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.

SMALL CAMPAIGN REGISTRATION

Please note that the filing of this form or CFB disclosure statements is <u>NOT</u> 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, hand-delivery, or email to documents@nyccfb.info with signatures of the candidate and treasurer (if applicable). If submitted electronically, the email address sending the form must be listed on this registration. 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 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).



New York City Campaign Finance Board

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

SMALL CAMPAIGN REGISTRATION

1. ELECTION CYCLE (MUST CHECK ONLY ONE)									
	☐ 2021 PRIMARY/GENERAL ELECTION CYCLE ☐ SPECIAL ELECTION: ☐ OFF-YEAR:								
2.	CANDIDATE NAME AND HOME ADDRESS						CFB USE ONLY		
	Enter the candidate's name, address, telephone numbers, and email address.					CANDIDATE I.D.			
	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.						COMMITTEE I.D.		
MR.	MS.	LAST*				FIRST*			M.I.
STREET ADDRESS*						APARTMENT/SUITE/FLOOR			
CITY*				STATE	*	ZIP CODE*			
DAY TELEPHONE*				EVEN!	NG TELEPHONE)				
EMAIL	EMAIL ADDRESS*								
3. CANDIDATE EMPLOYMENT									
	Enter	the cano	lidate's employment info	rmation.	,				
EMPLOYER NAME*									
STREET ADDRESS					APARTMENT/SUITE/FLOOR				
CITY				STATE		ZIP CODE			
TELEPHONE ()									
4. OFFICE SOUGHT									
Select the office you intend to seek. If borough president or City Council, you must include the borough or Council district.									
	OFFICE		MAYOR		PUBLIC ADVOCAT	E	☐ COMPTROLLER		
			BOROUGH PRESIDENT:			CITY COUNCIL: _			
			UNDECLARED						

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			IENT/SUITE/FLOOR	NYS BOE REGISTRATION DATE		
CITY				ZIP CODE		
DAY T	ELEPHONE)	EVENING (G TELEPHONE)			
EMAIL	ADDRESS	WEBSITI	E ADDRESS(ES)			
CFB USE ONLY						
6.	TREASURER NAME AND HOME ADDRESS (IF AF	PPLIC <i>I</i>	ABLE)			
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.	MS. LAST		FIRST		M.I.	
STREET ADDRESS				APARTMENT/SUITE/FLOOR		
CITY		STATE		ZIP CODE		
DAY T			EVENING TELEPHONE ()			
EMAIL ADDRESS						
7. TREASURER EMPLOYMENT (IF APPLICABLE)						
Enter the treasurer's employment information.						
EMPLOYER NAME						
STRE	T ADDRESS			APARTMENT/SUITE/FLOOR		
CITY		STATE		ZIP CODE		
TELE	HONE					

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 CO	DDE		
ACCOUNT NAME (IF ANY)									
ACC	OUNT NUMBER				TYPE OF ACCOUNT (SELECT ONE		PURPOSE OF ACCOUNT (SELECT ONE) PURPOSE OF ACCOUNT (SELECT ONE)		
DAT	E OPENED	MONTH	DAY	YEAR	□ SAVINGS □ MONEY MARKET		SEGREGATED ACCOUNT FOR SOLICITING NON-MATCHABLE CONTRIBUTIONS		
\$	RENT BALANCE \$	MONTH	DAY	YEAR	OTHER (SPECIFY)		OTHER (SPECIFY)		
9.	CANDIDATE A	AND TREAS	SURER VER	RIFICATION					
	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				