

FORM CF-04 INSTRUCTIONS

**This form must contain original signatures in ink and be notarized or subscribed to.
Copies of signatures, including those on faxes, PDFs, or other electronic files, are not acceptable.**

FILE THIS FORM IF:

- You are a candidate **without a registered authorized committee** and you are required to file campaign financial disclosure reports electronically with NYSBOE and need a Filer ID# and PIN. Candidates who do not have a registered authorized committee disclosing all the financial activity of the campaign, including the financial activity of the candidate, must themselves disclose all of this activity by filing disclosure reports on the required filing dates.
- You are a candidate **with a registered authorized committee AND** you have additional financial activity that will **not** be reported by your committee and you need a Filer ID# and PIN to file electronically with NYSBOE. Candidates with a registered authorized committee that have, or plan on having, any financial activity, including the financial activity of the candidate, that will not be disclosed by the committee are required to disclose this other financial activity by filing financial disclosure reports on the required filing dates. These reports would be in addition to the committee's reports.

DO NOT FILE THIS FORM IF:

- You are a candidate **with a registered authorized committee** that will make **all** of the candidate's required campaign financial disclosure filings. These committee filings would include all the financial activity of the campaign, including the financial activity of the candidate. In this instance, candidates are required to submit a *Candidate's Authorization for a Committee to Make All Campaign Financial Disclosures (CF-16)*.

New Registration: Check this box if filing this form for the first time to obtain a Filer ID# and PIN in order to make campaign financial disclosures. The Filer ID# should be used on all documents and correspondence to NYSBOE.

Amended Registration: For an existing candidate, if any information previously filed has changed, other than the election year, check this box. A fully completed amended registration must be filed within two days of any change. Provide the Filer ID# that was assigned by NYSBOE when this form was originally filed.

For State Campaign: For candidates running for New York State Governor, Lt. Governor, State Comptroller, State Attorney General, State Senate, State Assembly and State Supreme Court and certain party offices, check this box.

For Local Campaign: For all other offices, check this box and list the county name where the local office is being sought.

Item A: Candidates for statewide office must provide the office sought, district# and election year. Local candidates provide the office sought including the name and type of municipality e.g., city of, town of or village of. The district and election year should also be provided.

Item B: Enter the name of the candidate. Please provide a residential address, mailing address if different, and phone number. P.O. Box is not allowed for residential address. Social Security number is optional.

Item C: Your account must be opened at a banking organization authorized to do business in New York State. The branch where the account is opened and held must be physically located in New York State.