	FORM FRQ
Professional Campaign Fundraiser QUARTERLY REPORT	Registration #
Financian *	Report Quarter
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION P.O. Box 185, Trenton, NJ 08625-0185	Apr. 15,
(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)	Jul. 15,
Website: http://www.elec.state.nj.us/	Oct. 15,
PLEASE PRINT OR TYPE	Jan. 15,
Name of Professional Campaign Fundraiser Theodore Ka Siggela Ris	Check If No Activity This Quarter
Business Name Broad Street Strategy LLC	FOR STATE USE ONLY
Business Address (Number & Street) (check if different than previously reported)	
963 Broad Street	_ ELEC RECENTED
Business Address (City, State & Zip Code) #ightstown NJ 08691	APR 13 2017
Day Telephone (with Area Gode)* 609 - 306 - 7759 Evening Telephone (with Area Code)* 609 - 306 - 7759	
Check if Amendment Amendment (please specify)	

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.

Signature of Professional Campaign Fundraiser

4/12/2017 Date

Print Full Name of Professional Campaign Fundraiser

mount(s) Raised T	Andidate or Committee CHOP ASSOC ARNIEV This Period (Gross) Amount(s) Raised This Period \$ 7, 500.00 Divided	(Net) Compensation Received By	Fundraiser For This Peri
	Itemized Expe	nditures	
PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT
			\$

Recipient of Professional Campaign Fundraiser's Services Please use a separate page for each candidate or committee					
Name of Recipient Candidate or Committee Woodland Park Dunocodic Committee					
\$ 28,50	Amount(s) Raised This Period (Net) Compensation Received By F	undraiser For This Period		
Specific Services	Provided				
	Itemized Expen	ditures			
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					

4 D' '	ate page for each co				
	indidate or Committ abeth	Maher Mu	ois For	1 550 m h	
		Amount(s) Raised This Perio	od (Net) Compensati	ion Received By Fu	indraiser For This Pe
390	is Period (Gross)	\$ 12,390.0		00.00	indialoci i oi i ilio i o
cific Services Prov		1 12/3/000	, v , v	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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		Itemized Exp	penditures		
PAYMENT			DIIDD	OSE OF	
DATE	PAYEE NA	ME AND ADDRESS		DITURE	AMOUNT
					\$

Recipient of Professional Campaign Fundraiser's Services Please use a separate page for each candidate or committee			
	t Candidate or Committee Friends of Dan Bens		
<u>\$ 43,3</u>	Amount(s) Raised This Period (\$\sigma 5,555,\$\sigma 0\)		undraiser For This Period
Specific Services I	Provided		
-	Itemized Expen	ditures	-
PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT
			\$
"Total" reflects a	all expenditures made on behalf of the candidate or com	mittee named above. Total	<u> </u>

ount(s) Raised T	his Period (Gross) Amount(s) Raised This Period	d (Net) Compensation Received By	Fundraiser For This Per
<u>2,650.</u>	\$	\$ \$	
cific Services Pro	vided		
			<u> </u>
	Itemized Exp	enditures	
PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT
			\$
			,
	•		
•	•		

Recipient of Professional Campaign Fundraiser's Services Please use a separate page for each candidate or committee				
Name of Recipient Candidate or Committee Working Families Alliance NJ				
Amount(s) Raise	Amount(s) Raised This Period (Gross) Amount(s) Raised This Period (Net) Compensation Received By Fundraiser For This Period			
Specific Services				
	Itemized Expen	ditures		
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				