

# 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> PO BOX 1186								
<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 type="checkbox"/> No <input checked="" 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 2016	<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			115	STH
				11 8 2016			DEM 45	
							(SEE INSTRUCTIONS FOR CODES)	
<b>Summary of Receipts and Expenditures from:</b>		MO	DAY	YEAR	<b>TO</b>		<b>FOR OFFICE USE ONLY</b>	
		1	1	2016	4 11 2016			
<b>A. Amount Brought Forward From Last Report</b>				\$ 12,960.48				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>				\$ 4,519.88				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>				\$ 17,480.36				
<b>D. Total Expenditures (From Schedule III)</b>				\$ 4,409.69				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>				\$ 13,070.67				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>				\$ 0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>				\$ 5,000.00				

## 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>1/1/2016</u> To: <u>4/11/2016</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 1,305.00

<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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 2,014.88
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,014.88

<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>	\$ 1,200.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 1,200.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<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>	\$ 4,519.88
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	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.  
(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>1/1/2016</u> <b>To:</b> <u>4/11/2016</u>

<b>DATE</b>	<b>AMOUNT</b>
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Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Amiliani,Eli							
Mailing Address				3	9	2016	
464 Cheshire Dr							
City	Downingtown	State	PA	Zip Code (Plus 4)	18335		

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Amiliani,Eli						
Mailing Address 464 Cheshire Dr						
City Downingtown	State PA	Zip Code (Plus 4) 18335	3	28	2016	

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Aurand, Mark							
Mailing Address 421 Dogwood Ln				3	12	2016	
City Nazareth	State PA	Zip Code (Plus 4) 18064					

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Clarke, Merlyn							
Mailing Address 176 Terrace Dr				3	9	2016	
City	Stroudsburg	State	Zip Code (Plus 4)				
		PA	18360				

<b>Full Name of Contributor</b> Derosa, David			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 2952 Candlewood Dr			3	9	2016	
<b>City</b> East Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18301				

Full Name of Contributor Gagliardo, Jane			MO	DAY	YEAR	\$ 100.00
Mailing Address 113 W Broad St			3	9	2016	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301				

Full Name of Contributor Glasco, Sharon			MO	DAY	YEAR	\$ 100.00
Mailing Address 314 Ginger Ln			3	13	2016	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301				

Full Name of Contributor Heckman, Lois			MO	DAY	YEAR	\$ 100.00
Mailing Address 127 Harmony Ln			1	24	2016	
City Saylorsburg	State PA	Zip Code (Plus 4) 18353				

Full Name of Contributor Heckman, Lois			MO	DAY	YEAR	\$ 25.00
Mailing Address 127 Harmony Ln			2	25	2016	
City Saylorsburg	State PA	Zip Code (Plus 4) 18353				

Full Name of Contributor Heckman, Lois			MO	DAY	YEAR	\$ 25.00
Mailing Address 127 Harmony Ln			3	25	2016	
City Saylorsburg	State PA	Zip Code (Plus 4) 18353				

Full Name of Contributor Higgins, Mary Ellen			MO	DAY	YEAR	\$ 100.00
Mailing Address PO Box 68			3	13	2016	
City Shawnee on Delaware	State PA	Zip Code (Plus 4) 18356				

Full Name of Contributor Lovenheim, Robert			MO	DAY	YEAR	\$ 100.00
Mailing Address PO Box 309			3	2	2016	
City Shawnee on Delaware	State PA	Zip Code (Plus 4) 18356				

Full Name of Contributor Lyons, Susan			MO	DAY	YEAR	\$ 100.00
Mailing Address 481 Hyland Dr			2	25	2016	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301				

Full Name of Contributor Madden, Maureen			MO	DAY	YEAR	\$ 100.00
Mailing Address 7404 VentnorAve			3	8	2016	
City Tobyhanna	State PA	Zip Code (Plus 4) 18466				

Full Name of Contributor Odesky, Susan			MO	DAY	YEAR	\$ 100.00
Mailing Address 6206 Blue Beech Dr			3	27	2016	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301				

Full Name of Contributor Probst, Tarah			MO	DAY	YEAR	\$ 100.00
Mailing Address 510 Thomas St			2	19	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor Tirrachia, Anne			MO	DAY	YEAR	\$ 50.00
Mailing Address 725 Scott St			1	24	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor Tirrachia, Anne			MO	DAY	YEAR	\$ 50.00
Mailing Address 725 Scott St			3	9	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor Tirrachia, Anne			MO	DAY	YEAR	\$ 10.00
Mailing Address 725 Scott St			3	25	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor Victory, Julie			MO	DAY	YEAR	\$ 50.00
Mailing Address 217 Highland Dr			2	18	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor Victory, Julie			MO	DAY	YEAR	\$ 25.00
Mailing Address 217 Highland Dr			3	26	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor Victory, Julie			MO	DAY	YEAR	\$ 5.00
Mailing Address 217 Highland Dr			3	26	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor Westervelt,George			MO	DAY	YEAR	\$ 250.00
Mailing Address 706 Monroe St			4	8	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Weiss, Boyd						
Mailing Address			4	6	2016	
715 Main St						
City	Stroudsburg	State				
		PA				
		Zip Code (Plus 4)				
		18360				

Full Name of Contributor			MO	DAY	YEAR	\$ 24.88
Madden, Maureen						
Mailing Address			4	8	2016	
7404 VentnorAve						
City	Tobyhanna	State				
		PA				
		Zip Code (Plus 4)				
		18466				

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

<b>PAGE TOTAL</b>
\$ 2,014.88



**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.)**

<b>Name of Filing Committee or Candidate</b>  MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2016</u> <b>To:</b> <u>4/11/2016</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Dodel, Mark							
<b>Mailing Address</b> 584 Hickory Valley Rd				2	25	2016	\$ 100.00
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	

				MO	DAY	YEAR	
Dodel, Mark							
<b>Mailing Address</b> 584 Hickory Valley Rd				3	29	2016	\$ 500.00
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	

				MO	DAY	YEAR	
Schwartz, Linda							
<b>Mailing Address</b> 515 NFifth St				2	18	2016	\$ 500.00
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360					
<b>Employer Name</b> none				<b>Occupation</b> none			
<b>Employer Mailing Address/Principal Place of Business</b>  none			<b>City</b>  none		<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  18360	

<b>Full Name of Contributor</b> Schwartz, Linda			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 515 NFifth St			2	27	2016	
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360				
<b>Employer Name</b> none			<b>Occupation</b> none			
<b>Employer Mailing Address/Principal Place of Business</b> none		<b>City</b> none	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360		

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

<b>PAGE TOTAL</b>
\$ 1,200.00

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	Reporting Period
	From: To:

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

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

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

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE		<b>From:</b>	<b>To:</b>
		<u>1/1/2016</u>	<u>4/11/2016</u>
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
<b>TOTAL for the Reporting Period</b>		<b>(1)</b>	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
<b>TOTAL for the Reporting Period</b>		<b>(2)</b>	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
<b>TOTAL for the Reporting Period</b>		<b>(3)</b>	\$ 0.00
<b>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.)</b>			\$ 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>

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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.							<div style="border: 1px solid black; padding: 5px;"> <b>PAGE TOTAL</b>            \$ 0.00         </div>

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# 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>1/1/2016</u> To: <u>4/11/2016</u>

				DATE		AMOUNT	
To Whom Paid Adams Outdoor Advertising				MO	DAY	YEAR	\$ 962.57
Mailing Address 6053 Rt 209				3	21	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure billboard				
To Whom Paid Act Blue				MO	DAY	YEAR	\$ 10.07
Mailing Address PO Box 44146				1	6	2016	
City Sommerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure cc fee				
To Whom Paid Act Blue				MO	DAY	YEAR	\$ 3.75
Mailing Address PO Box 44146				2	15	2016	
City Sommerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure cc fee				
To Whom Paid Act Blue				MO	DAY	YEAR	\$ 6.69
Mailing Address PO Box 44146				3	3	2016	
City Sommerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure cc fee				
To Whom Paid Act Blue				MO	DAY	YEAR	\$ 32.66
Mailing Address PO Box 44146				4	4	2016	
City Sommerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure cc fee				



To Whom Paid Citizens Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address 812 MainSt			1	29	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure bank fee			

To Whom Paid Citizens Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address 812 MainSt			2	29	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure bank fee			

To Whom Paid Citizens Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address 812 MainSt			3	29	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure bank fee			

To Whom Paid Pocono Irish American Association			MO	DAY	YEAR	\$ 150.00
Mailing Address PO Box 852			3	4	2016	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301	Description of Expenditure parade fee			

To Whom Paid Monroe County NAACP			MO	DAY	YEAR	\$ 50.00
Mailing Address PO Box 487			3	4	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure tickets			

To Whom Paid Didonato, Aaron			MO	DAY	YEAR	\$ 100.00
Mailing Address 2429 Horseshoe Dr			3	3	2016	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301	Description of Expenditure consulting			

<b>To Whom Paid</b> Mokgadi, Thabo			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 1730Honeysuckle Ln			3	4	2016	
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> consulting			

<b>To Whom Paid</b> Rodriguez, Adam			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 213 Spyglass Ct			3	14	2016	
<b>City</b> East Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18302	<b>Description of Expenditure</b> graphic design			

<b>To Whom Paid</b> USPS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 43.00
<b>Mailing Address</b> 701 Ann St			2	4	2016	
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> postage			

<b>To Whom Paid</b> USPS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 157.50
<b>Mailing Address</b> 701 Ann St			3	14	2016	
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> postage			

<b>To Whom Paid</b> Cook Family Photography			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 137.80
<b>Mailing Address</b> 4819 Belgravia Dr			1	25	2016	
<b>City</b> Tobyhanna	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18466	<b>Description of Expenditure</b> photos			

<b>To Whom Paid</b> Sun Litho Printing			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 212.00
<b>Mailing Address</b> 421 N Courtland St			1	26	2016	
<b>City</b> East Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18301	<b>Description of Expenditure</b> printing			

To Whom Paid Sun Litho Printing			MO	DAY	YEAR	\$ 402.80
Mailing Address 421 N Courtland St			3	17	2016	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301	Description of Expenditure printing			

To Whom Paid B J Wholesale			MO	DAY	YEAR	\$ 54.25
Mailing Address 250 Pocono Commons			3	21	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure supplies			

To Whom Paid Michael's Crafts			MO	DAY	YEAR	\$ 18.17
Mailing Address Shops atStroud			3	21	2016	
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure supplies			

To Whom Paid one & one			MO	DAY	YEAR	\$ 94.99
Mailing Address 701 Lee Rd Ste300			1	11	2016	
City Chesterbrook	State PA	Zip Code (Plus 4) 19087	Description of Expenditure web hosting fee			

To Whom Paid one & one			MO	DAY	YEAR	\$ 69.99
Mailing Address 701 Lee Rd Ste300			2	9	2016	
City Chesterbrook	State PA	Zip Code (Plus 4) 19087	Description of Expenditure web hosting fee			

To Whom Paid one & one			MO	DAY	YEAR	\$ 69.99
Mailing Address 701 Lee Rd Ste300			3	11	2016	
City Chesterbrook	State PA	Zip Code (Plus 4) 19087	Description of Expenditure website hosting			

<b>To Whom Paid</b> MyCampaign Store			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 558.70
<b>Mailing Address</b> 304Whittington Pkwy Ste 201			3	17	2016	
<b>City</b> Louisville	<b>State</b> KY	<b>Zip Code (Plus 4)</b> 40222	<b>Description of Expenditure</b> signs			

  

<b>To Whom Paid</b> Marco Antonio Restaurant			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 995.88
<b>Mailing Address</b> 620 Main St			3	13	2016	
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> food fund raiser			

  

<b>To Whom Paid</b> Sarah Street Grill			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 19.88
<b>Mailing Address</b> 550Quaker Ally			4	7	2016	
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> lunch meeting			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 4,409.69

**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

**Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period**

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE				<b>From:</b> <u>1/1/2016</u> <b>To:</b> <u>4/11/2016</u>			

  

				<b>Outstanding Balance of Debt</b>
			<b>DATE</b>	
<b>Name of Creditor</b> Maureen Madden			<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> 7404 VentnorAve				
			4	9
			2016	\$ 5,000.00
<b>City</b> Tobyhanna	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18466	<b>Description of Debt</b> loan to campaign	

  

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b> \$ 5,000.00
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