TP	FORM FRQ
Professional Campaign Fundraiser	Registration #
* Land * QUARTERLY REPORT	Report Quarter
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION	Apr. 15,
P.O. Box 185, Trenton, NJ 08625-0185	The second of th
(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) www.elec.nj.gov	Jul. 15,
	Oct. 15, 2017
PLEASE PRINT OR TYPE	Jan. 15,
lame of Professional Campaign Fundraiser Albano	Check If No Activity This Quarter
usiness Name	FOR STATE USE ONLY
Susiness Address (Number & Street) (check if different than previously reported)	ELEC RECEIV
susiness Address (City, State & Zip Code) WLSHCILD NT 07090	
Evening Telephone (with Area Code)* 408 456 0694	MOA , .
Check if Amendment Amendment (please specify)	ontraction of
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

10 | 15 | 18

Michale Albano

Print Full Name of Professional Campaign Fundraiser

Signature of Professional Campaign Fundraiser

Recipient of Prot Please use a se	fessional Campaign Fundraiser's Services eparate page for each candidate or committee			
Name of Recipien	t Candidate or Committe Brannick for	Assembly		
Amount(s) Raiser \$ 20 0 Specific Services	d This Period (Gross) Amount(s) Raised This Period (I		draiser For This Period	
Lurara	2 Mg			
Inuta	tions .			
Phon	(all)			
West management				
Wit munthana				
Itemized Expenditures				
PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT	
			\$	
	t .			
"Total" reflects	all expenditures made on behalf of the candidate or comr	nittee named above. Total \$	-0-	