Campaign Finance Report

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

Filer Identificati Number :	on 2010	090			Repo Filed		:	CA	NDI	DATE		COM	AITTEE	Y	LUB	51131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		MULL	ERY,	, GE	RALE	CI	TIZENS	FOF	₹		•			
Street Address:																	
City:	NANTICOKE							State	e:	PA			Zip Co	de: 18	3634-0	0000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.		0 DA RIMA		Р	POST-	3.		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		0 DA LECT	NY ΓΙΟΝ	Р	POST-	6.		TERMIN/ REPORT		Yes	No	\
report type)	ANNUAL REPORT	7. X	Year 2014					IG ME					PAPER		$ \checkmark $	DISKE	TTE
Name of Office S	- Sought by Candida	te:			-	-		DAT	ΈO	F ELE	СТІО	N	District Number	Office Code	Pai	ty Code	County Code
REDRESENTATI	VE IN THE GENER	αι Δςς	EMRI Y					МО		DAY	YE	AR	119	STH	DEI	М	40
KEIKESENIAII	VE IIV THE GENE	CAL ASS	LINDLI						11		4	2014		(SEE IN	STRUCTI	ONS FOR C	CODES)
	Receipts and	МО	DAY	YEAR				МО		DAY	YI	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	trom:		11 25	20	014	то)		12	(7)	31	2014					
A. Amount Bro	ught Forward Froi	n Last R	eport				\$				8	382.02					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I	()	\$				(500.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				1,4	182.02					
D. Total Expend	ditures (From Sch	edule II	I)				\$					0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				1,4	82.02					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)		\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			'		
				AFF	IDA۱	/IT	SE	CTI	NC								
	a Committee rep	-	_									_					
correct and comple) that this report, inc ete.	uaing the	e attacned sc	neaules	s filea d	on pa	iper (or by e	electi	ronic me	eaium	, are to t	ne best o	т ту кпо	wieage	and belle	er , true
Sworn to and subs	cribed before me this day of	3	20								S	Signature	of Perso	n Submit	ting Re	oort	
	Signatu	re											Prin	ted Name	e		
My Commission Ex	opires								•				Ema	il			
	МО	D	AY	YR						Are	ea Cod	le	Daytin	ne Teleph	none Nu	mber	
Part II- If this is	a report of a can	lidate's	authorized	Comm	nittee,	, Car	ndida	ate sl	hall	sign he	ere.						
No 320) as amende		ny knowl	edge and beli	ief this	politic	al co	ommi	ittee h	as n	ot violat	ed an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20									S	ignature (of Candid	ate		
						_							Printe	ed Name			
My Commission Exp	Signature ires								•				Ema	nil			—
	мо	D	AY	YR		_				Area	Code		D	aytime T	elephor	ne Numb	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MULLERY, GERALD CITIZENS FOR	From:	11/25/201	<u>4</u> To:	12/31/2014
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)			\$	100.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting) Period	(2)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	600.00

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.

Name of Filing Committee or Candidate	Reporting	Period		
MULLERY, GERALD CITIZENS FOR	From:	11/25/2014	То:	12/31/2014
		DATE		AMOUNT

Full Na	Full Name of Contributing Committee					YEAR		
Comm	Comm. to Elect Makowski					TEAK		
Mailing Address				12	30	2014	s 1	00.00
City	Wilkes-Barre	State	Zip Code (Plus 4)			2014		
		PA	18701					

PAGE TOTAL

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

0.00

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.

(EXCIU	de contributions fr	om political comm	iitte	ees re	portea	in Part	A)	
Name of Filing Committe	e or Candidate		Rep	orting F	Period			
			Fro	m:		To	o:	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.0
City	State	Zip Code (Plus 4)					
	·	•			•	•		PAGE TOTAL

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

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 F	Period		
MULLERY, GERALD CITIZENS FOR	From:	11/25/2014	То:	12/31/2014

DATE AMOUNT

Full Name	Full Name of Contributing Committee				DAY	YEAR	
Friends of	Friends of Mike Carroll					ILAK	\$ 500.00
Mailing Ad	Mailing Address				15	2014	
City Avo	oca	State	Zip Code (Plus 4)	12	15	2014	
		PA	18641				

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

PAGE TOTAL \$ 500.00

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	1			Reporting Period					
						From:			
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

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		Report	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	0.00

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 Per	iod	
MULLERY, GERALD CITIZENS FOR	From:	<u>11/25/2014</u> To:	<u>12/31/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
			From			То:	
			DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	0.00