



**County of Bergen**  
**"Sunshine Form" for Disclosure of Political Contributions**  
**\*Please fill out and attach to each resolution\***

**DIRECT FINANCIAL DISCLOSURE OF CAMPAIGN CONTRIBUTIONS**

(A) VENDOR NAME or SPECIAL COUNSEL NAME Care Plus NJ, Inc

VENDOR ADDRESS or SPECIAL COUNSEL ADDRESS 610 Valley Health Plaza, Paramus, NJ 07652

VENDOR TELEPHONE NUMBER (201 ) 265 - 8200 ext 5242 FAX # (201 ) 265 - 1582

VENDOR REPRESENTATIVE NAME (Please Print) Elizabeth Itzie

VENDOR EMAIL ADDRESS elizabethi@careplusnj.org

VENDOR REPRESENTATIVE SIGNATURE Ely L.A. DATE 2/12/19

(B) THE NAME OF THE PARTNERS OR SHAREHOLDERS OR, IF A PUBLIC CORPORATION, THE NAME OF THE CORPORATE OFFICERS AND DIRECTORS AS FOUND ON THE IOK OR IOQ FORMS REQUIRED TO BE FILED WITH THE FEDERAL SECURITIES AND EXCHANGE COMMISSION.

Joseph Masciandaro

(C) CAMPAIGN CONTRIBUTIONS MADE, BY ANY INDIVIDUAL(S) AND/OR BUSINESS ENTITY LISTED IN (A) OR (B) (ABOVE) DURING THE PRIOR AND CURRENT CALENDAR YEAR TO THE FOLLOWING NAMED ELECTED OFFICIALS AND CONSTITUTIONAL OFFICERS:

(D) ☒ **No contributions (sign below and return, nothing else required except signature/date on this page only)**

I made no contributions and certify the foregoing to be true to the best of my knowledge and if I have made a deliberate misstatement I may be subject to punishment.

Signature: Joseph Masciandaro Date: 2/12/19

Print your name: Joseph Masciandaro

OFFICIAL POSITION/ NAME (\* Denotes Incumbent)

COUNTY EXECUTIVE James J. Tedesco (D)\*

Norman Schmelz (R)

SHERIFF Anthony Cureton (D)\*

John M. Delorenzo III (R)

Michael Saudino (D)

Other

<sup>1</sup> This form shall be updated periodically to reflect new elected officials and candidates for office. However, it shall maintain the format and required disclosures contained herein.



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SURROGATE	Michael Dressler (D)*	_____
COUNTY CLERK	John Hogan (D)*	_____
FREEHOLDERS:	Mary Amoroso (D)*	_____
	David L. Ganz (D)*	_____
	Germaine Ortiz (D)*	_____
	Thomas J. Sullivan, Jr. (D)*	_____
	Steven A. Tanelli (D)*	_____
	Joan M. Voss (D)*	_____
	Tracy S. Zur (D)*	_____
	Eric Kulmala (R)	_____
	Hector Olmo (R)	_____

☐ **I made the contribution/s (listed above) and certify the foregoing to be true to the best of my knowledge and if I have made a deliberate misstatement I may be subject to punishment. (sign this section if a contribution is listed)**

**Signature: X** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print your name:** \_\_\_\_\_