



**LEGISLATIVE LEADERSHIP COMMITTEE -
REGISTRATION STATEMENT AND DESIGNATION OF
ORGANIZATIONAL DEPOSITORY**

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)
www.elec.state.nj.us/

**FORM D-5
FOR STATE USE ONLY**

PLEASE TYPE OR PRINT

Committee Name

Identifying Title or Acronym (Optional)

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

*(Area) Day Telephone

*(Area) Evening Telephone

Name of Legislative Leader

Senate

General Assembly

ELEC Identification Number

Political Party

Type of Filing Initial Registration Statement

Additional Depository

Deputy Treasurer

Amendment (please specify) _____

1. TREASURER

Name

Mailing Address

City

State

Zip Code

*(Area) Day Telephone

*(Area) Evening Telephone

Resident Address

City

State

Zip Code

2. DEPOSITORY INFORMATION

Name of Bank or Depository

Mailing Address

City

State

Zip Code

(Area) Day Telephone

Account Name

Account Number

Name of Bank or Depository

Mailing Address

City

State

Zip Code

(Area) Day Telephone

Account Name

Account Number

