

EXEMPTION

CANDIDATE OR COMMITTEE CLAIM OF EXEMPTION From Filing Campaign Financial Disclosure Reports

NEW YORK STATE BOARD OF ELECTIONS
Section 14-124 of NYS Election Law

THIS FORM MUST CONTAIN ORIGINAL SIGNATURES IN INK AND BE COMPLETED IN FULL

Please check the applicable boxes below and complete this form in full:

- For State Campaign -or- For Local Campaign (provide County): _____
 Candidate -or- Committee

A. OFFICE: _____
(For a local campaign also include name and type of municipality e.g., city of..., town of..., or village of...)

District: _____ Election Year: _____

B. CANDIDATE OR COMMITTEE NAME: _____

Committee Treasurer Name (If applicable): _____

Residential Address (No P.O. Box): _____ Apartment #: _____

City or Town: _____ State: _____ Zip: _____

Mailing Address (P.O. Box allowed): _____ Apartment #: _____

City or Town: _____ State: _____ Zip: _____

Social Security Number (Optional): _____ Email: _____

Telephone: Home: _____ Business: _____ Cell: _____

Please check the applicable box that relates to your claim of exemption:

- C.** I am a candidate and I have not/will not receive or spend more than \$50 for my campaign, including my own personal funds.
- D.** I am the treasurer of a committee formed solely to support or oppose a ballot proposition and the committee has not/will not raise or spend over \$100 relative to the ballot proposition.
- E.** For those in a town, city or village having a population under 10,000: 1) I am a candidate for public office, or treasurer of an authorized committee solely supporting one candidate for public office, or treasurer of a committee solely supporting or opposing a ballot proposition; and 2) the receipts or expenditures of the candidate or committee will not exceed \$1,000 in the aggregate for the campaign.

If after submission of this form the basis for a claim of exemption becomes invalid due to a change in circumstances (e.g., exceeding monetary threshold or scope of candidate/committee activity), the candidate/committee must then file all applicable election reports. See instructions.

Knowingly including false information in this form constitutes a Class A Misdemeanor, punishable by a fine and/or imprisonment. See Penal Law §210.45.

I swear or affirm that the information contained herein is in all respects true and complete to the best of my knowledge, information and belief.

Sworn to before me this _____ day

Signature of Candidate/ Committee Treasurer

of _____, 20 ____

Residential Address

(Notary Public or Commissioner of Deeds)

Contact Phone Number

EXEMPTION INSTRUCTIONS

This form must contain original signature(s) in ink and be notarized or subscribed to.
Copies of signatures, including those on faxes, PDFs, or other electronic files, are not acceptable.

A candidate or committee must file this form at each appropriate board of elections where the candidate or committee is required to file campaign financial disclosure reports.

For State Campaign: Check this box for candidates or committees supporting or opposing candidates for New York State Governor, Lt. Governor, State Comptroller, State Attorney General, State Senate, State Assembly and State Supreme Court, as well as those solely supporting or opposing statewide ballot propositions.

For Local Campaign: Check this box for all other offices and local ballot propositions, and list the county name where the local office is being sought or the ballot proposition is appearing. Candidates or committees supporting or opposing such candidates or ballot propositions can file this form with the appropriate local board of elections, or village clerk where the village clerk runs the election.

Check the appropriate box to indicate whether this is a candidate or a committee seeking exemption.

Item A: Candidates for statewide office must provide the office sought, district number if applicable and election year. Local candidates must provide the office sought, including the name and type of municipality (e.g., City of Newburgh; Town of Colonie; Village of Scotia). The district and election year must also be provided.

Item B: Enter the name of the candidate or committee. Residential address is mandatory; include building and apartment number if applicable, a mailing address if different, phone number and e-mail address of the candidate or treasurer. P.O. Box is not allowed for residential address.

Item C: Candidates who do not receive or spend more than \$50 (this threshold includes their own personal funds), including candidates for county committee of a political party or for delegate or alternate delegate to a judicial district convention, must inform the appropriate board(s) of elections in writing of this fact.

Item D: A committee formed solely to support or oppose a ballot issue, that does not raise or spend over \$100, is not required to file campaign financial disclosure reports.

Item E: Candidates and authorized committees solely supporting one candidate for public office, or solely supporting or opposing a ballot proposition, in towns, cities or villages having a population under 10,000, where the candidate and/or committee does not raise or spend in excess of \$1,000 in the aggregate for the campaign, are not required to file campaign financial disclosure reports. This threshold includes the personal funds of the candidate.

Note: This exemption may become invalid, requiring registration and filing of campaign financial disclosure reports with the applicable state, county and/or city board(s) of elections, if the candidate or committee supports or opposes candidates or ballot propositions outside of the applicable jurisdiction.

Note: For a town or village, ballot propositions not submitted to the voters of that municipality at the time of a general election fall outside the scope of NYS Election Law. Therefore, committees solely supporting ballot propositions in a town or village taking place other than in November do not have to make campaign financial disclosures relative to their ballot proposition activity. In this instance, this form does not have to be filed.

If you have any questions about a claim of exemption, contact:

New York State Board of Elections
Compliance Unit
40 North Pearl Street, Suite 5
Albany, NY 12207-2729
1-800-458-3453; 518-474-8200