



# CANDIDATE REGISTRATION INSTRUCTIONS

This form must contain original signatures in ink and be completed in full.  
Copies of signatures, including those on faxes, PDFs, or other electronic files, are not acceptable.

## FILE THIS FORM IF:

1. You are a candidate **without a registered authorized committee**. Candidates without a registered authorized committee must themselves disclose all financial activity of the campaign, including any use of their own money by filing disclosure reports on the required filing dates, **or**
2. You are a candidate **with a registered authorized committee AND you have additional financial activity that will not be reported by your committee**. Candidates with a registered authorized committee who have, or plan on having, any financial activity, including the financial activity of the candidate, that will not be disclosed by the committee, are required to disclose this other financial activity by filing financial disclosure reports on the required filing dates. These reports would be in addition to the committee's reports.

## WHERE TO FILE THIS FORM:

### State Candidates:

- Submit this form to NYSBOE to receive a Filer ID# and PIN to file electronically.

### Local Candidates:

- Submit this form to your local board of elections if you are a local candidate where at the close of the reporting period the aggregate of the receipts or expenditures of the campaign have not exceeded \$1,000, including the financial activity of the candidate; and/or
- Submit this form to your local board of elections and to NYSBOE to receive a Filer ID# and PIN to file electronically if at the close of the reporting period the aggregate of the receipts or expenditures of the campaign have exceeded \$1,000, including the financial activity of the candidate, and the candidate does not have a registered authorized committee disclosing all of the financial activity of the campaign, including the financial activity of the candidate; or if the candidate has a registered authorized committee, but chooses to have financial activity for the campaign that will not be disclosed by the registered authorized committee.

## DO NOT FILE THIS FORM IF:

You are a candidate **with a registered authorized committee that will make all of the candidate's required campaign financial disclosure filings**. These committee filings would include all the financial activity of the campaign, including the financial activity of the candidate. In this instance, candidates are required to submit a *Candidate Authorization for a Committee to Make All Campaign Financial Disclosures form*.

**New Registration:** Check this box if filing this form for the first time to obtain a Filer ID# and PIN in order to make campaign financial disclosures. The Filer ID# should be used on all documents and correspondence to NYSBOE.

**Amended Registration:** For an existing candidate, if any information previously filed has changed, other than the election year, check this box. A fully completed amended registration must be filed within two days of any change. Provide the Filer ID# that was assigned by NYSBOE when this form was originally filed.

**For State Campaign:** For candidates running for New York State Governor, Lt. Governor, State Comptroller, State Attorney General, State Senate, State Assembly and State Supreme Court and certain party offices, check this box.

**For Local Campaign:** For all other offices/party positions, check this box and list the county name where the local office is being sought.

**Item A:** Candidates for statewide office must provide the office sought, district# and election year. Local candidates provide the office sought including the name and type of municipality e.g., city of, town of or village of. The district and election year must also be provided.

**Item B:** Enter the name of the candidate. A residential address is mandatory; include building and apartment number, city or town, state and zip code. Social Security number is optional. P.O. Box is not allowed for residential address. Social Security number is optional.

**Item C:** Your account must be opened at a banking organization authorized to do business in New York State. The branch where the account is opened and held must be physically located in New York State.