CONTINUING POLITICAL 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)
Website: www.elec.nj.gov

FORM D-4

ELEC Received
Feb 17, 2022 7:58 PM

☐ **Amendment**

Committee Name
GARDEN STATE MILLENIALS

Identifying Title or Acronym (Optional)
GSM

Street Address
131 S MAPLE AVENUE

City | State | Zip Code
MAPLE SHADE | NJ | 08052

*Day Telephone | *Evening Telephone | ELEC Identification Number
856-524-3608 | | Y0000042044Q2022

Committee Email (Optional) | Committee Website (Optional)
MBATH@HOTMAIL.COM |

Committee Type ◉ Statewide Committee ○ County / Local Committee

County | Municipality | Political Party, if any
 | STATEWIDE | NONPARTISAN

Type of Filing: ☐ Initial Registration Statement ☐ Additional Depository ☐ Deputy Treasurer
☒ Amendment (please specify) NEW LEADERSHIP

1. Chairperson Name

MANJOT SINGH

Mailing Address | City | State | Zip Code
131 S. MAPLE AVE | MAPLE SHADE | NJ | 08052

*Day Telephone | *Evening Telephone | Occupation
856-524-3608 | | BUSINESS OWNER

Employer Name and Address
M&M FREIGHT LINES INC

2. Treasurer Name

MANDEEP BATH

Mailing Address | City | State | Zip Code
131 S MAPLE AVE | MAPLE SHADE | NJ | 08052

Resident Address, if different from mailing address | City | State | Zip Code
 | | |

*Day Telephone | *Evening Telephone | Occupation
856-524-3608 | | BUSINESS OWNER

Employer Name and Address
MM FLEET INC

3. Depository Information

Name of Bank or Depository

Mailing Address

City | State | Zip Code | Day Telephone

Account Name

Account Number

**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.*

3. Depository Information (continued)

Name of Bank or Depository

Mailing Address

City | State | Zip Code | Day Telephone

Account Name

Account Number

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

Name: MANJOT SINGH

Mailing Address: 131 S MAPLE AVE

City	State	Zip Code	*Day Telephone	*Evening Telephone
MAPLE SHADE	NJ	08052	856-524-3608	

Name: MANDEEP BATH

Mailing Address: 131 S MAPLE AVE

City	State	Zip Code	*Day Telephone	*Evening Telephone
MAPLE SHADE	NJ	08052	856-524-3608	

Name

Mailing Address

City	State	Zip Code	*Day Telephone	*Evening Telephone

5. General Organizational Category or Affiliation (Select One)

- ○ Business
- ○ Labor Union
- ○ Professional Association
- ○ Other
- ◉ Ideological Group
- ○ Political Club
- ○ Trade Association
- ○ Independent Expenditure Only Committee
- ○ Public Question
- ○ Support
- ○ Oppose

6. List the names/mailing addresses of the persons (other than chairperson) or entities having direct or indirect control over the affairs of the continuing political committee. (This includes, but is not limited to persons in whose name or at whose direction or suggestion the committee solicits funds or makes contributions.)

Name of Person or Entity

Mailing Address

City

State, Zip Code

Occupation

Employer Name

Employer Mailing Address

City, State, Zip Code

**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.*

6. (Continued)

Name of Person or Entity

Occupation

Mailing Address

Employer Name

City

Employer Mailing Address

State, Zip Code

City, State, Zip Code

7. List the names/mailing addresses of the persons or entities not already listed in question #6 who, directly or through an agent, participated in the initial organization of the continuing political committee.

Name of Person or Entity

Occupation

Mailing Address

Employer Name

City

Employer Mailing Address

State, Zip Code

City, State, Zip Code

Name of Person or Entity

Occupation

Mailing Address

Employer Name

City

Employer Mailing Address

State, Zip Code

City, State, Zip Code

Name of Person or Entity

Occupation

Mailing Address

Employer Name

City

Employer Mailing Address

State, Zip Code

City, State, Zip Code

Name of Person or Entity

Occupation

Mailing Address

Employer Name

City

Employer Mailing Address

State, Zip Code

City, State, Zip Code

8. Describe the economic, political or other particular interests and objectives to be advanced by the continuing political committee.

EMPOWER GOOD LEADERSHIP BY ENCOURAGING INDIVIDUALS TO GET INVOLVED IN THEIR GOVERNMENT.

9. List the name and resident address of a New Jersey resident who has been designated by the continuing political committee as the agent of the continuing political committee to accept service of legal process.

Name

Resident Address

City State Zip Code

10. Has any New Jersey candidate or officeholder (other than a federal candidate) established, authorized the establishment of, maintained or participated directly or indirectly in the management or control of this continuing political committee, or will any New Jersey candidate do so in the future?

○ YES ◉ NO

11. What is the total amount of money this continuing political committee estimates it will raise:

(Please estimate to the best of your ability.)

This calendar year? $15,000.00

Next calendar year? $15,000.00

12. How much of the total amount of money raised is expected to be spent for New Jersey election-related activity during:

(Please estimate to the best of your ability.)

This calendar year? $12,000.00

Next calendar year? $12,000.00

13. What percentage of the total amount of money raised will be used for New Jersey election-related activity during:

(Please estimate to the best of your ability.)

This calendar year? 90 **%**

Next calendar year? 90 **%**

14. Is making contributions to New Jersey candidates or committees, or otherwise engaging in New Jersy election-related activity expected to be a major purpose of this continuing political committee?

◉ YES ○ NO

15. Besides engaging in election-related activity, what other types of expenditures will be made by this continuing political committee?

RESEARCH & MARKETING

16. Will this continuing political committee solicit any of its funds from the public for New Jersey election-related activity:

100 inside New Jersey

_____ outside New Jersey

_____ *both inside and outside New Jersey

*** If "both," what percentage of the funds are expected to be raised outside New Jersey?**

_____ **%**

17. Will this continuing political committee solicit contributions with the stated or principal purpose of making contributions to New Jersey candidates or committees?

(●) YES ( ) NO

18. Does this continuing political committee file with the Federal Election Commission?

( ) YES (●) NO

19. Will this committee engage in only independent expenditure activity?

( ) YES (●) NO

TREASURER/CHAIRPERSON CERTIFICATION

I certify that the statements on this document are true and correct. I further certify that no candidate or officeholder has established, authorized the establishment of, maintained or participated directly or indirectly in the management or control of the Continuing Political Committee, and no candidate or officeholder shall be permitted to do so during the existence of the Continuing Political Committee. I am aware that if any of the statements are willfully false, I am subject to punishment.

Registration Number ********** PIN ******

Treasurer MANJOT SINGH Date 02/17/2022

Registration Number ********** PIN ******

Chairperson MANDEEP K BATH Date 02/17/2022