

LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2005

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 292-4625. The completed disclosure form is due May 15, 2006 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

S. Gerald Cardinale
PRINT NAME

CHECK APPROPRIATE HOUSE: Senate General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2005. For each entry, check the box of the appropriate recipient. When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000 - \$24,999.99; 3=\$25,000 - \$49,999.99; 4=\$50,000 or more.

I. EARNED INCOME: List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing and fees.)

	Name	Address	Circle Amount Code	Self	Spouse	Child
1)	<u>S Gerald Cardinale dental</u>	<u>2361 Kenmore Ft Lee N.J.</u>	1 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	<u>Boro of Demarest</u>	<u>Demarest N.J.</u>	1 2 3 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. UNEARNED INCOME: List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. RENTS

	Property Address	Tenant Name	Circle Amount Code	Self	Spouse	Child
1)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

B. DIVIDENDS

Name	Address	Circle Amount Code	Self	Spouse	Child
1) <u>Dreyfus Liquid assets</u>	_____	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. INCOME from investments, trusts and estates (including capital gains).

Name	Address	Circle Amount Code	Self	Spouse	Child
1) <u>North Fork Bank</u>	_____	① 2 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) <u>Wells Fargo Bank</u>	_____	① 2 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) <u>Morgan Stanley - see list ATT.</u>	_____	1 ② 3 4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. HONORARIA and FEES: List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.

Name & Nature of Honorarium or Fee	Address	Circle Amount Code	Self	Spouse
1) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
3) <u>NONE</u>	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>

IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE: List the name, address, nature and amount for each source of reimbursement or prepaid expense and circle whether the source is a profit (P), nonprofit (N), or governmental (G) entity.

Name & Nature of Reimbursement or Prepaid Expense	Address	Circle Amount Code	Self	Spouse	Child	Circle P, N or G
1) <u>Jewish Federation Bergen County</u>	_____	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P <input checked="" type="checkbox"/> N G
2) <u>N.J. Press Assoc dinner Prudential Bldg</u>	_____	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
3) <u>American Int. Group</u>	_____	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

V. GIFTS: List the name, address, nature and amount for each source of gift in excess of \$250.

Name & Nature of Gift	Address	Circle Amount Code	Self	Spouse	Child
1) [REDACTED]	[REDACTED]	<input checked="" type="radio"/> 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) [REDACTED]	[REDACTED]	<input checked="" type="radio"/> 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. LIABILITIES: List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

Name & Nature of Liability	Address	Circle Amount Code	Self	Spouse
1) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
3) NONE	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>

VII. FORGIVEN LIABILITIES: List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

Name & Nature of Forgiven Liability	Address	Circle Amount Code	Self	Spouse
1) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
2) NONE	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>

VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

Name	Address	Self	Spouse
1) Emerald Cove Villas	St Martin FWI	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2) Sun Spa	Belwy - 16th St NYC.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3) Kaufer Lane Realty	FT Lee N.J.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) Kaufer Main Realty	FT Lee N.J.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

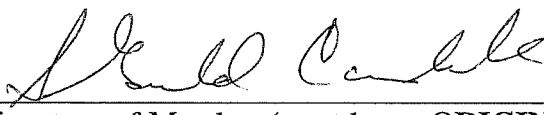
Position Held	Name & Address of Entity	Self	Spouse
1) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3) NONE	_____	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

Property Address	Description of Property	Self	Spouse	Child
1) 306 Hardenburgh av Demarest	HOME	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) 2361 / 2357 Lemoine ave Ft Lee	Commercial Bldg.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) Apt 2205 200 Winston Drive Cliffside PK	rental apt	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) 51/53 Main / 1664 Kaufer Lane Ft Lee	Vacant Land	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
94 main St Ft Lee N.J.	vacant land.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
98/100 main St Ft Lee N.J.	Commercial Prop	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

I certify that the above information is correct and complete to the best of my knowledge.

May 4 2006
Date


Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

Morgan Stanley

DR GERALD CARDINALE &
CAROLE CARDINALE JTEN

Municipal Bonds**

Code	Description
3	TOMS RIVER N J BRD ED SCHOOL DIST UNLTD TAX 5.700% JAN/JUL 15 DUE 07/15/13 PREREFUNDED AT 100.00 07/15/07
3	WINSLOW TWP N J GENERAL OBLIGATION BK QUAL UNLTD TAX FSA BE 5.600% FEB/AUG 15 DUE 08/15/14 PREREFUNDED AT 100.00 08/15/07
2	NJS TPK AU TPK REF SF BEGINNING 1-1-06 CAV OID YLD 10.375% 6.750% JAN/JUL 01 DUE 01/01/09 ESCROWED TO MATURITY
3	TOMS RIVER N J BRD ED REF REG SCHS UNLTD TAX 5.000% JAN/JUL 15 DUE 07/15/22 CALLABLE \$101.00 ON 07/15/09
2	NEW JERSEY HLTH CARE FACS FING AU REF PALISADES MED CTR 5.250% JAN/JUL 01 DUE 07/01/28 CALLABLE \$101.00 ON 07/01/09

Municipal Bonds

Change Since Last Statement

**The "Current Price" and "Value" are the value that could actually

This page all Self & Spouse

Morgan Stanley

DR GERALD CARDINALE &
CAROLE CARDINALE JTEN

Cash/Money Market Funds/Bank Deposits

CASH
ACTIVE ASSETS TAX FREE TRUST
Total Money Market Funds
Total Cash/MMF/Bank Deposits
Net Change Since Last Statement

Stocks

Common Stocks

Code	Description
2	ALLSTATE CORP
2	CISCO SYS INC
1	FREESCALE SEMICONDUCTOR CL. B
1	JDS UNIPHASE CORP
2	JPMORGAN CHASE & CO
3	MOTOROLA INC
2	MRV COMMUNICATION INC
2	ORACLE CORP
2	PEPSICO INC NC
4	ROYAL GOLD INC
3	SUNRESORTS LTD NV A
3	SUNRESORTS LTD NV A

KS

Change Since Last Statement

91:12:14 - 4 P 12:14

COOPERATIVE
SERVICES
INVESTMENT

Investmen

Morgan Stanley

CAROLE CARDINALE
306 HARDENBURGH AVENUE

DESCRIPTION	Code
AMERICAN EXPRESS CO	2
BANK OF NEW YORK	2
CISCO SYS INC	3
DUKE ENERGY CORP	1
FIRSTENERGY CORP	2
INTEL CORP	2
JPMORGAN CHASE & CO	2
TIME WARNER INC NEW	3

Some only all of these

91 5 11 - 4 P 12 19
LEADERS
FINANCIAL

1		
2	ASudulheyer	
3	ASudulheyer	1
4	DR werfenthal	3
5	Kim/Riggs	2
6	Jail Services	1
7	S. Geminder	2
8	Sword R.E.	1
9	ms willis	2
10	Julie Lee	1
11		
12	Tenants @ 94 main	
13	outdoor adv	1
14		
15		
16	@ 98 main	
17	Frames of mine	4
18	ANN storogum	1
19	Escobar	2
20	Bennett	2
21	D oprandy elect	1
22		
23	@ 200 Winston Dr	
24	Cliffside PK	
25	Gross/Shapiro	3
26		
27		
28		
29		
30		
31		
32		
33		
34		
35		
36		
37		

#		178
1	D5 Access Direct	1
2		
3	A11 Alpha Pub	1
4		
5	A11 Brea Hoj Joann	1
6		
7	A2 Lion Metals	1
8		
9	G1 Richards, Michael	1
10		
11	A5 Favaro, Gloria	1
12		
13	C2 Kennon Steel	1
14		
15	B3 Frankel, Jeffrey	1
16		
17	G4 Kay, Marshall	1
18		
19	D3 George, Bernard	1
20		
21	B6 Sussman, Al + Lynet	1
22		
23	A10 Valenza, J	1
24		
25	A4 Verzhik, Z.	1
26		
27	A1 Winkley, Edwin	1
28		
29	A3 Saffagh, Elic	1
30		
31	B2 Lewittin, Lawrence	1
32		
33	A12 Canal Audrey	1
34		
35		
36		
37		

Code.

1988 MAY -14
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