterly filing date. The first of such reports shall include all activity dating back to January 1st of the current calendar year. The filing dates are April 15, July 15, October 15, and January 15.

If contributions from any one source during the calendar year aggregate more than \$300, or the committee receives currency (cash) contributions in any amount, the committee is required to report the contributions to the Commission on "Supplemental Contributor Information," Form C-3, on the next quarterly reporting date. Note that currency (cash) contributions cannot be accepted in excess of \$200.

If the committee receives a contribution in excess of \$1,000 in the aggregate from any one source during the period between the closing date of the last quarterly report through the date of an election in which the committee is contributing or otherwise participating, the committee is required to notify the Commission in writing within 48 hours of the receipt of the contribution. It is permissible for a committee to file a cumulative report on the 11th day prior to an election of contributions in excess of \$1,000 received up to the 13th day before an election. Thereafter, each contribution in excess of \$1,000 must be reported within 48 hours of receipt. Please use the Form C-3, "Supplemental Contributor Information."

If the committee makes, incurs, or authorizes an expenditure of money or other thing of value in excess of \$1,000 in the aggregate from April 1 up to and including the day of any primary election in which the committee is participating, or from October 1 up to and including the day of any general election in which the committee is participating, the committee is required to notify the Commission in writing within 48 hours. It is permissible for a committee to file a cumulative report on the 11th day prior to the primary or general election of expenditures made, incurred, or authorized in excess of \$1,000 up to the 13th day before the election, thereafter, each expenditure in excess of \$1,000 must be reported within 48 hours. Please use the Form E-3, "Supplemental Expenditure Information."