

Professional Campaign Fundraiser QUARTERLY REPORT

ELEC Received

FORM FRQ

Oct 17 2024 03:15 PM

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

P.O. Box 185, Trenton, NJ 08625-0185 Phone: (609) 292-8700 Website: www.elec.nj.gov

Name of Professi	ional Car	Check If NO Activity This Quarter									
Nicholas H. Fi	xmer	Registration# 31-1									
Business Address 4 Hearthstone La		Filing Year 2024									
City Green Brook		'	Quarter Quarter 1								
Zip Code State Day Telephone (with Area Cod 08812 NJ (908) 347-5969			le)*	Evening Telephone (with Area Code)* (908) 347-5969	○ Quarter 2 ② Quarter 3						
Check if Amendn	nent	○ Quarter 4									
Amendmen	t Specif										
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.											
Nichola	s H. Fixı	mer									
Full Name	e of Profe	essional Campaign Fundraiser									
Registratio	n Numb	er <u>******</u> [PIN	*******		Verify Registration Number & PIN					
NICHOLAS H FIXMER				October 17, 2024							
Signature				Date							
* Your nam	ne must a	appear on the signature line *									

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

Recipient of Professional Campaign Fundraiser's Services Please add a page for each candidate or committee											
Name of Recipient Canc Union County Democra		ittee									
Amount(s) Raised This F	eriod (Gross)	Amount(s) Raised This Period (Net)		Compensation Received By Fundraiser For This Period							
\$167,853.00		\$151,603.00	\$16,250								
Specific Services Provid	ed:	1	'								
Helped solicit contribut Coordinated call time a	ions over phone nd fundraising a nd kept client up	activities for Chairman odated on ongoing fundraising efforts									
		Itemized Expenditur	es								
PAYMENT DATE	ı	PAYEE NAME AND ADDRESS		PURPOSE OF EXPENDITURE	AMOUNT						
_					\$						
					\$						
					\$						
					\$						
					\$						
					\$						
					\$						
					\$						
					\$						
"Total" reflects all expe	nditures made o	n behalf of the candidate or committee n	amed above	e. TOTAL\$							