

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		20120140		<b>Report Filed By :</b>	<b>CANDIDATE</b>	<b>COMMITTEE</b> <input checked="" type="checkbox"/>	<b>LOBBYIST</b>
<b>Name of Filing Committee, Candidate or Lobbyist:</b> MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE							
<b>Street Address:</b> 18 S. 9TH ST.,SUITE 104							
<b>City:</b> STROUDSBURG				<b>State:</b> PA		<b>Zip Code:</b> 18360	
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2012	<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b> <input type="checkbox"/>
<b>Name of Office Sought by Candidate:</b>				<b>DATE OF ELECTION</b>		<b>District Number</b>	<b>Office Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO DAY YEAR		176	STH
				11 6 2012		DEM 45	
						(SEE INSTRUCTIONS FOR CODES)	
<b>Summary of Receipts and Expenditures from:</b>		MO	DAY	YEAR	<b>FOR OFFICE USE ONLY</b>		
		3	6	2012			
				TO	MO	DAY	YEAR
					4	9	2012
<b>A. Amount Brought Forward From Last Report</b>				\$ 1,397.36			
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>				\$ 1,605.07			
<b>C. Total Funds Available (Sum Of Lines A and B)</b>				\$ 3,002.43			
<b>D. Total Expenditures (From Schedule III)</b>				\$ 834.68			
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>				\$ 2,167.75			
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>				\$ 0.00			
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>				\$ 0.00			

## AFFIDAVIT SECTION

### PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

### Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From: <u>3/6/2012</u> To: <u>4/9/2012</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 455.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 100.00
<b>All Other Contributions (Part B)</b>	\$ 1,050.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,150.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.07

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 1,605.07
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**PART A**  
**CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**  
**\$50.01 TO \$250.00**

**Use this Part to itemize only contributions received from political committees  
with an aggregate value from \$50.01 to \$250.00 in the reporting period.**

<b>Name of Filing Committee or Candidate</b>  MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	<b>Reporting Period</b>  <b>From:</b> <u>3/6/2012</u> <b>To:</b> <u>4/9/2012</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> SUPPORTERS OF THERESA MERLI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> P. O. BOX 649			4	1	2012	
<b>City</b> SWIFTWATER	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  18370				

**Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.**

<b>PAGE TOTAL</b>
\$ 100.00

**PART B**  
**ALL OTHER CONTRIBUTIONS**

**\$50.01 TO \$250.00**

**Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 to \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part A)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	<b>From:</b> <u>3/6/2012</u> <b>To:</b> <u>4/9/2012</u>

<b>DATE</b>	<b>AMOUNT</b>
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Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
SUSAN LYONS							
Mailing Address				3	16	2012	
481 HYLAND DRIVE 588 PENN ESTATES							
City	State	Zip Code (Plus 4)					
EAST STROUDSBURG	PA	18301					

Full Name of Contributor MARK DODEL				MO	DAY	YEAR	\$ 250.00
Mailing Address 6 HICKORY VALLEY ROAD				3	15	2012	
City STROUDSBURG	State PA	Zip Code (Plus 4) 183609491					

Full Name of Contributor MERLYN J. CLARKE			MO	DAY	YEAR	\$ 100.00
Mailing Address R. R. 7 BOX 7444			3	24	2012	
City STROUDSBURG	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor ALFRED S. JOHNSON				MO	DAY	YEAR	\$ 200.00
Mailing Address 110 LLOYD LANE				3	24	2012	
City CRESCO	State PA	Zip Code (Plus 4) 18326					

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
BOB WEIDNER							
Mailing Address 250 BOYER LANE				4	1	2012	
City	EAST STROUDSBURG	State	Zip Code (Plus 4)				
		PA	18301				

Full Name of Contributor DARRYL E. COLON			MO	DAY	YEAR	\$ 100.00
Mailing Address 9636 STONEY HOLLOW DR.			3	29	2012	
City TOBYHANNA	State PA	Zip Code (Plus 4) 184663856				

Full Name of Contributor ANNE TIRACCHIA			MO	DAY	YEAR	\$ 100.00
Mailing Address 725 SCOTT STREET			3	25	2012	
City STROUDSBURG	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor JEREMY OWENS			MO	DAY	YEAR	\$ 100.00
Mailing Address 270 WICKES ROAD			4	9	2012	
City BUSHKILL	State PA	Zip Code (Plus 4) 18324				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL**

\$ 1,050.00

## PART C

# Contributions Received From Political Committees

## OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 0.00

**PART D**  
**ALL OTHER CONTRIBUTIONS**  
**OVER \$250.00**

Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period
	From: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 0.00

## PART E OTHER RECEIPTS

### REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

**Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.**

<b>Name of Filing Committee or Candidate</b>  MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	<b>Reporting Period</b>  <b>From:</b> <u>3/6/2012</u> <b>To:</b> <u>4/9/2012</u>
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				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	
CITIZENS BANK						
<b>Mailing Address</b> 814 MAIN STREET			2	29	2012	\$ 0.02
<b>City</b> STROUDSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360				
<b>Receipt Description</b> INTEREST ON CHECKING ACCOUNT						

<b>Full Name</b> CITIZENS BANK			MO	DAY	YEAR	
<b>Mailing Address</b> 814 MAIN STREET			3	30	2012	\$ 0.05
<b>City</b> STROUDSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360				
<b>Receipt Description</b> INTEREST ON CHECKING ACCOUNT						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 0.07



## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS  
DURING THE REPORTING PERIOD.**

**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE		From: <u>3/6/2012</u> To: <u>4/9/2012</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From <u>3/6/2012</u> To: <u>4/9/2012</u>

DATE				AMOUNT		
To Whom Paid EDUCATION POLICY AND LEADERSHIP CENTER			MO	DAY	YEAR	\$ 89.00
Mailing Address 800 N. 3RD ST. SUITE 408			3	13	2012	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure EDUCATION ISSUES WORKSHOP FOR CANDIDATES			
To Whom Paid LEEWARD MARKETING LLC			MO	DAY	YEAR	\$ 388.83
Mailing Address 217 HIGHLAND DRIVE			3	14	2012	
City STROUDSBURG	State PA	Zip Code (Plus 4) 183601592	Description of Expenditure PRINTING AND SHIPPING			
To Whom Paid POCONO IRISH AMERICAN CLUB			MO	DAY	YEAR	\$ 100.00
Mailing Address P O BOX 852			3	19	2012	
City EAST STROUDSBURG	State PA	Zip Code (Plus 4) 18301	Description of Expenditure FEE TO MARCH IN PARADE			
To Whom Paid STROUDSBURG MPO			MO	DAY	YEAR	\$ 18.00
Mailing Address ANN STREET			3	20	2012	
City STROUDSBURG	State PA	Zip Code (Plus 4) 183609998	Description of Expenditure STAMPS			
To Whom Paid LEEWARD MARKETING LLC			MO	DAY	YEAR	\$ 162.98
Mailing Address 217 HIGHLAND DRIVE			3	22	2012	
City STROUDSBURG	State PA	Zip Code (Plus 4) 183601592	Description of Expenditure PRINTING (STICKERS AND BANNERS)			

<b>To Whom Paid</b> MAUREEN MADDEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 7404 VENTNOR DRIVE			3	14	2012	
<b>City</b> TOBYHANNA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18466	<b>Description of Expenditure</b> SUPPLIES FROM STAPLES			

<b>To Whom Paid</b> MAUREEN MADDEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 7404 VENTNOR DRIVE			3	23	2012	
<b>City</b> TOBYHANNA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18466	<b>Description of Expenditure</b> BUTTONS FOR PARADE			

<b>To Whom Paid</b> TRANSFIRST			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 12202 AIRPORT WAY SUITE 100			3	12	2012	
<b>City</b> BROOMFIELD	<b>State</b> CO	<b>Zip Code (Plus 4)</b> 80021	<b>Description of Expenditure</b> OPERATING EXPENSE FOR CLICK AND PLEDGE			

<b>To Whom Paid</b> TRANSFIRST			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 12202 AIRPORT WAY SUITE 100			4	3	2012	
<b>City</b> BROOMFIELD	<b>State</b> CO	<b>Zip Code (Plus 4)</b> 80021	<b>Description of Expenditure</b> OPERATING EXPENSE FOR CLICK AND PLEDGE			

<b>To Whom Paid</b> TRANSFIRST			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 12202 AIRPORT WAY SUITE 100			4	6	2012	
<b>City</b> BROOMFIELD	<b>State</b> CO	<b>Zip Code (Plus 4)</b> 80021	<b>Description of Expenditure</b> OPERATING EXPENSE FOR CLICK AND PLEDGE			

<b>To Whom Paid</b> TRANSFIRST			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 12202 AIRPORT WAY SUITE 100			4	6	2012	
<b>City</b> BROOMFIELD	<b>State</b> CO	<b>Zip Code (Plus 4)</b> 80021	<b>Description of Expenditure</b> OPERATING EXPENSE FOR CLICK AND PLEDGE			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 834.68

