



Professional Campaign Fundraiser  
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: <http://www.elec.state.nj.us/>

FORM FRQ

Registration #  
FR40-1

Report Quarter

- Apr. 15, \_\_\_\_\_
- Jul. 15, \_\_\_\_\_
- Oct. 15, 2017
- Jan. 15, \_\_\_\_\_

Check If No Activity This Quarter

PLEASE PRINT OR TYPE

Name of Professional Campaign Fundraiser

Carly Mangini

Business Name

Carly Mangini

Business Address (Number & Street)  (check if different than previously reported)

10 Indian Ter.

Business Address (City, State & Zip Code)

LOCUST NJ 07760

Day Telephone (with Area Code)\*

908-433-9638

Evening Telephone (with Area Code)\*

Check if Amendment

Amendment (please specify) \_\_\_\_\_

FOR STATE USE ONLY

40-1

ELEC RECEIVED

NOV 13 2017

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.

Signature of Professional Campaign Fundraiser

10/31/17  
Date

Carly Mangini

Print Full Name of Professional Campaign Fundraiser

**Recipient of Professional Campaign Fundraiser's Services**  
 Please use a separate page for each candidate or committee

Name of Recipient Candidate or Committee  
**Caliguive for Assembly**

Amount(s) Raised This Period (Gross) \$ <b>39,000</b>	Amount(s) Raised This Period (Net) \$ <b>29,800</b>	Compensation Received By Fundraiser For This Period \$ <b>7,400</b>
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Specific Services Provided  
**fundraising & event services - planning & organizing receptions**

**Itemized Expenditures**

PAYMENT DATE	PAYEE NAME AND ADDRESS	PURPOSE OF EXPENDITURE	AMOUNT
<del>08/01</del>	<del>XXXXXXXXXXXXXXXXXXXX</del> <del>XXXXXX</del>		\$ 0

"Total" reflects all expenditures made on behalf of the candidate or committee named above. Total \$ **0.00**