

POLITICAL PARTY COMMITTEE -
DESIGNATION OF ORGANIZATIONAL TREASURER AND DEPOSITORY

FORM D-3

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/>

PLEASE TYPE OR PRINT

COMMITTEE NAME <i>Aberdeen Democratic Executive Committee</i>		FOR STATE USE ONLY ELEC RECEIVED JUL 02 2007	
<input type="checkbox"/> STATE COMMITTEE <input type="checkbox"/> COUNTY COMMITTEE <input type="checkbox"/> MUNICIPAL COMMITTEE			
ADDRESS (NUMBER AND STREET, CITY, STATE, ZIP CODE) <i>7 Northland Lane, Aberdeen, NJ 07747</i>			
*(AREA) DAY TELEPHONE <i>732-566-1419</i>	*(AREA) EVENING TELEPHONE		
COUNTY <i>Monmouth</i>	MUNICIPALITY <i>Aberdeen</i>		
IDENTIFICATION NUMBER	POLITICAL PARTY <i>Democratic</i>		
TYPE OF FILING <input checked="" type="checkbox"/> Annual Designation for July 1, <i>2007</i> to June 30, <i>2008</i> <input type="checkbox"/> Amendment (please specify below)			<input type="checkbox"/> Additional Depository <input type="checkbox"/> Deputy Treasurer

1 CHAIRPERSON

NAME <i>Robert Axeland</i>		
MAILING ADDRESS <i>7 Northland Lane</i>		
CITY <i>Aberdeen</i>	STATE <i>NJ</i>	ZIP CODE <i>07747</i>
*(AREA) DAY TELEPHONE <i>732-566-1419</i>	*(AREA) EVENING TELEPHONE	

2 TREASURER

NAME <i>Robert Axeland</i>		
MAILING ADDRESS <i>7 Northland Lane</i>		
CITY <i>Aberdeen</i>	STATE <i>NJ</i>	ZIP CODE <i>07747</i>
*(AREA) DAY TELEPHONE <i>732-566-1419</i>	*(AREA) EVENING TELEPHONE	
RESIDENT ADDRESS, IF DIFFERENT FROM MAILING ADDRESS		
CITY	STATE	ZIP CODE

3 DEPOSITORY INFORMATION

NAME OF BANK OR DEPOSITORY <i>Sovereign Bank</i>		
MAILING ADDRESS <i>Lloyd Rd</i>		
CITY <i>Aberdeen</i>	STATE <i>NJ</i>	ZIP CODE <i>07747</i>
(AREA) DAY TELEPHONE <i>732-566-2323</i>		
ACCOUNT NAME <i>Aberdeen Democratic Executive Committee</i>	ACCOUNT NUMBER <i>0581095367</i>	

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 <i>Judith Kauff</i>		
MAILING ADDRESS <i>7 Justice Lane</i>		
CITY <i>Aberdeen</i>	STATE <i>NJ</i>	ZIP CODE <i>07747</i>
*(AREA) DAY TELEPHONE <i>732-583-1114</i>	*(AREA) EVENING TELEPHONE	

NAME		
MAILING ADDRESS		
CITY	STATE	ZIP CODE
*(AREA) DAY TELEPHONE	*(AREA) EVENING TELEPHONE	

NAME		
MAILING ADDRESS		
CITY	STATE	ZIP CODE
*(AREA) DAY TELEPHONE	*(AREA) EVENING TELEPHONE	

TREASURER/CHAIRPERSON CERTIFICATION

I certify that the statements on this document are true and correct. I am aware that if any of the statements are willfully false, I am subject to punishment

<i>6/28/07</i> Date	<i>Robert Axelrad</i> Print Full Name (Treasurer)	<i>R Axelrad</i> Signature (Treasurer)
<i>6/28/07</i> Date	<i>Robert Axelrad</i> Print Full Name (Chairperson)	<i>R Axelrad</i> Signature (Chairperson)

Treasurers for the State Political Party Committees are required to receive training with the New Jersey Election Law Enforcement Commission

Check here if you have completed the training and enter your Treasurer Training ID # _____