



PERSONAL FINANCIAL DISCLOSURE STATEMENT

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.state.nj.us

PFD-1

FOR STATE USE ONLY

ELEC RECEIVED
APR - 7 2017

PLEASE PRINT OR TYPE

Candidate Name: Joseph R. Rullo Legislative District: 9th

Address: 55 Pin Oak Lane

City: LEHT State: NJ Zip: 08087

Election Date: June 6, 2017 Political Party, if any: Republican Amendment checkbox

Office Sought: Governor (checked), Lieutenant Governor, Senate, Assembly

Calendar Year of Report: 2017

Note: The PFD-1 form covers the calendar year preceding the year of election.

CANDIDATE CERTIFICATION

I, the undersigned, do hereby certify as follows:

The information reported in this personal financial disclosure statement is true and complete. I am aware that if any of the statements contained herein are willfully false or incomplete, I may be subject to punishment.

Candidate Signature (handwritten signature)

Date: April 4, 2017

SCHEDULE I - EARNED INCOME

IDENTIFY EACH SOURCE IN EXCESS OF \$100 WHEN AGGREGATE RECEIPTS FROM ALL SOURCES
WITHIN A CATEGORY EXCEEDS \$1,000

Check if aggregate received in each category exceeds \$1,000	Recipient	Name and Address of Source
Salary <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	SELF Employed - LANDSCAPING 55 Pin OAK Ln. LEHT NJ 08087
Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na
Royalties <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na
Fees <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na
Commissions <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na
Profit Sharing <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na

SCHEDULE II - UNEARNED INCOME

IDENTIFY EACH SOURCE IN EXCESS OF \$100 WHEN AGGREGATE RECEIPTS FROM ALL SOURCES
WITHIN A CATEGORY EXCEEDS \$1,000

Check if aggregate received in each category exceeds \$1,000	Recipient	Name and Address of Source
Rents <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na
Dividends <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na
*Other Income (Including Interest) <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na

*Other Income from named investments, trusts and estates.

SCHEDULE III - HONORARIUMS AND FEES IN EXCESS OF \$100

Description	Recipient	Name and Address of Payer
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na

SCHEDULE IV - REIMBURSEMENTS IN EXCESS OF \$100

Description	Recipient	Name and Address of Payer
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Na

SCHEDULE V - GIFTS VALUED IN EXCESS OF \$250

Recipient	Name and Address of Donor
<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	NA

SCHEDULE VI

OWNERSHIP, HOLDING OR CONTROL OF AN INTEREST IN ANY LAND OR BUILDING IN ANY CITY IN WHICH CASINO GAMBLING IS AUTHORIZED, WHICH LAND OR BUILDING SHALL BE SPECIFIED

Description	Person Owning, Holding, or Controlling Interest in Land/Building	Address of Land or Building
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	NA