	FORM FRQ
Professional Campaign Fundraiser	Registration #
QUARTERLY REPORT	FR7-1
Entracyment &	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/	C Oct. 15,2014
PLEASE PRINT OR TYPE	Jan. 15,
Name of Professional Campaign Fundraiser	Check If No Activity This
Erin Ehrich	Quarter
Business Name EME Consulting	FOR STATE USE ONLY
EME Consulting Business Address (Number & Street) (Check if different then previously reported)	_
Business Address (Number & Street) (check if different than previously reported) PO Box 3051	ELEC RECEIVED
Business Address (City, State & Zip Code)	
Mercerville. NJ 08619	JAN 1 5 2015
Day Telephone (with Area Code)* Evening Telephone (with Area Code)* (609) 468-8282 (609) 468-8282	
(609) 468-8282 (609) 468-8282	
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 document are willfully false, I may be subject to punishment.	the statements on this
Signature of Professional Campaign Fundraiser 12/31/2014 Date	
Erin M. Ehrich	

Print Full Name of Professional Campaign Fundraiser

	fessional Campaign Fu eparate page for each ca						
Name of Recipier Kean fo	nt Candidate or Committe or Senate	ee			_		
Amount(s) Raised This Period (Gross) \$ 99.350.00		Amount(s) Raised This Period (Net) \$ 80.453.99		Compensation Received By Fundraiser For This Period \$ 3,000.00			
Specific Services							
_	and attending fund	raiser receptions					
Phone so							
Direct IVI	ail solicitation						
Itemized Expenditures							
PAYMENT DATE	PAYEE NA	ME AND ADDRESS		PURPOSE OF EXPENDITURE	AMOUNT		
					\$		
·							
			<u> </u>				
"Total" reflects	all expenditures made o	n behalf of the candidate or com	nittee n	amed above. Total \$	- 0 -		

Recipient of Professional Campaign Fundraiser's Services Please use a separate page for each candidate or committee									
Name of Recipient Senate I	t Candidate or Committe Renublican Maiorit	ee v (SRM)							
Amount(s) Raised	This Period (Gross)	Amount(s) Raised This Period (Net) Compensa	tion Received By Fun	draiser For This Period				
\$ 40750.00				\$ 9.000.00					
Specific Services (Provided								
Planning a	and attending golf t	fundraiser & reception/din	ner						
_	Meeting Planning/setup								
	Phone solicitation								
	,								
				_					
		Itemized Expen	ditures						
PAYMENT DATE	PAYEE NA	ME AND ADDRESS		OSE OF NDITURE	AMOUNT				
					\$				
*Total" reflects a	all expenditures made or	hehalf of the candidate or come	nittee named shows	Total \$	- 0 -				