| Professional Campaign Fundraiser<br>QUARTERLY REPORT         NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION         P.O. Box 185, Trenton, NJ 08625-0185         (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)         Website: www.elec.nj.gov | ELEC Received                     |
|---|-----------------------------------|
| NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION<br>P.O. Box 185, Trenton, NJ 08625-0185<br>(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)<br>Website: www.elec.nj.gov   | - 10,0000                         |
|   | Jan 12 2022<br>03:26 PM           |
| Name of Professional Campaign Fundraiser  | Check If NO Activity This Quarter |
| Donna Robinson Taylor / RP Consulting, LLC  | Registration#<br>FR 13-2          |
|   | Filing Year<br>2021               |
| City  | Report Quarter                    |
| Cherry Hill   | O Quarter 1                       |
| Zip Code State Day Telephone (with Area Code)* Evening Telephone (with Area Code)*  | O Quarter 2                       |
| 08034 NJ (856) 382-1341 (856) 382-1341  | Quarter 3                         |
| Check if Amendment Amendment Specify Reason:  | • Quarter 4                       |
| Professional Campaign Fundraiser's Certification<br>I certify that the statements on this document are true and correct. I am aware that if any c<br>document are willfully false, I may be subject to punishment.  | f the statements on this          |
| ,,  |                                   |
| Donna M. Robinson Taylor<br>Full Name of Professional Campaign Fundraiser   |                                   |
| Donna M. Robinson Taylor  |                                   |
| Donna M. Robinson Taylor         Full Name of Professional Campaign Fundraiser         Registration Number       **********         PIN       **********  |                                   |
| Donna M. Robinson Taylor<br>Full Name of Professional Campaign Fundraiser   |                                   |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |   |             |   |        |  |
|---|--------------------|---|-------------|---|--------|--|
| Name of Recipient Cano<br>Camden County Demo  |                    |   |             |   |        |  |
| Amount(s) Raised This F<br>\$70,210.00  | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$64,210.00 | -           | Compensation Received By Fundraiser For This Period |        |  |
| Specific Services Provid  | led:               |   |             |   |        |  |
| Event Planning, Contrib   | oution Solicitatic | on, Data Management, Compliance Rev               | iew, and Bo | ookkeeping Assistance.                              |        |  |
|   |                    | Itemized Expenditur                               | es          | -   |        |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                            |             | PURPOSE OF<br>EXPENDITURE                           | AMOUNT |  |
|   | None direct        | y from RP Consulting, LLC                         |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |   |             |   |        |  |
|   |                    |   |             |   |        |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |  |             |  |        |  |
|---|--------------------|--|-------------|--|--------|--|
| Name of Recipient Can<br>EFO Nash for Commissi  |                    | ittee  |             |  |        |  |
| Amount(s) Raised This I<br>\$10,450.00  | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$4,450.00 |             | Compensation Received By Fundraiser For This Period \$6,000.00 |        |  |
| Specific Services Provid  | led:               |  | - I         |  |        |  |
| Event Planning, Contrik   | oution Solicitatic | on, Data Management, Compliance Rev              | iew, and Bo | ookkeeping Assistance.   |        |  |
|   |                    | Itemized Expenditur                              | es          |  |        |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                           |             | PURPOSE OF<br>EXPENDITURE                                      | AMOUNT |  |
|   | None from F        | RP Consulting, LLC                               |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
|   |                    |  |             |  | \$     |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |  |             |  |        |  |
|   |                    |  |             |  |        |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |  |  |                           |        |
|---|--------------------|--|--|---------------------------|--------|
| Name of Recipient Can<br>EFO Kane for Commissi  |                    | ittee  |  |                           |        |
| Amount(s) Raised This I<br>\$9,700.00   | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$3,700.00 | Compensation Received By Fundraiser For This Period \$6,000.00 |                           |        |
| Specific Services Provid  | led:               |  |  |                           |        |
| Event Planning, Contrik   | oution Solicitatio | on, Data Management, Compliance Rev              | iew, and Bo  | ookkeeping Assistance.    |        |
|   |                    | Itemized Expenditur                              | es   |                           |        |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                           |  | PURPOSE OF<br>EXPENDITURE | AMOUNT |
|   | None from I        | RP Consulting, LLC                               |  |                           | \$     |
|   |                    |  |  |                           | \$     |
|   |                    |  |  |                           | \$     |
|   |                    |  |  |                           | \$     |
|   |                    |  |  |                           | \$     |
|   |                    |  |  |                           | \$     |
|   |                    |  |  |                           | \$     |
|   |                    |  |  |                           | \$     |
|   |                    |  |  |                           | \$     |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |  |  |                           |        |
|   |                    |  |  |                           |        |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |  |             |   |        |  |
|---|--------------------|--|-------------|---|--------|--|
| Name of Recipient Cano<br>EFO Dyer for Commissio  |                    | ittee  |             |   |        |  |
| Amount(s) Raised This F<br>\$7,450.00   | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$1,450.00 |             | Compensation Received By Fundraiser For This Period |        |  |
| Specific Services Provid  | ed:                |  | ·           |   |        |  |
| Event Planning, Contrib   | oution Solicitatio | on, Data Management, Compliance Rev              | iew, and Bc | ookkeeping Assistance.                              |        |  |
|   |                    | Itemized Expenditur                              | es          |   |        |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                           |             | PURPOSE OF<br>EXPENDITURE                           | AMOUNT |  |
|   | None from F        | RP Consulting, LLC                               |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
|   |                    |  |             |   | \$     |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |  |             |   |        |  |
|   |                    |  |             |   |        |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                             |   |   |                           |        |  |  |  |
|---|-----------------------------|---|---|---------------------------|--------|--|--|--|
| Name of Recipient Cano<br>EFO Wilson for Sheriff  | didate or Comm              | ittee   |   |                           |        |  |  |  |
| Amount(s) Raised This F<br>\$5,700.00   | Period (Gross)              | Amount(s) Raised This Period (Net)<br>\$-300.00 | Compensation Received By Fundraiser For This Perior<br>\$6,000.00 |                           |        |  |  |  |
| Specific Services Provid  | Specific Services Provided: |   |   |                           |        |  |  |  |
| Event Planning, Contrib   | oution Solicitatio          | on, Data Management, Compliance Rev             | iew, and Bo   | ookkeeping Assistance.    |        |  |  |  |
|   |                             | Itemized Expenditur                             | es  |                           |        |  |  |  |
| PAYMENT DATE  |                             | PAYEE NAME AND ADDRESS                          |   | PURPOSE OF<br>EXPENDITURE | AMOUNT |  |  |  |
|   | None from F                 | RP Consulting, LLC                              |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
|   |                             |   |   |                           | \$     |  |  |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                             |   |   |                           |        |  |  |  |
|   |                             |   |   |                           |        |  |  |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |   |             |  |        |  |
|---|--------------------|---|-------------|--|--------|--|
| Name of Recipient Cano<br>Camden City Democrat  |                    | ittee   |             |  |        |  |
| Amount(s) Raised This F<br>\$.00  | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$-3,150.00 |             | Compensation Received By Fundraiser For This Period \$3,150.00 |        |  |
| Specific Services Provid  | ed:                |   |             |  |        |  |
| Event Planning, Contrib   | oution Solicitatic | on, Data Management, Compliance Rev               | iew, and Bc | ookkeeping Assistance.   |        |  |
|   | 1                  | Itemized Expenditur                               | es          |  |        |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                            |             | PURPOSE OF<br>EXPENDITURE                                      | AMOUNT |  |
|   | None from F        | RP Consulting LLC                                 |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
|   |                    |   |             |  | \$     |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |   |             |  |        |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |   |             |   |        |  |
|---|--------------------|---|-------------|---|--------|--|
| Name of Recipient Can<br>EFO Vic Carstarphen for  |                    | ittee   |             |   |        |  |
| Amount(s) Raised This I<br>\$500.00   | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$-1,150.00 |             | Compensation Received By Fundraiser For This Period |        |  |
| Specific Services Provid  | led:               |   | L           |   |        |  |
| Event Planning, Contrik   | oution Solicitatic | on, Data Management, Compliance Rev               | iew, and Bc | ookkeeping Assistance.                              |        |  |
|   |                    | Itemized Expenditur                               | es          |   |        |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                            |             | PURPOSE OF<br>EXPENDITURE                           | AMOUNT |  |
|   | None from F        | RP Consulting LLC                                 |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | s      |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |   |             |   |        |  |
|   |                    |   |             |   |        |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                             |   |             |   |        |  |  |  |
|---|-----------------------------|---|-------------|---|--------|--|--|--|
| Name of Recipient Cano<br>Fuentes for Council   | didate or Comm              | ittee   |             |   |        |  |  |  |
| Amount(s) Raised This F<br>\$.00  | Period (Gross)              | Amount(s) Raised This Period (Net)<br>\$-1,150.00 |             | Compensation Received By Fundraiser For This Period |        |  |  |  |
| Specific Services Provid  | Specific Services Provided: |   |             |   |        |  |  |  |
| Event Planning, Contrib   | oution Solicitatio          | on, Data Management, Compliance Rev               | iew, and Bo | ookkeeping Assistance.                              |        |  |  |  |
|   | 1                           | Itemized Expenditur                               | es          |   | 1      |  |  |  |
| PAYMENT DATE  | 1                           | PAYEE NAME AND ADDRESS                            |             | PURPOSE OF<br>EXPENDITURE                           | AMOUNT |  |  |  |
|   | None from F                 | RP Consulting LLC                                 |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
|   |                             |   |             |   | \$     |  |  |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                             |   |             |   |        |  |  |  |
|   |                             |   |             |   |        |  |  |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |   |             |   |        |  |
|---|--------------------|---|-------------|---|--------|--|
| Name of Recipient Cano<br>Davis for Council   | didate or Comm     | ittee   |             |   |        |  |
| Amount(s) Raised This F<br>\$.00  | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$-650.00 |             | Compensation Received By Fundraiser For This Period |        |  |
| Specific Services Provid  | ed:                |   |             |   |        |  |
| Event Planning, Contrib   | oution Solicitatio | on, Data Management, Compliance Rev             | iew, and Bc | ookkeeping Assistance.                              |        |  |
|   |                    | Itemized Expenditur                             | es          |   |        |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                          |             | PURPOSE OF<br>EXPENDITURE                           | AMOUNT |  |
|   | None from F        | RP Consulting LLC                               |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
|   |                    |   |             |   | \$     |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |   |             |   |        |  |
|   |                    |   |             |   |        |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |   |   |                           |        |
|---|--------------------|---|---|---------------------------|--------|
| Name of Recipient Cano<br>Soria-Perez for Council   | didate or Comm     | ittee   |   |                           |        |
| Amount(s) Raised This F<br>\$.00  | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$-900.00 | Compensation Received By Fundraiser For This Perioc |                           |        |
| Specific Services Provid  | ed:                |   | ľ   |                           |        |
| Event Planning, Contrib   | oution Solicitatio | on, Data Management, Compliance Rev             | iew, and Bc   | ookkeeping Assistance.    |        |
|   |                    | Itemized Expenditur                             | es  |                           |        |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                          |   | PURPOSE OF<br>EXPENDITURE | AMOUNT |
|   | None from F        | RP Consulting, LLC                              |   |                           | \$     |
|   |                    |   |   |                           | \$     |
|   |                    |   |   |                           | \$     |
|   |                    |   |   |                           | \$     |
|   |                    |   |   |                           | \$     |
|   |                    |   |   |                           | \$     |
|   |                    |   |   |                           | \$     |
|   |                    |   |   |                           | \$     |
|   |                    |   |   |                           | \$     |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |   |   |                           |        |
|   |                    |   |   |                           |        |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                |                                    |        |                              |                     |
|---|----------------|------------------------------------|--------|------------------------------|---------------------|
| Name of Recipient Cano<br>INTENTIONALLY BLANK   |                | ittee                              |        |                              |                     |
| Amount(s) Raised This F   | Period (Gross) | Amount(s) Raised This Period (Net) | Comper | nsation Received By Fundrais | ser For This Period |
| Specific Services Provid  | ed:            | 1                                  |        |                              |                     |
|   |                |                                    |        |                              |                     |
|   | 1              | Itemized Expenditur                | es     | Ι                            |                     |
| PAYMENT DATE  | 1              | PAYEE NAME AND ADDRESS             |        | PURPOSE OF<br>EXPENDITURE    | AMOUNT              |
|   | Blank Form     |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
|   |                |                                    |        |                              | \$                  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                |                                    |        |                              |                     |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee                                 |                    |                                     |             |                           |                    |  |
|---|--------------------|-------------------------------------|-------------|---------------------------|--------------------|--|
| Name of Recipient Candidate or Committee<br>Moriarty for Assembly   |                    |                                     |             |                           |                    |  |
| Amount(s) Raised This Period (Gross)Amount(s) Raised This Period (Net)Compensation Received By Fundraiser For\$41,350.00\$34,350.00\$7,000.00 |                    |                                     |             |                           | er For This Period |  |
| Specific Services Provided:   |                    |                                     |             |                           |                    |  |
| Event Planning, Contrib   | oution Solicitatio | on, Data Management, Compliance Rev | iew, and Bo | ookkeeping Assistance.    |                    |  |
|   | 1                  | Itemized Expenditur                 | es          |                           | 1                  |  |
| PAYMENT DATE  | 1                  | PAYEE NAME AND ADDRESS              |             | PURPOSE OF<br>EXPENDITURE | AMOUNT             |  |
|   | None from F        | RP Consulting, LLC                  |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$  |                    |                                     |             |                           |                    |  |
|   |                    |                                     |             |                           |                    |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |   |                     |                              |                    |  |  |
|---|--------------------|---|---------------------|------------------------------|--------------------|--|--|
| Name of Recipient Candidate or Committee<br>EFO Gabriela Mosquera for Assembly                                |                    |   |                     |                              |                    |  |  |
| Amount(s) Raised This F<br>\$30,400.00  | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$24,400.00 | Comper<br>\$6,000.0 | nsation Received By Fundrais | er For This Period |  |  |
| Specific Services Provided:   |                    |   |                     |                              |                    |  |  |
| Event Planning, Contrib   | oution Solicitatic | on, Data Management, Compliance Rev               | iew, and Bo         | ookkeeping Assistance.       |                    |  |  |
|   | 1                  | Itemized Expenditur                               | es                  |                              |                    |  |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                            |                     | PURPOSE OF<br>EXPENDITURE    | AMOUNT             |  |  |
|   | None from F        | RP Consulting, LLC                                |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
|   |                    |   |                     |                              | \$                 |  |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |   |                     |                              |                    |  |  |
|   |                    |   |                     |                              |                    |  |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee   |                    |                                     |             |                           |                    |  |
|---|--------------------|-------------------------------------|-------------|---------------------------|--------------------|--|
| Name of Recipient Candidate or Committee<br>EFO Senator Nilsa Cruz-Perez  |                    |                                     |             |                           |                    |  |
| Amount(s) Raised This Period (Gross)Amount(s) Raised This Period (Net)Compensation Received By Fundraiser For This Period\$41,900.00\$35,900.00\$6,000.00 |                    |                                     |             |                           | er For This Period |  |
| Specific Services Provided:   |                    |                                     |             |                           |                    |  |
| Event Planning, Contrib   | oution Solicitatic | on, Data Management, Compliance Rev | iew, and Bo | ookkeeping Assistance.    |                    |  |
|   |                    | Itemized Expenditur                 | es          | -                         |                    |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS              |             | PURPOSE OF<br>EXPENDITURE | AMOUNT             |  |
|   | None from F        | RP Consulting, LLC                  |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
|   |                    |                                     |             |                           | \$                 |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$  |                    |                                     |             |                           |                    |  |
|   |                    |                                     |             |                           |                    |  |

| Name of Recipient Candidate or Committee  |                                   |  |  |  |  |  |  |
|---|-----------------------------------|--|--|--|--|--|--|
| Name of Recipient Candidate or Committee<br>EFO William Spearman for Assembly   |                                   |  |  |  |  |  |  |
| Amount(s) Raised This Period (Gross)Amount(s) Raised This Period (Net)Compensation Received By Fundraiser\$29,750.00\$25,250.00\$4,500.00 |                                   |  |  |  |  |  |  |
| Specific Services Provided:   |                                   |  |  |  |  |  |  |
| Event Planning, Contribution Solicitation, Data Management, Compliance Rev  | view, and Bookkeeping Assistance. |  |  |  |  |  |  |
| Itemized Expenditu  | ires                              |  |  |  |  |  |  |
| PAYMENT DATE PAYEE NAME AND ADDRESS   | PURPOSE OF<br>EXPENDITURE AMOUNT  |  |  |  |  |  |  |
| None from RP Consulting, LLC  | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
|   | \$                                |  |  |  |  |  |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$                                      |                                   |  |  |  |  |  |  |

| Name of Recipient Candidate or Committee         Bill Moen for Assembly         Amount(s) Raised This Period (Gross)       Amount(s) Raised This Period (Net)         \$16,550.00       \$12,050.00         \$pecific Services Provided: | Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                       |              |                                     |   |  |  |
|--|---|-----------------------|--------------|-------------------------------------|---|--|--|
| \$16,550.00         \$12,050.00         \$4,500.00           Specific Services Provided:         \$4,500.00         \$4,500.00   |   |                       |              |                                     |   |  |  |
|  | is Period   |                       |              |                                     |   |  |  |
|  |   |                       |              |                                     |   |  |  |
| Event Planning, Contribution Solicitation, Data Management, Compliance Review, and Bookkeeping Assistance.   |   | okkeeping Assistance. | view, and Bo | on, Data Management, Compliance Rev | Event Planning, Contribution Solicitati |  |  |
| Itemized Expenditures  |   |                       | res          | Itemized Expenditur                 |   |  |  |
| PAYMENT DATEPAYEE NAME AND ADDRESSPURPOSE OF<br>EXPENDITUREAMOU  | OUNT  |                       |              | PAYEE NAME AND ADDRESS              | PAYMENT DATE                            |  |  |
| None from RP Consulting, LLC \$  |   |                       |              | RP Consulting, LLC                  | None from                               |  |  |
| \$   |   | 5                     |              |                                     |   |  |  |
| <u> </u>   |   |                       |              |                                     |   |  |  |
| \$   |   |                       |              |                                     |   |  |  |
| \$   |   |                       |              |                                     |   |  |  |
| \$   |   |                       |              |                                     |   |  |  |
| \$   |   |                       |              |                                     |   |  |  |
| \$   |   |                       |              |                                     |   |  |  |
| <u> </u>   |   | 5                     |              |                                     |   |  |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$   |   |                       |              |                                     |   |  |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |   |                                     |                     |                              |                    |  |  |
|---|---|-------------------------------------|---------------------|------------------------------|--------------------|--|--|
| Name of Recipient Candidate or Committee<br>EFO Jim Beach for Senate  |   |                                     |                     |                              |                    |  |  |
| Amount(s) Raised This Period (Gross)Amount(s) Raised This Period (Net)\$5,600.00\$-400.00                     |   |                                     | Compei<br>\$6,000.0 | nsation Received By Fundrais | er For This Period |  |  |
| Specific Services Provided:   |   |                                     |                     |                              |                    |  |  |
|   |   |                                     |                     |                              |                    |  |  |
| Event Planning, Contrik   | oution Solicitatio  | on, Data Management, Compliance Rev |                     | ookkeeping Assistance.       |                    |  |  |
| PAYMENT DATE  | Itemized Expenditures         PURPOSE OF         PAYMENT DATE       PAYEE NAME AND ADDRESS       EXPENDITURE       AMOUNT |                                     |                     |                              |                    |  |  |
|   | None from F   | RP Consulting, LLC                  |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
|   |   |                                     |                     |                              | \$                 |  |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |   |                                     |                     |                              |                    |  |  |
|   |   |                                     |                     |                              |                    |  |  |

| Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |                    |   |    |   |        |  |
|---|--------------------|---|----|---|--------|--|
| Name of Recipient Candidate or Committee<br>EFO Troy E. Singleton for Senate                                  |                    |   |    |   |        |  |
| Amount(s) Raised This I<br>\$65,950.00  | Period (Gross)     | Amount(s) Raised This Period (Net)<br>\$62,200.00 |    | Compensation Received By Fundraiser For This Period<br>\$3,750.00 |        |  |
| Specific Services Provided:   |                    |   |    |   |        |  |
| Event Planning, Contrib   | oution Solicitatio | on, and Data Management.                          |    |   |        |  |
|   |                    | Itemized Expenditur                               | es | -   |        |  |
| PAYMENT DATE  |                    | PAYEE NAME AND ADDRESS                            |    | PURPOSE OF<br>EXPENDITURE   | AMOUNT |  |
|   | None from F        | RP Consulting, LLC                                |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
|   |                    |   |    |   | \$     |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named above. TOTAL \$          |                    |   |    |   |        |  |
|   |                    |   |    |   |        |  |

| Recipient of Professio<br>Please add a page fo  |                            |  |            |                           |             |       |
|---|----------------------------|--|------------|---------------------------|-------------|-------|
| Name of Recipient Can<br>General Majority PAC   | didate or Comm             | ittee  |            |                           |             |       |
| Amount(s) Raised This Period (Gross)Amount(s) Raised This Period (Net)Compensation Received By Fundraiser For This Peri5.00\$.00\$.00 |                            |  |            |                           | This Period |       |
| Specific Services Provic  | ded:                       |  |            |                           |             |       |
| Event Planning, Contril   | bution Solicitatio         | on, Data Management, Compliance Rev<br>Itemized Expenditur |            | okkeeping Assistance.     |             |       |
| PAYMENT DATE  |                            | PAYEE NAME AND ADDRESS                                     |            | PURPOSE OF<br>EXPENDITURE | A           | MOUNT |
| 11/1/2021   | RP Consultin<br>PO Box 354 | ng, LLC<br>0, Cherry Hill, NJ 08034                        |            | Telephone Expense         | \$          | 30.00 |
|   |                            |  |            |                           | \$          |       |
|   |                            |  |            |                           | \$          |       |
|   |                            |  |            |                           | \$          |       |
|   |                            |  |            |                           | \$          |       |
|   |                            |  |            |                           | \$          |       |
|   |                            |  |            |                           | \$          |       |
| "Total" reflects all expe   | enditures made o           | n behalf of the candidate or committee na                  | amed above | . TOTAL \$                |             | 30.00 |
|   |                            |  |            |                           |             |       |
|   |                            |  |            |                           |             |       |
|   |                            |  |            |                           |             |       |

|  |  | Recipient of Professional Campaign Fundraiser's Services<br>Please add a page for each candidate or committee |  |  |  |  |  |  |
|--|--|---|--|--|--|--|--|--|
| Name of Recipient Candidate or Committee<br>American Democratic Majority               |  |   |  |  |  |  |  |  |
|  | ompensation Received By Fundrais<br>1,000.00 | sation Received By Fundraiser For This Period<br>00   |  |  |  |  |  |  |
| Specific Services Provided:  |  |   |  |  |  |  |  |  |
| Event Planning, Contribution Solicitation, Data Management, Compliance Review, a       | nd Bookkeeping Assistance.                   |   |  |  |  |  |  |  |
| Itemized Expenditures  |  |   |  |  |  |  |  |  |
| PAYMENT DATE PAYEE NAME AND ADDRESS  | PURPOSE OF<br>EXPENDITURE                    | AMOUNT  |  |  |  |  |  |  |
| 11/5/2021 RP Consulting, LLC<br>PO Box 3540, Cherry Hill, NJ 08034                     | Delivery Expense                             | \$ 18.30  |  |  |  |  |  |  |
| 11/5/2021 RP Consulting, LLC<br>PO Box 3540, Cherry Hill, NJ 08034                     | Online Services<br>Expense                   | \$ 47.00  |  |  |  |  |  |  |
| 11/5/2021 RP Consulting, LLC<br>PO Box 3540, Cherry Hill, NJ 08034                     | Travel Expense                               | \$ 305.64   |  |  |  |  |  |  |
|  |  | \$  |  |  |  |  |  |  |
|  |  | \$  |  |  |  |  |  |  |
|  |  | \$  |  |  |  |  |  |  |
|  |  | \$  |  |  |  |  |  |  |
|  |  | \$  |  |  |  |  |  |  |
|  |  | \$  |  |  |  |  |  |  |
| "Total" reflects all expenditures made on behalf of the candidate or committee named a | above. TOTAL\$                               | 370.94  |  |  |  |  |  |  |