Campaign Finance Report

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

Filer Identification 20120140 Number :						port ed B	•		1ITTEE	ITTEE / LOBBYIST								
Name of Filing C	committe	e, Candid	ate or L	obbyist:		MAE	DDE	N, MAI	UREEN F	RIEND	S OF	FOR S	TATE RE	PRESEN	ITATIV	E		_
Street Address:	РО В	OX 1186																
City:	STRO	DUDSBUR	.G						State:	PA			Zip Cod	le: 18	360			
TYPE OF REPORT	6TH TUES		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No	~	
(place X to the right of	6TH TUES		4.	2ND FRIDAY ELECTION	Y PRE	-	5.	30 DA		POST-	6.		TERMINATION Yes REPORT?				~	
report type)	ANNUAL	. REPORT	7.	Year 2016					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by	/ Candida	te:	-		_			DATE 0	F ELE	СТІО	N	District Number	Office Code	Part	y Code	County Code	
									МО	DAY	YE	AR	115	STH	DEM		45	_
REPRESENTATI	VE IN IF	HE GENER	KAL ASS	EMBLY					11		8	2016		(SEE IN	STRUCTIO	NS FOR (ODES)	-
Summary of		s and	МО	DAY	YEAR	l			мо	DAY	YE	AR	FO	R OFFI	E USE	ONLY		
Expenditures	from:			4 12	2	016	Т	0	5		16	2016						
A. Amount Bro	ught Forv	ward Fron	n Last R	eport				\$			13,0	70.67						
B. Total Moneta	ary Contr	ibutions A	And Rec	eipts (From	Sche	dule	e I)	\$			1,4	85.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			14,5	55.67						
D. Total Expend	ditures (I	From Sch	edule II	I)				\$			3,0	60.91						
E. Ending Cash	Balance	(Subtract	Line D	From Line C	2)			\$			11,4	94.76						
F. Value Of In-	Kind Con	tributions	Receiv	ed (From So	hedu	le II	[)	\$				0.00						
G. Unpaid Debt	s And Ob	oligations	(From S	Schedule IV)			\$			5,0	00.00			•			
					AFF	IDA	٩VI	T SE	CTION									
PART I - If this is		-	•							- '								
I swear (or affirm) correct and comple		report, incl	uding the	attached sch	nedules	file	d on	paper o	or by elect	ronic m	edium	, are to t	the best o	f my knov	vledge a	and belie	ef , true	
Sworn to and subs	day of	ore me this	3	20							s	ignature	of Perso	n Submitt	ing Rep	ort		
		Signatu	re					-					Prin	ted Name	1			
My Commission Ex	cpires												Emai	i				
		МО	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nui	nber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		ne best of n	ny knowle	edge and belie	ef this	polit	tical	commi	ttee has n	ot viola	ted an	y provis	ions of the	e act of J	ıne 3,19	37 (P.L	. 1333,	l
Sworn to and subsc		re me this										s	ignature o	of Candida	ate			
	day of —			_ 20				-					Drinto	d Name				
		Signature						-					inte					
My Commission Exp													Ema	il	_			
	_	мо	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From:	<u>4/12/201</u>	<u>б</u> То:	<u>5/16/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	235.00
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)			\$	350.00
TOTAL for the Reporting	J Period	(2)	\$	350.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	900.00
TOTAL for the Reporting	J Period	(3)	\$	900.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	1,485.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use	this Part to itemize with an aggregate								
Name of Filing Comm	nittee or Candidate		Re	Reporting Period					
		From:			То				
					DATE			AMOUNT	
Full Name of Contribut	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (P	lus 4)						
	•	•		•	•	•		PAGE TOTAL	

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

PAGE TOTAL\$ 0.00

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)

Name of Filing Committee or Candidat	ame of Filing Committee or Candidate		Reporting Period					
MADDEN, MAUREEN FRIENDS OF FO	R STATE REPRESEN	NTATIVE	Fror	m:	4/12/2	2 <u>016</u> To	:	<u>5/16/2016</u>
					DATE			AMOUNT
Full Name of Contributor Hillstead, Carol				мо	DAY	YEAR		
Mailing Address 5459 Paradise Valle	ey RD						\$	150.00
City Cresco	State	Zip Code (Plus 4)		4	12	2016		
	PA	18326						
Full Name of Contributor Kurnas, Denise				МО	DAY	YEAR		
Mailing Address 552 Greenview Dr							\$	100.00
City Saylorsburg	State	Zip Code (Plus 4)		5	3	2016		
	PA	18353						
Full Name of Contributor Gagliardo, Jane				МО	DAY	YEAR		
Mailing Address 113 W Broad St							\$	100.00
City East Stroudsburg	State	Zip Code (Plus 4)		5	11	2016		
	PA	18301						
								PAGE TOTAL

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

350.00

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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		Reporting Period						
MADDEN, MAUREEN FRIENDS OF FOR	STATE REPRESENTA	ATIVE	Fro	m:	4/12/2	<u>016</u> To	<u>5/16/2016</u>	
				D	ATE		A	AMOUNT
Full Name of Contributor Dodel, Mark				МО	DAY	YEAR		
Mailing 584 Hickory Valley Ro Address	I				8		\$	500.00
City Stroudsburg	State PA	Zip Code 18360	(Plus 4)	5	2016			
Employer Name none Occupation none						ione	•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
none		none	е		PA		1836	0
		<u>'</u>						
Full Name of Contributor Madden, Maureen				МО	DAY	YEAR		
		'					\$	400.00
Madden, Maureen Mailing 7404 VentnorAve	State	Zip Code	(Plus 4)	мо 4	DAY 18	YEAR 2016	\$	400.00
Mailing 7404 VentnorAve	State PA	Zip Code 18466	(Plus 4)				\$	400.00
Mailing 7404 VentnorAve	PA		(Plus 4)		18			400.00
Madden, Maureen Mailing 7404 VentnorAve Address City Tobyhanna	PA		(Plus 4)	4	18	2016		400.00 de (Plus 4)
Madden, Maureen Mailing 7404 VentnorAve City Tobyhanna Employer Name East Stroudsburg University Employer Mailing Address/Principal Place	PA	18466	(Plus 4)	- 4 Occupa	18	2016		de (Plus 4)
Madden, Maureen Mailing 7404 VentnorAve Address City Tobyhanna Employer Name East Stroudsburg Uni Employer Mailing Address/Principal Place Business	PA versity	18466 City East	Stroudsbu	Occupat	18 tion State	2016	Zip Co	de (Plus 4)

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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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 Perio	d	
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From:	4/12/2016 To:	<u>5/16/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P	eriod		
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From	4/12/2016	То:	<u>5/16/2016</u>

				DATE			AMOUNT
To Whom Paid Citizens Bank			мо	DAY	YEAR		
Mailing Address 812 Main St			4	12	2016	\$	3.22
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Descrip bank fe	otion of Exp	penditure		
To Whom Paid Litle 7 Co			МО	DAY	YEAR		
Mailing Address 900 Chelmsford St			4	20	2016	\$	0.54
City Lowell State Zip Code (Plus 4) MA 01851			Descrip bank fe	otion of Exp	penditure		
To Whom Paid Litle 7 Co			МО	DAY	YEAR		
Mailing Address 900 Chelmsford St			5	3	2016	\$	0.52
City Lowell	State MA	Zip Code (Plus 4) 01851	Descrip bank fe	otion of Exp ee	penditure		
To Whom Paid Litle 7 Co			МО	DAY	YEAR		
Mailing Address 900 Chelmsford St			5	4	2016	\$	1.02
City Lowell	State MA	Zip Code (Plus 4) 01851	Descrip bank fe	otion of Exp	penditure		
To Whom Paid Citizens Bank			МО	DAY	YEAR	_	
Mailing Address 812 Main St			4	29	2016	\$	3.00
City Stroudsburg State PA 18360			Descrip bank fe	otion of Exp ee	penditure		

To Whom Paid Act Blue			МО	DAY	YEAR					
Mailing Address PO Box 4414	5	5	2016	\$		6.15				
City Sommerville	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
MA 02144				bank fee						
To Whom Paid Act Blue				DAY	YEAR					
Mailing Address PO Box 44146			5	11	2016	\$		50.00		
City Sommerville	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	MA	02144	contrib							
To Whom Paid Monroe County Honorary Societ	у		МО	DAY	YEAR					
Mailing Address 104 Weiss Li	า		4	30	130.00					
City Saylorsburg	ity Saylorsburg State Zip Code (Plus 4)									
, 3	PA	18353	Description of Expenditure dues							
To Whom Paid USPS	<u> </u>	<u> </u>	мо	DAY	YEAR					
	,	,	мо 4	DAY 20	YEAR 2016	\$		470.00		
USPS Mailing Address 701 Ann St	State	Zip Code (Plus 4)	4		2016			470.00		
USPS Mailing Address 701 Ann St	State PA	Zip Code (Plus 4) 18360	4	20 otion of Exp	2016			470.00		
USPS Mailing Address 701 Ann St			4 Descrip	20 otion of Exp	2016			470.00		
Mailing Address 701 Ann St City Stroudsburg To Whom Paid	PA		4 Description postage	20 Otion of Exp	2016 penditure		1,	470.00		
Mailing Address 701 Ann St City Stroudsburg To Whom Paid Lehigh Valley Printing Mailing Address 306 Brodhea	PA		4 Descrip postage MO	20 Day	2016 Penditure YEAR 2016	\$	1,			
Mailing Address 701 Ann St City Stroudsburg To Whom Paid Lehigh Valley Printing Mailing Address 306 Brodhea	PA nd Ave Rear	18360	4 Descrip postage MO	20 DAY 15 Dtion of Exp	2016 Penditure YEAR 2016	\$	1,			
Mailing Address 701 Ann St City Stroudsburg To Whom Paid Lehigh Valley Printing Mailing Address 306 Brodhea	nd Ave Rear State	18360 Zip Code (Plus 4)	4 Description of the postage of the	20 DAY 15 Dtion of Exp	2016 Penditure YEAR 2016	\$	1,			
Mailing Address 701 Ann St City Stroudsburg To Whom Paid Lehigh Valley Printing Mailing Address 306 Brodhea City Bethlehem	nd Ave Rear State PA	18360 Zip Code (Plus 4)	4 Description of the second o	DAY 15 Dition of Exp	2016 YEAR 2016 penditure	\$	1,			
Mailing Address 701 Ann St City Stroudsburg To Whom Paid Lehigh Valley Printing Mailing Address 306 Brodhea City Bethlehem To Whom Paid Lehigh Valley Printing	nd Ave Rear State PA	18360 Zip Code (Plus 4)	MO 4 Description 4 Description 4 Description MO 4	DAY DAY DAY	2016 YEAR 2016 Penditure YEAR 2016	\$	1,	,286.77		

To Whom Paid Sun Litho Print	мо	DAY	YEAR			
Mailing Address 421 N Courtland St	5	13	2016	\$		68.90
City East Stroudsburg State Zip Code (Plus 4) PA 18301	Descrip printing	tion of Exp	penditure			
To Whom Paid Dunkin Donughts	МО	DAY	YEAR			
Mailing Address 529 Pocono Blvd	4	26	2016	\$		48.59
City Mt. Pocono State Zip Code (Plus 4) PA 18344	Description of Expenditure refreshments					
To Whom Paid Paradise Stream	МО	DAY	YEAR			
Mailing Address 6213 Carlton Rd	4	28		27.00		
City Mt. Pocono State Zip Code (Plus 4) PA 18344	Descrip food	otion of Exp	penditure			
,						
To Whom Paid one & One	МО	DAY	YEAR			
	MO 4	DAY 12	YEAR 2016	\$		69.99
one & One	4 Descrip		2016			69.99
one & One Mailing Address 701 Lee Rd Ste 300 City Chesterbrook State Zip Code (Plus 4)	4 Descrip	12 otion of Exp	2016			69.99
one & One Mailing Address 701 Lee Rd Ste 300 City Chesterbrook State PA 2ip Code (Plus 4) 19087 To Whom Paid	4 Descrip website	12 Otion of Exp e hosting	2016 penditure			69.99
one & One Mailing Address 701 Lee Rd Ste 300 City Chesterbrook State 2ip Code (Plus 4) 19087 To Whom Paid Facebook	4 Descrip Website MO 4 Descrip	12 etion of Exp e hosting	2016 Penditure YEAR 2016	\$		
one & One Mailing Address 701 Lee Rd Ste 300 City Chesterbrook State PA 19087 To Whom Paid Facebook Mailing Address 1601 S California Ave City Palo Alto State Zip Code (Plus 4) 19087	4 Descrip Website MO 4 Descrip	12 ption of Exp hosting DAY 18	2016 Penditure YEAR 2016	\$		
Mailing Address 701 Lee Rd Ste 300 City Chesterbrook State PA 19087 To Whom Paid Facebook Mailing Address 1601 S California Ave City Palo Alto CA Zip Code (Plus 4) 19087 To Whom Paid Facebook	4 Descrip website MO 4 Descrip website	tion of Expension	2016 YEAR 2016 penditure	\$		

							AGE 14	
To Whom Paid Agoda/Clarion Hotel			МО	DAY	YEAR			
Mailing Address 148 Sherator	4	12	2016	\$	115.31			
City New Cumberland	State PA	Zip Code (Plus 4) 17070	Descrip hotel	otion of Exp				
To Whom Paid Ellias Rest			МО	DAY	YEAR			
Mailing Address 411 Rt 94			4	24	2016	\$	144.45	
City Columbia	State NJ	Zip Code (Plus 4) 07832	Descrip food	otion of Exp				
To Whom Paid Mokgadi, Mogale			МО	DAY	YEAR			
Mailing Address 1730 Honeys	uckle		4	4 27 2016 \$				
City Stroudsburg	State PA	Zip Code (Plus 4) 18360	Description of Expenditure distribution					
To Whom Paid			МО	DAY	YEAR			
Padin, Miguel								
Mailing Address 1112 Chapma	an Rd		4	27	2016	\$	40.40	
Matthew Address	an Rd State PA	Zip Code (Plus 4) 18301		otion of Exp			40.40	
Mailing Address 1112 Chapma	State		Descrip	otion of Exp			40.40	
Mailing Address 1112 Chapma City East Stroudsburg To Whom Paid	State PA		Descrip distribu	otion of Exp	enditure		40.40	
Mailing Address 1112 Chapma City East Stroudsburg To Whom Paid Goldschmid, Daniel	State PA		Descrip distribu MO	DAY 27 ption of Exp	YEAR 2016	\$		
Mailing Address 1112 Chapma City East Stroudsburg To Whom Paid Goldschmid, Daniel Mailing Address 310 Edgemor	State PA The Research of the	18301 Zip Code (Plus 4)	Description distribution MO 4 Description distribution	DAY 27 ption of Exp	YEAR 2016	\$		
Mailing Address 1112 Chapma City East Stroudsburg To Whom Paid Goldschmid, Daniel Mailing Address 310 Edgemon City Stroudsburg To Whom Paid	State PA The Research of the	18301 Zip Code (Plus 4)	MO 4 Description 4 Description distribution	DAY 27 otion of Expansion	YEAR 2016 Denditure	\$		

To Whom Paid Hill, Aurora			мо	DAY	YEAR			
Mailing Address 200 Prospect	St		4	27	2016	\$	50.50	
City East Stroudsburg PA Zip Code (Plus 4) 18301			Description of Expenditure distribution					
To Whom Paid Marx, Madeline			МО	DAY	YEAR			
Mailing Address 200 Prospect	St		4	27	2016	\$	40.40	
City East Stroudsburg	State PA	Zip Code (Plus 4) 18301	Description of Expenditure distribution					
To Whom Paid Weiss, Liam			МО	DAY	YEAR			
Mailing Address 217 Fieldston	ie Ln		4	27	2016	\$	40.40	
City EastStroudsburg	State PA	Zip Code (Plus 4) 18301	Description of Expenditure distribution					
Enter Grand Total of Expendi	tures on Page 1 P	enort Cover Page Item D					PAGE TOTAL	
Lines Grana rotal of Expendi	uics on rage 1, K	cport cover rage, Item D	•			\$	3,060.91	

STATEMENT OF UNPAID DEBTS

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

Name of Filing Committee or Candidate				Reporting Period					
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE				<u>4/12/2016</u> To:			5/16/2016		
					DATE			Outstanding Balance of Debt	
Name of Creditor Maureen Madden				мо	DAY	YEAR			
Mailing Address 7404 VentnorAve				5	23	2016	\$	5,000.00	
City Tobyhanna	State PA	Zip Code (Pl	us 4)	Description of Debt loan to campaign					
Enter Grand Total of Unpaid Debt	s on Page 1, Rep	ort Cover Pa	ge, Item	G.				PAGE TOTAL	
	- · ·		_				\$	5,000.00	