



# New York City Campaign Finance Board

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

## CERTIFICATION

### 2007 NEW SPECIAL ELECTION – CITY COUNCIL DISTRICT 40

**If you are running in the 2007 new special election and wish to participate in the Campaign Finance Program and be eligible to receive public funds, you must file the attached Certification form no later than March 16, 2007.**

## INSTRUCTIONS

### PLEASE READ FIRST!

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

1. Enter the candidate's name, address information, and telephone numbers. 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. Enter the candidate's Councilmanic district.
4. Enter the previous election(s), if any, in which the candidate sought nomination for election, or election, to public office or party position. Attach additional pages if necessary.
5. Enter the name, address, and other information for the principal committee. Candidates participating in the Program must authorize and use only one political committee to raise and spend funds for the 2007 new special election. This political committee is called the candidate's "principal committee." That single committee may not have been authorized or used for any other election cycle. The principal committee may not be an authorized committee of any other candidate. The principal committee receives all public funds for which the candidate qualifies and must file disclosure statements with the CFB.

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

6. Enter the treasurer's name, address information, and telephone numbers. 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.
7. Enter the treasurer's employment information.
8. If you would like a person other than the treasurer to function as a liaison to the CFB, enter the liaison's name, address information, and telephone numbers. A liaison is an authorized campaign representative who can serve as a third official campaign contact person for CFB communications, in addition to the treasurer and the candidate.
9. If you have retained a consultant for the purpose of complying with the Program, enter the consultant's name, address information, and telephone numbers.
10. Select the contact order in which you would like the CFB to contact representatives of your campaign. Keep in mind that while we will try to contact these representatives, the candidate and the treasurer are ultimately responsible for the campaign's compliance and both are jointly and severally liable, along with the principal committee, for any penalties assessed by the Board and for any public funds that must be repaid to the Board.
- 11a. On the "Schedule of Accounts," list all bank accounts held since January 2006 by each authorized committee that is listed on this form (item #13) including the principal committee. Indicate the type and purpose of each account, including whether the account has been or will be used exclusively for soliciting non-matchable contributions for disbursements to political clubs, candidates, or political committees as well as payments of debts for past elections or transfers to non-covered committees.
- 11b. Indicate the account to receive direct deposits of public funds from the CFB (should you be deemed eligible to receive public funds). Include the 9 digit ABA/routing number for this account (which is located on the lower left hand corner of any check bearing this account's name). You must provide a voided check from this account — attach it to the Certification form in the space provided. Please note: only one account may be selected to receive public funds electronically, and this account must belong to the principal committee.
12. If you intend to accept credit card contributions, enter the acquirer name(s) and unique merchant account number(s).
13. If the candidate has authorized any political committees in addition to the principal committee for any purpose, these political committees must be listed unless they have been terminated.  
**Important: only the principal committee may be active for the 2007 new special election.**
14. The candidate must read and initial each clause, and sign the Candidate Certification.  
**Each clause must be initialed by the "x" and the candidate's signature must be notarized.**
15. The treasurer of the principal committee must read and initial each clause, and sign the Treasurer Verification. **Each clause must be initialed by the "x" and the treasurer's signature must be notarized.**

**CERTIFICATIONS MUST BE DELIVERED TO THE OFFICES OF THE CFB BY 5:00 P.M.  
ON MARCH 16, 2007 OR POSTMARKED BY MIDNIGHT ON MARCH 16, 2007.**

**Late Certifications will not be accepted. Metered mail and other mail lacking a verifiable postmark will be presumed to have been mailed three days prior to receipt by the CFB.**

**This is the 2007 new special election Certification form.**

**This form legally binds you as a participant in the Campaign Finance Program.**

**The deadline to file this form is March 16, 2007.**



# New York City Campaign Finance Board

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

## CERTIFICATION

### 2007 NEW SPECIAL ELECTION – CITY COUNCIL DISTRICT 40

#### 1. CANDIDATE NAME - HOME ADDRESS

|                  |      |     |       |            |                  |              |
|------------------|------|-----|-------|------------|------------------|--------------|
| MR.              | MRS. | MS. | LAST  | FIRST      | M.I.             | CFB USE ONLY |
| STREET ADDRESS   |      |     |       |            | APARTMENT NUMBER |              |
| CITY             |      |     | STATE | ZIP CODE   | E-MAIL ADDRESS   |              |
| TELEPHONE<br>( ) |      |     |       | FAX<br>( ) |                  |              |

#### 2. CANDIDATE EMPLOYMENT

|                  |            |          |
|------------------|------------|----------|
| EMPLOYER NAME    |            |          |
| STREET ADDRESS   |            |          |
| CITY             | STATE      | ZIP CODE |
| TELEPHONE<br>( ) | FAX<br>( ) |          |

#### 3. OFFICE SOUGHT

Office sought:

City Council District 40

#### 4. PREVIOUS ELECTIONS

Have you been a candidate previously for any office or political party position? ☐ YES ☐ NO

*If yes, please specify your most recent elections below:*

|                               |                                 |          |                       |
|-------------------------------|---------------------------------|----------|-----------------------|
| DATE OF ELECTION (MONTH/YEAR) | OFFICE OR PARTY POSITION SOUGHT | DISTRICT | PARTY PRIMARY ENTERED |
|                               |                                 |          |                       |
|                               |                                 |          |                       |

#### 5. PRINCIPAL COMMITTEE

|   |       |                            |                      |              |
|---|-------|----------------------------|----------------------|--------------|
| COMMITTEE NAME  |       |                            |                      | CFB USE ONLY |
| STREET ADDRESS  |       |                            |                      |              |
| CITY  | STATE | ZIP CODE                   | E-MAIL ADDRESS       |              |
| MAILING ADDRESS (IF DIFFERENT)                        |       |                            |                      |              |
| CITY  | STATE | ZIP CODE                   | APARTMENT NUMBER     |              |
| TELEPHONE (DAY)<br>( )                                |       | TELEPHONE (EVENING)<br>( ) |                      | FAX<br>( )   |
| DATE AUTHORIZED IN FILING WITH THE BOARD OF ELECTIONS |       |                            | WEB SITE ADDRESS(ES) |              |

CFB USE ONLY

**6. TREASURER NAME – HOME ADDRESS**

|                            |      |     |                                |          |                  |
|----------------------------|------|-----|--------------------------------|----------|------------------|
| MR.                        | MRS. | MS. | LAST                           | FIRST    | M.I.             |
| STREET ADDRESS             |      |     |                                |          | APARTMENT NUMBER |
| CITY                       |      |     | STATE                          | ZIP CODE | E-MAIL ADDRESS   |
| TELEPHONE (DAY)<br>(     ) |      |     | TELEPHONE (EVENING)<br>(     ) |          | FAX<br>(     )   |

**7. TREASURER EMPLOYMENT**

|                      |  |  |  |                |          |
|----------------------|--|--|--|----------------|----------|
| EMPLOYER NAME        |  |  |  |                |          |
| STREET ADDRESS       |  |  |  |                |          |
| CITY                 |  |  |  | STATE          | ZIP CODE |
| TELEPHONE<br>(     ) |  |  |  | FAX<br>(     ) |          |

**8. CAMPAIGN LIAISON OTHER THAN TREASURER**

|                            |      |     |                                |          |                  |
|----------------------------|------|-----|--------------------------------|----------|------------------|
| MR.                        | MRS. | MS. | LAST                           | FIRST    | M.I.             |
| STREET ADDRESS             |      |     |                                |          | APARTMENT NUMBER |
| CITY                       |      |     | STATE                          | ZIP CODE | E-MAIL ADDRESS   |
| TELEPHONE (DAY)<br>(     ) |      |     | TELEPHONE (EVENING)<br>(     ) |          | FAX<br>(     )   |

**9. CAMPAIGN CONSULTANT**

|  |      |     |                                |          |                |
|--|------|-----|--------------------------------|----------|----------------|
| CONSULTANT ENTITY NAME (IF APPLICABLE) |      |     |                                |          |                |
| MR.                                    | MRS. | MS. | LAST                           | FIRST    | M.I.           |
| STREET ADDRESS                         |      |     |                                |          |                |
| CITY                                   |      |     | STATE                          | ZIP CODE | E-MAIL ADDRESS |
| TELEPHONE (DAY)<br>(     )             |      |     | TELEPHONE (EVENING)<br>(     ) |          | FAX<br>(     ) |

**10. CONTACT ORDER**

Select the contact order in which you would like the CFB to contact representatives of your campaign by phone.

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.

**TO PROTECT YOUR PRIVACY, THE CFB WILL NOT PROVIDE SPECIFIC INFORMATION RELATED TO YOUR CAMPAIGN TO ANY INDIVIDUAL OR ENTITY NOT LISTED ON THIS CERTIFICATION.**

**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 COMMITTEE'S E-MAIL ADDRESS, IF ANY, UNLESS YOU SPECIFICALLY STATE AN ALTERNATIVE E-MAIL ADDRESS.**

**11. SCHEDULE OF ACCOUNTS**

|                                 |  |       |      |   |          |
|---------------------------------|--|-------|------|---|----------|
| <b>11. SCHEDULE OF ACCOUNTS</b> |  |       |      |   |          |
| <b>BANK/DEPOSITORY NAME</b>     |  |       |      | <b>PRIMARY BANK ACCOUNT</b>   |          |
| CITY                            |  |       |      | STATE   | ZIP CODE |
| ACCOUNT NUMBER                  |  |       |      | ACCOUNT NAME (IF ANY)   |          |
| COMMITTEE NAME                  |  |       |      | <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>TYPE OF ACCOUNT</b><br/> <input type="checkbox"/> CHECKING<br/> <input type="checkbox"/> SAVINGS<br/> <input type="checkbox"/> MONEY MARKET<br/> <input type="checkbox"/> OTHER (SPECIFY) _____ </div> <div style="width: 35%;"> <b>PURPOSE OF ACCOUNT</b><br/> <input type="checkbox"/> 2007B NEW SPECIAL ELECTION<br/> <input type="checkbox"/> 2007B NEW SPECIAL ELECTION ACCOUNT FOR SOLICITING NON-MATCHABLE CONTRIBUTIONS<br/> <input type="checkbox"/> OTHER (SPECIFY) _____ </div> </div> |          |
| DATE OPENED                     |  | MONTH | DATE | YEAR  |          |
| DATE CLOSED (IF ANY)            |  | MONTH | DATE | YEAR  |          |
| CURRENT BALANCE \$              |  | MONTH | DATE | YEAR  |          |
| <b>BANK/DEPOSITORY NAME</b>     |  |       |      | <b>ADDITIONAL BANK ACCOUNT</b>  |          |
| CITY                            |  |       |      | STATE   | ZIP CODE |
| ACCOUNT NUMBER                  |  |       |      | ACCOUNT NAME (IF ANY)   |          |
| COMMITTEE NAME                  |  |       |      | <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>TYPE OF ACCOUNT</b><br/> <input type="checkbox"/> CHECKING<br/> <input type="checkbox"/> SAVINGS<br/> <input type="checkbox"/> MONEY MARKET<br/> <input type="checkbox"/> OTHER (SPECIFY) _____ </div> <div style="width: 35%;"> <b>PURPOSE OF ACCOUNT</b><br/> <input type="checkbox"/> 2007B NEW SPECIAL ELECTION<br/> <input type="checkbox"/> 2007B NEW SPECIAL ELECTION ACCOUNT FOR SOLICITING NON-MATCHABLE CONTRIBUTIONS<br/> <input type="checkbox"/> OTHER (SPECIFY) _____ </div> </div> |          |
| DATE OPENED                     |  | MONTH | DATE | YEAR  |          |
| DATE CLOSED (IF ANY)            |  | MONTH | DATE | YEAR  |          |
| CURRENT BALANCE \$              |  | MONTH | DATE | YEAR  |          |
| <b>BANK/DEPOSITORY NAME</b>     |  |       |      | <b>ADDITIONAL BANK ACCOUNT</b>  |          |
| CITY                            |  |       |      | STATE   | ZIP CODE |
| ACCOUNT NUMBER                  |  |       |      | ACCOUNT NAME (IF ANY)   |          |
| COMMITTEE NAME                  |  |       |      | <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>TYPE OF ACCOUNT</b><br/> <input type="checkbox"/> CHECKING<br/> <input type="checkbox"/> SAVINGS<br/> <input type="checkbox"/> MONEY MARKET<br/> <input type="checkbox"/> OTHER (SPECIFY) _____ </div> <div style="width: 35%;"> <b>PURPOSE OF ACCOUNT</b><br/> <input type="checkbox"/> 2007B NEW SPECIAL ELECTION<br/> <input type="checkbox"/> 2007B NEW SPECIAL ELECTION ACCOUNT FOR SOLICITING NON-MATCHABLE CONTRIBUTIONS<br/> <input type="checkbox"/> OTHER (SPECIFY) _____ </div> </div> |          |
| DATE OPENED                     |  | MONTH | DATE | YEAR  |          |
| DATE CLOSED (IF ANY)            |  | MONTH | DATE | YEAR  |          |
| CURRENT BALANCE \$              |  | MONTH | DATE | YEAR  |          |

**If the campaign would like to receive funds via direct deposit, attach voided check here:**

|   |      |                           |
|---|------|---------------------------|
| <i>Friends of Jane Henley</i><br><i>44-22 Roosevelt Avenue, Ste 504</i><br><i>Jackson Heights, NY 11372</i> |      | 280                       |
|   |      | DATE _____                |
| Pay to the order of: _____<br>_____   | VOID | \$ _____<br>_____ DOLLARS |
| MEMO _____<br>_____   |      |                           |
| : 000067894   : 12345678  |      |                           |

**12. UNIQUE MERCHANT ACCOUNT(S)**

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

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

**13. OTHER COMMITTEES AUTHORIZED BY CANDIDATE**

In this section, list each committee that has not been terminated (including any "political action committees") authorized by the candidate (other than the principal committee) required to file Board of Elections or Federal Election Commission disclosure statements at any time since January 2006. Indicate the date of and office sought in the last election in which the committee was involved, if any. **Only the principal committee may be active for the 2007 new special election.**

**Attach additional form page(s) if the candidate has more than three (3) additional authorized committees.**

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

**ENTER HERE THE TOTAL NUMBER OF PAGES SUBMITTED, INCLUDING THE CANDIDATE CERTIFICATION AND THE TREASURER VERIFICATION: \_\_\_\_\_**

**14. CANDIDATE CERTIFICATION**

**INDICATE YOUR AGREEMENT TO EACH PARAGRAPH BY INITIALING AT EACH "X".**  
**(Forms missing initials for any item will not be accepted.)**

I hereby verify that I have not accepted, and I agree not to accept, any contribution or contributions from any one contributor for the 2007 new special election that exceed(s) the applicable contribution limit set forth in Section 3-703(1)(f) of the New York City Administrative Code ("Administrative Code"); that I have not used, and I agree not to 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 the limit set forth in Section 3-703(1)(h) of the Administrative Code; that I have not made, and I agree not to make, expenditures in excess of the expenditure limits applicable to the office I am seeking, pursuant to Section 3-706 of the Administrative Code; that I have not accepted and agree not to accept directly or indirectly any contributions from a corporation or from a political committee that is not registered with the CFB; and that I agree to abide by all other applicable requirements of Title 3, Chapter 7 of the Administrative Code (the "New York City Campaign Finance Act" or the "Act") and the Campaign Finance Board Rules (the "Rules"), including requirements for campaign finance disclosure statements and recordkeeping.

x \_\_\_\_\_

I hereby designate the authorized committee noted in Section 5 above to be my principal committee for the 2007 new special election. The principal committee will submit the campaign finance disclosure statements required by the Act and will receive all public funds payments for which I qualify in this election. The principal committee (i) is the only committee authorized by me to aid or otherwise take part in the election covered by this Certification; (ii) is not an authorized committee of any other candidate; and (iii) has not been, is not, and will not be, authorized or otherwise active for any election other than the election covered by this Certification. I understand that the use of an entity other than the designated principal committee to aid or otherwise take part in the 2007 new special election shall be a violation of the Act and shall trigger the application to such entity of all provisions of the Act governing principal committees.

x \_\_\_\_\_

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 principal committee I authorize, my treasurer, and my agents are required to abide by the terms and conditions of the Act and the Rules applicable to the 2007 new special elections, even if amended after I sign this, regardless whether I: meet the requirements of law to have my name appear on the official ballot for those elections; or meet the threshold for eligibility for public funds; or accept public funds; or am otherwise not eligible to receive public funds.

x \_\_\_\_\_

I understand that this Certification is a condition for qualifying to receive public funds in these elections and that other conditions specified in the Act must be satisfied before I may receive public funds pursuant to the Act.

x \_\_\_\_\_

I understand that my home address, the principal committee address and/or the treasurer's home address, as provided above in Sections 1, 5, and 6, are the addresses to which legal notices, including correspondence and legal papers, will be sent. I further understand that if any of these addresses change, I am responsible for promptly notifying the CFB, in writing, of the change.

x \_\_\_\_\_

I understand that by providing an ABA routing number in the Schedule of Accounts section of this Certification (Section 11), I am authorizing the CFB to deposit any public funds payments my campaign is eligible to receive directly into the indicated checking account. I also grant authorization to the CFB for the full or partial reversal of any deposits to this account in the event that the deposit was made partly or entirely in error.

x \_\_\_\_\_

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 Administrative Code and other applicable law or rules. The Act provides for penalties of up to \$10,000 per violation, other than for failing to participate in the post-election audit process, for which it provides for penalties of up to 10% of public funds received, and for spending limit violations, for which it provides for penalties of up to three times the amount by which the spending limit has been exceeded. I further understand that I, the principal committee I designate for the 2007 new special election, the treasurer of that committee, and any other of my agents, are jointly and severally liable for the repayment to the Board of public funds and/or the payment of civil penalties assessed by the Board.

x \_\_\_\_\_

I understand that if the campaign exceeds the applicable expenditure limit under the Act, in addition to any penalties that may be assessed, the Board may require that all public funds received by the campaign be returned to the Board, and that the campaign may not be eligible to receive any additional public funds for the 2007 new special election. I further understand that if the campaign is required to return any public funds for exceeding the expenditure limit, or for any other reason, I, the treasurer, and the principal committee I designate for the 2007 new special election are jointly and severally liable for such repayment.

x \_\_\_\_\_

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 Administrative Code.

x \_\_\_\_\_

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.

x \_\_\_\_\_

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.

x \_\_\_\_\_

**SWORN TO BEFORE ME THIS**

\_\_\_\_\_ day of

\_\_\_\_\_, 2007

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
CANDIDATE SIGNATURE

**15. TREASURER VERIFICATION**

**INDICATE YOUR AGREEMENT TO EACH PARAGRAPH BY INITIALING AT EACH "X".**  
**(Forms missing initials for any item will not be accepted.)**

As treasurer of the principal committee listed in Section 5 of this document, I hereby verify that I am treasurer of the only committee authorized by the candidate that will be involved in the 2007 new special election. I understand that the use of an entity other than the designated principal committee to aid or otherwise take part in the 2007 new special election shall be a violation of Title 3, Chapter 7 of the New York City Administrative Code (the "New York City Campaign Finance Act" or the "Act") and shall trigger the application to such entity of all provisions of the Act governing principal committees.

x \_\_\_\_\_

I hereby verify that the principal committee has not accepted and agrees not to accept any contribution or contributions from any one contributor for the 2007 new 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 has not made, and agrees not to make, expenditures in excess of the expenditure limits applicable to the office the candidate is seeking, pursuant to Section 3-706 of the Administrative Code; that the committee has not accepted and agrees not to accept directly or indirectly any contributions from a corporation, or from a political committee that is not registered with the CFB; and that I, on behalf of the committee, agree to abide by all other applicable requirements of the Act and the Campaign Finance Board Rules (the "Rules"), including requirements for campaign finance disclosure statements and recordkeeping.

x \_\_\_\_\_

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 principal committee authorized by the candidate, and the candidate's agents, are required to abide by the terms and conditions of the Act and the Rules applicable to the 2007 new special election, even if amended after I sign this, regardless whether the candidate: meets the requirements of law to have his or her name appear on the official ballot for this election; or meets the threshold for eligibility for public funds; or accepts public funds; or is otherwise not eligible to receive public funds.

x \_\_\_\_\_

I understand that the candidate's home address, the principal committee address and/or my home address, as provided above in Sections 1, 5, and 6, are the addresses to which legal notices, including correspondence and legal papers, will be sent. I further understand that if any of these addresses change, I am responsible for promptly notifying the CFB, in writing, of the change.

x \_\_\_\_\_

I understand that by providing an ABA routing number in the Schedule of Accounts section of this Certification (Section 11), I am authorizing the CFB to deposit any public funds payments the campaign is eligible to receive directly into the indicated checking account. I also grant authorization to the CFB for the full or partial reversal of any deposits to this account in the event that the deposit was made partly or entirely in error.

x \_\_\_\_\_

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 Administrative Code and other applicable law or rules. The Act provides for penalties of up to \$10,000 per violation, other than for failing to participate in the post-election audit process for which it provides for penalties of up to 10% of public funds received, and for spending limit violations, for which it provides for penalties of up to three times the amount by which the spending limit has been exceeded. I further understand that I, the candidate, the principal committee designated by the candidate for the 2007 new special election, and any other agent of the candidate, are jointly and severally liable for the repayment to the Board of public funds received and/or the payment of civil penalties assessed by the Board.

x \_\_\_\_\_

I understand that if the campaign exceeds the applicable expenditure limit under the Act, in addition to any penalties that may be assessed, the Board may require that all public funds received by the campaign be returned to the Board, and that the campaign may not be eligible to receive any additional public funds for the 2007 new special election. I further understand that if the campaign is required to return any public funds for exceeding the expenditure limit, or for any other reason, I, the candidate, and the principal committee designated by the candidate for the 2007 new special election, are jointly and severally liable for such repayment.

x \_\_\_\_\_

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 Administrative Code.

x \_\_\_\_\_

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.

x \_\_\_\_\_

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.

x \_\_\_\_\_

**SWORN TO BEFORE ME THIS**

\_\_\_\_\_ day of

\_\_\_\_\_, 2007

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
TREASURER SIGNATURE