



## Professional Campaign Fundraiser QUARTERLY REPORT

### NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

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

## FORM FRQ

ELEC Received

Apr 14 2025  
09:01 PM

Name of Professional Campaign Fundraiser

Bibi Taylor

☐ Check If NO Activity This Quarter

Registration#  
10791125169

Business Address

430 Mountain Ave., Suite 103

Filing Year  
2025

City

New Providence

Report Quarter

- ☒ Quarter 1  
☐ Quarter 2  
☐ Quarter 3  
☐ Quarter 4

Zip Code

07974

State

NJ

Day Telephone (with Area Code)\*

Evening Telephone (with Area Code)\*

Check if Amendment

☐ Amendment Specify Reason:

### Professional Campaign Fundraiser's Certification

I certify that the statements on this document are true and correct. I am aware that if any of the statements on this document are willfully false, I may be subject to punishment.

Bibi Taylor

Full Name of Professional Campaign Fundraiser

Registration Number \*\*\*\*\*

PIN \*\*\*\*\*

Verify Registration  
Number & PIN

BIBI TAYLOR

Signature

April 14, 2025

Date

\* Your name must appear on the signature line \*

\*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.

<b>Recipient of Professional Campaign Fundraiser's Services</b> <i>Please add a page for each candidate or committee</i>			
Name of Recipient Candidate or Committee Hudson County Democratic Organization			
Amount(s) Raised This Period (Gross) \$30,550.00	Amount(s) Raised This Period (Net) \$30,550.00	Compensation Received By Fundraiser For This Period \$7,500.00	
Specific Services Provided:  Fundraising Services - Data Management			
<b>Itemized Expenditures</b>			
PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT
_____			\$
_____			\$
_____			\$
_____			\$
_____			\$
_____			\$
_____			\$
_____			\$
_____			\$
_____			\$
"Total" reflects all expenditures made on behalf of the candidate or committee named above.			TOTAL \$ _____