

Campaign Finance Report

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

Filer Identification Number :		20120140		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE												
Street Address: PO BOX 1186												
City: STROUDSBURG						State: PA			Zip Code: 18360			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	115	STH	DEM	45
						11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		5	6	2014		6	9	2014				
A. Amount Brought Forward From Last Report						\$		1,798.74				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		1,275.01				
C. Total Funds Available (Sum Of Lines A and B)						\$		3,073.75				
D. Total Expenditures (From Schedule III)						\$		1,233.93				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		1,839.82				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$		525.00				
G. Unpaid Debts And Obligations (From Schedule IV)						\$		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

Name of Filing Committee or Candidate	Reporting Period
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From: <u>5/6/2014</u> To: <u>6/9/2014</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 275.00
All Other Contributions (Part D)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,275.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.01

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.)	\$ 1,275.01
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From: <u>5/6/2014</u> To: <u>6/9/2014</u>

				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	275.00
Monroe County Democratic Committee								
Mailing Address								
3711 Glade Dr.				5	7	2014		
City	Long Pond	State	PA					

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

PAGE TOTAL
\$ 275.00

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 MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mark Dodel							
Mailing Address 6 Hickory Valley Rd				5	7	2014	\$ 1,000.00
City Stroudsburg	State PA	Zip Code (Plus 4) 18360					
Employer Name n/a				Occupation Retired			
Employer Mailing Address/Principal Place of Business n/a			City n/a	State		Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 1,000.00

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.

Name of Filing Committee or Candidate MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	
Citizen's Bank							
Mailing Address 814 Main Street				5	30	2014	\$ 0.01
City Stroudsburg	State PA	Zip Code (Plus 4) 18360					
Receipt Description interest							

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

PAGE TOTAL
\$ 0.01

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

Name of Filing Committee or Candidate		Reporting Period	
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE		From: <u>5/6/2014</u> To: <u>6/9/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	25.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	500.00
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.)		\$	525.00

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

Name of Filing Committee or Candidate	Reporting Period From: To:
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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.						PAGE TOTAL \$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From: <u>5/6/2014</u> To: <u>6/9/2014</u>

					DATE	AMOUNT		
Full Name of Contributor					MO	DAY	YEAR	\$ 500.00
Kathleen Lockwood					6	1	2014	
Mailing Address 551 Thomas St								
City	State		Zip Code(Plus 4)					
Stroudsburg	PA		18360					
Employer of Contributor n/a					Occupation Retired			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)		Description of Contribution	
n/a			n/a				Office Space	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL 500.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From <u>5/6/2014</u> To: <u>6/9/2014</u>

DATE				AMOUNT		
To Whom Paid BJ's Fuel			MO	DAY	YEAR	\$ 67.80
Mailing Address 9319			5	7	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure Gas			
To Whom Paid Staples			MO	DAY	YEAR	\$ 28.40
Mailing Address 7005 Rte 611 Applegate Dr			5	8	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure Office Supplies			
To Whom Paid Staples			MO	DAY	YEAR	\$ 27.55
Mailing Address 7005 Rte 611 Applegate Dr			5	8	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure Office Supplies			
To Whom Paid My Campaign Store			MO	DAY	YEAR	\$ 275.00
Mailing Address 304 Whittington Pkwy			5	8	2014	
City Louisville	State KY	Zip Code (Plus 4) 40222	Description of Expenditure Campaign Material			
To Whom Paid US Post Office			MO	DAY	YEAR	\$ 16.95
Mailing Address Ann Street			5	13	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure Postage			

To Whom Paid BJ's Fuel			MO	DAY	YEAR	\$ 75.60
Mailing Address 9319			5	15	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure Gas			

To Whom Paid Goombas Pizza			MO	DAY	YEAR	\$ 13.73
Mailing Address 720 Main Street			5	15	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure Food for Campaign Workers			

To Whom Paid Panera Bread			MO	DAY	YEAR	\$ 50.44
Mailing Address 362 Charles Way			5	16	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure GOTV Campaign Workers-Meals			

To Whom Paid Weis Supermarkets			MO	DAY	YEAR	\$ 14.83
Mailing Address 1070 N. 9th St			5	19	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure GOTV Campaign Workers-Meals			

To Whom Paid Dunkin Donuts			MO	DAY	YEAR	\$ 22.32
Mailing Address 529 Pocono Blvd			5	19	2014	
City Mt. Pocono	State PA	Zip Code (Plus 4) 18344	Description of Expenditure GOTV Campaign Workers-Meals			

To Whom Paid Call Fire			MO	DAY	YEAR	\$ 55.29
Mailing Address 1410 Second St Suite 200			5	19	2014	
City Santa Monica	State CA	Zip Code (Plus 4) 90401	Description of Expenditure ROBO CALLS			

To Whom Paid Staples			MO	DAY	YEAR	\$ 30.29
Mailing Address 7005 Rte 611 Applegate Dr			6	6	2014	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure Office Supplies			

To Whom Paid Claudette Williams			MO	DAY	YEAR	\$ 100.00
Mailing Address 9 Candlewood Lane			5	9	2014	
City Mt. Pocono	State PA	Zip Code (Plus 4) 18344	Description of Expenditure Black & White Gala Campaign Event			

To Whom Paid ACT BLUE			MO	DAY	YEAR	\$ 15.00
Mailing Address 366 Summer St			5	9	2014	
City Sommerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure Campaign Event			

To Whom Paid ACT BLUE			MO	DAY	YEAR	\$ 83.50
Mailing Address 366 Summer St			6	6	2014	
City Sommerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure Campaign Event			

To Whom Paid 1and1.com			MO	DAY	YEAR	\$ 9.99
Mailing Address 701 Lee Rd Suite 300			6	4	2014	
City Chesterbrooke	State PA	Zip Code (Plus 4) 19087	Description of Expenditure Website Hosting			

To Whom Paid Transfirst LLC			MO	DAY	YEAR	\$ 47.24
Mailing Address 12202 Airport Way Suite 100			5	12	2014	
City Brromfield	State CO	Zip Code (Plus 4) 80021	Description of Expenditure Click & Pledge			

To Whom Paid Windjammer INC			MO	DAY	YEAR	\$ 300.00
Mailing Address 519 PENNSYLVANIA AVE			5	6	2014	
City Bangor	State PA	Zip Code (Plus 4) 18013	Description of Expenditure T-shirts			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,233.93

