



**POLITICAL PARTY COMMITTEE -  
DESIGNATION OF ORGANIZATIONAL  
TREASURER AND 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)  
Website: www.elec.nj.gov

**FORM D-3**

ELEC Received  
Jul 14, 2019  
8:00 PM

State Committee     County Committee     Municipal Committee

Committee Name  
**PISCATAWAY REGULAR DEMOCRATIC ORGANIZATION**

Street Address  
**PO BOX 1291**

City <b>PISCATAWAY</b>	State <b>NJ</b>	Zip Code <b>08854</b>
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*(Area Code) Day Telephone <b>(732) 245-6181</b>	*(Area Code) Evening Telephone <b>SAME</b>	ELEC Identification Number <b>H1217000111Q2019</b>
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Committee Email (Optional) \_\_\_\_\_ Committee Website (Optional) \_\_\_\_\_

County <b>MIDDLESEX COUNTY</b>	Municipality <b>PISCATAWAY TOWNSHIP</b>	Political Party <b>DEMOCRAT</b>
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Type of Filing:     Annual Designation for July 1, 2019 to June 30, 2019  
 Amendment (please specify) \_\_\_\_\_  
 Additional Depository                       Deputy Treasurer

**Chairperson Name**  
**TED LIGHT**

Mailing Address  
**21 WINANS AVENUE**

City <b>PISCATAWAY</b>	State <b>NJ</b>	Zip Code <b>08854</b>	*(Area Code) Day Telephone <b>(732) 245-6181</b>	*(Area Code) Evening Telephone <b>SAME</b>
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**Treasurer Name**  
**CHANELLE MCCULLUM**

Mailing Address  
**62 MORRIS LANE**

City <b>PISCATAWAY</b>	State <b>NJ</b>	Zip Code <b>08854</b>	*(Area Code) Day Telephone <b>(732) 878-2854</b>	*(Area Code) Evening Telephone <b>SAME</b>
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Resident Address, if different from mailing address  
**62 MORRIS LANE**

City <b>PISCATAWAY</b>	State <b>NJ</b>	Zip Code <b>08854</b>
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**Depository Information**

Name of Bank or Depository  
**PNC BANK**

Mailing Address  
**1240 STELTON ROAD**

City <b>PISCATAWAY</b>	State <b>NJ</b>	Zip Code <b>08854</b>	(Area Code) Day Telephone <b>(732) 572-0610</b>
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Account Name  
**PISCATAWAY REGULAR DEMOCRATIC ORGANIZATION**

Account Number  
**\*\*\*\*\*7829**

\*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.

**Depository Information (continued)**

Name of Bank or Depository  
N/A

Mailing Address

City	State	Zip Code	(Area Code) Day Telephone
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Account Name

Account Number

**LIST THE NAME(S), MAILING ADDRESS(ES) AND TELEPHONE NUMBER(S) OF ANY PERSON(S) AUTHORIZED TO SIGN CHECKS OR OTHERWISE MAKE TRANSACTIONS**

Name  
CHANELLE MCCULLUM

Mailing Address  
62 MORRIS LANE

City PISCATAWAY	State NJ	Zip Code 08854	*(Area Code) Day Telephone (732) 878-2854	*(Area Code) Evening Telephone SAME
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Name  
GABRIELLE CAHILL

Mailing Address  
1003 RIVER ROAD

City PISCATAWAY	State NJ	Zip Code 08854	*(Area Code) Day Telephone (732) 235-1920	*(Area Code) Evening Telephone SAME
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Name  
DANA KORBMAN

Mailing Address  
610 ABBOTT ST

City HIGHLAND PARK	State NJ	Zip Code 08904	*(Area Code) Day Telephone (732) 819-0909	*(Area Code) Evening Telephone SAME
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**CHAIRPERSON/TREASURER CERTIFICATION:** I certify that the statements on this document are true. I am aware that if any of the statements are willfully false, I may be subject to punishment.

Registration Number \*\*\*\*\*  
 \_\_\_\_\_  
 TED LIGHT  
 \_\_\_\_\_  
 Chairperson

PIN \*\*\*\*\*  
 \_\_\_\_\_  
 07/14/2019  
 \_\_\_\_\_  
 Date

Registration Number \*\*\*\*\*  
 \_\_\_\_\_  
 CHANELLE MCCULLUM  
 \_\_\_\_\_  
 Treasurer

PIN \*\*\*\*\*  
 \_\_\_\_\_  
 07/14/2019  
 \_\_\_\_\_  
 Date

Treasurers for State Political Party Committees are required to receive training with the NJ ELEC. If you have completed the training enter your Treasurer Training ID#  
\_\_\_\_\_

\*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.