# SUPPLEMENTAL CONTRIBUTOR INFORMATION

**NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION**

*P.O. Box 185, Trenton, NJ 08625-0185*
*Phone: (609) 292-8700*
*Website: www.elec.nj.gov*

**FORM C-1**

ELEC Received
Oct 13, 2026 12:15 AM

☐ **Amendment**

**CONTRIBUTIONS REPORT TYPE (Select One)**

- (●) Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received a contribution in excess of $200 in the aggregate from one source in the election, or any currency (cash) contributions.
- ( ) Committee receiving a contribution in excess of $300 in the aggregate from one source starting with the13th day before the election up to, and including the day of the election (72/24 Hour Notice).

## SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION

Candidate(s) / Committee Name: PATRICIA (TRISH) AZEEZ

Street Address: 360 N WYOMING AVE

Office Sought: SCHOOL BOARD

City: SOUTH ORANGE | State: NJ | Zip Code: 07079 | *Day Telephone: 2677670879 | *Evening Telephone: 2677670879

Election Type: (Select One) (●) School Board

Election Date: 11/03/2026

County: ESSEX COUNTY

Legal Name of Election District or Municipality: SO ORANGE-MAPLEWOOD BD OF ED

Political Party: NONPARTISAN

## SECTION II. CONTRIBUTION INFORMATION

| Contributor Type | Last Name / Non-Individual Name | First Name | Street Address | City | State | Zip Code | Occupation | Date Received | Employer Name | Employer Street Address | Employer City | Employer State | Employer Zip | Receipt Type | Description, if In-Kind Contribution | Aggregate Amount | Amount |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| (●) Individual ( ) Non-Individual | AZEEZ | PATRICIA | 360 N WYOMING AVE | SOUTH ORANGE | NJ | 07079 | UNEMPLOYED | 08/10/2026 | N/A | | | | | CASH | | $6,500.00 | $500.00 |
| (●) Individual ( ) Non-Individual | AZEEZ | PATRICIA | 360 N WYOMING AVE | SOUTH ORANGE | NJ | 07079 | UNEMPLOYED | 09/02/2026 | N/A | | | | | LOAN | CANDIDATE LOAN TO FUND EXPENDITURES, REPAYABLE FROM AVAILABLE FUNDS | $6,500.00 | $4,500.00 |

**Total This Page:** $5,000.00

**Grand Total:** $7,710.25

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

Candidate or Treasurer: PATRICIA A AZEEZ Date: 10/13/2026

*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.

Contributor Type: (●) Individual ( ) Non-Individual | Last Name / Non-Individual Name: AZEEZ

First Name (Leave blank if Non-Individual): PATRICIA | Street Address: 360 N WYOMING AVE

City: SOUTH ORANGE | State: NJ | Zip Code: 07079 | Occupation: UNEMPLOYED | Date Received: 10/06/2026

Employer Name: N/A | Street Address: | City: | State: | Zip:

Receipt Type: LOAN | Description, if In-Kind Contribution: CANDIDATE LOAN TO FUND EXPENDITURES, REPAYABLE FROM AVAILABLE FUNDS | Aggregate Amount: $6,500.00 | Amount: $1,500.00

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Contributor Type: (●) Individual ( ) Non-Individual | Last Name / Non-Individual Name: SCOTT

First Name (Leave blank if Non-Individual): TIFFANY | Street Address: 34 HARDING DRIVE SOUTH

City: SOUTH ORANGE | State: NJ | Zip Code: 07079 | Occupation: PHYSICIAN | Date Received: 08/30/2026

Employer Name: UNKNOWN | Street Address: | City: | State: | Zip:

Receipt Type: ELECTRONIC | Description, if In-Kind Contribution: | Aggregate Amount: $309.00 | Amount: $309.00

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Contributor Type: (●) Individual ( ) Non-Individual | Last Name / Non-Individual Name: WILSON

First Name (Leave blank if Non-Individual): NUBIA | Street Address: 191 MAYHEW DRIVE

City: SOUTH ORANGE | State: NJ | Zip Code: 07079 | Occupation: MEDIA | Date Received: 09/06/2026

Employer Name: UNKNOWN | Street Address: | City: | State: | Zip:

Receipt Type: ELECTRONIC | Description, if In-Kind Contribution: | Aggregate Amount: $386.25 | Amount: $386.25

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Contributor Type: (●) Individual ( ) Non-Individual | Last Name / Non-Individual Name: SMITH

First Name (Leave blank if Non-Individual): DONNA | Street Address: 1226 MIRACLE LANE

City: FORT MYERS | State: FL | Zip Code: 33901 | Occupation: RETIRED | Date Received: 09/19/2026

Employer Name: N/A | Street Address: | City: | State: | Zip:

Receipt Type: ELECTRONIC | Description, if In-Kind Contribution: | Aggregate Amount: $515.00 | Amount: $515.00

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Contributor Type: ( ) Individual ( ) Non-Individual | Last Name / Non-Individual Name:

First Name (Leave blank if Non-Individual): | Street Address:

City: | State: | Zip Code: | Occupation: | Date Received:

Employer Name: | Street Address: | City: | State: | Zip:

Receipt Type: | Description, if In-Kind Contribution: | Aggregate Amount: | Amount:

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**Total This Page:** $2,710.25

**Grand Total:** $7,710.25

Contributor Type ○ Individual ○ Non-Individual | Last Name / Non-Individual Name

First Name (Leave blank if Non-Individual) | Street Address

City | State | Zip Code | Occupation | Date Received

Employer Name | Street Address | City | State | Zip

Receipt Type | Description, if In-Kind Contribution | Aggregate Amount | Amount

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Employer Name | Street Address | City | State | Zip

Receipt Type | Description, if In-Kind Contribution | Aggregate Amount | Amount

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Receipt Type | Description, if In-Kind Contribution | Aggregate Amount | Amount

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**Total This Page:**

**Grand Total:** $7,710.25