

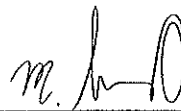
1. **CONTRIBUTION DISCLOSURE STATEMENT:** Please list below all contributions to any candidate, candidate committee, joint candidates committee, political committee, continuing political committee or political party committees of, or pertaining to, the Township of Marlboro made within one (1) year prior to the last municipal election through the time of filing the application with or seeking approval from the Zoning Board of Adjustment by (a) the applicant; (b) any developer involved in the application; (c) any associates (stockholders or individual partners) of said developers who are required to be disclosed pursuant to N.J.S.A. 40:55D-48.1 or 40:55D-48.2; and (d) any professionals who apply for or provide testimony, plans or reports in support of the application or who have an enforceable proprietary interest in the property or development which is the subject of the application or whose fee in whole or part is contingent upon the outcome of the application. Identify the name of the individual or entity who made the contribution, the recipient of the contribution, the amount of the contribution and the date of the contribution (*attach additional pages if necessary*):

APPLICATION ZB#: 20-6720

NAME: _____

CONTRIBUTOR	RECIPIENT	AMOUNT	DATE
NONE	NONE	NONE	NONE

X



Signature

9/9/2020

Date

2. **CONFLICT DISCLOSURE STATEMENT:** List below any business, financial, social or family relationships between any current member of the Zoning Board of Adjustment and (a) the applicant; (b) any developer involved in the application; (c) all associates (stockholders or individual partners) of said developers who are required to be disclosed pursuant to N.J.S.A. 40:55D-48.1 or 40:55D-48.2; and (d) any professionals who apply for or provide testimony, plans or reports in support of the application or who have an enforceable proprietary interest in the property or development which is the subject of the application or whose fee in whole or part is contingent upon the outcome of the application. Identify the individuals or entities who have such a relationship and the nature of the relationship. *(attach additional pages if necessary):*

APPLICATION ZB#: _____

NAME: _____

INDIVIDUAL/ENTITIES WITH RELATIONSHIP	NATURE OF RELATIONSHIP
None	None

X



Signature

9/9/20

Date