THE SECTION OF THE SE
* 1773 *

PLEASE PRINT OR TYPE

Business Name

Name of Professional Cempaign Fundraiser

Business Address (Number & Street)

Day Telephone (with Area Code)\*

Business Address (City, State & Zip Code)

## Professional Campaign Fundraiser QUARTERLY REPORT

## NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

P.O. Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-868-313-ELEC (3532)

Website: http://www.elec.state.nj.us/

FORM FRQ
Registration #
F-12-19-1
Report Quarter
<b>☒</b> Apr. 15, <u>Q</u> Q \
U Jul. 15,
Oct. 15,
Jan. 15,
Check If No Activity This Querter
FOR STATE USE ONLY

**ELEC RECEIVED** 

APR 2 2 2014

Check if Amendment		1
	Amendment (please specify)_	 

(check if different than previously reported)

## Professional Campaign Fundraiser's Certification

Evening Telephone (with Area Code)\*

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.

Signature of Professional Campaign Fundreiser

Date

Print Full Name of Professional Campaign Fundraiser

Recipient of Professional Campaign Fundraiser's Services  Please use a separate page for each candidate or committee						
Name of Recipient Candidate or Committee						
\$ 28.0	d This Period (Gross) Amount(s) Raised This Period (	(Net) Compensation Received By Fun	draiser For This Period			
Specific Services	Provided					
		1 2				
	tunderising: Ever	it Menegeme				
	Itemized Expen	ditures				
PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT			
2/6	Pager mast	Invitations	\$ 60,60			
2/10	0262	Postage	303.40			
7/16	Diversified Printing		192.60			
3/10	DiversifiedPrinting	Invitations	80.32			
	<u> </u>					
"Total" reflects a	all expenditures made on behalf of the candidate or comm	πittee named above. Total\$_(	628.82			

Recipient of Professional Campaign Fundraiser's Services  Please use a separate page for each candidate or committee						
Please use a separate page for each candidate or committee  Name of Recipient Candidate or Committee  Amount(s) Raised This Period (Gross)  Amount(s) Raised This Period (Net)  Specific Services Provided  Amount(s) Raised This Period (Net)  Specific Services Provided						
	Itemized Exper	nditures				
PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT			
1/23 2/1 2/3 3/2 3/10	123 PRINT USPS USPS Basically Bullows Foster Reed USPS	Fruitation Postage Postage Event cost Office Supplies Postage	51.616 8 100.226 13.48 153.48 00.02 00.96			
"Total" reflects a	all expenditures made on behalf of the candidate or comm	mittee named above. Total	712.65			