

## Professional Campaign Fundraiser QUARTERLY REPORT

**FORM FRQ** 

**ELEC** Received

Jan 03 2025 01:00 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	onal Car	Check If NO Activity This Quarter			
Brendan W. Gi	II	Registration# _48-1			
<b>Business Address</b>	5	Filing Year			
35 Park Street		2024			
City Montclair		Report Quarter  Quarter 1			
Zip Code 07042	State NJ	Day Telephone (with Area Code) <sup>3</sup> 973-783-0400	* Evening Telephone (with Area Code)*	○ Quarter 2 ○ Quarter 3	
Check if Amendm		777 703 0100		Quarter 4	
		© Quarter 1			
Amendment	Specif	y Reason:			
			mpaign Fundraiser's Certification ue and correct. I am aware that if any ishment.	of the statements on this	
Brendar			-		
Full Name	of Profe	essional Campaign Fundraiser			
Registratio	n Numbe	er <u>********</u> PIN	*******	Verify Registration Number & PIN	
	BRE	ENDAN W GILL	January 3, 2025		
		Signature	Date		
* Your nam	ie 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 Candid	date or Comm	ittee							
Amount(s) Raised This Period (Gross)		Amount(s) Raised This Period (Net) Co		Compensation Received By Fundraiser For This Period					
Specific Services Provided	d:								
Itemized Expenditures									
PAYMENT DATE	ı	PAYEE NAME AND ADDRESS		PURPOSE OF EXPENDITURE	AMOUNT				
					\$				
					\$				
_					\$				
_					\$				
_					\$				
					\$				
					\$				
					\$				
					\$				
"Total" reflects all expend	itures made o	n behalf of the candidate or committee na	amed above	e. TOTAL\$					