

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 : 20160009		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JOHN BROWN											
Street Address: 403 S MAIN ST											
City: NAZARETH					State: PA		Zip Code: 18064				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2016	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
					MO	DAY	YEAR				
					11	8	2016				
Summary of Receipts and Expenditures from:					MO	DAY	YEAR	FOR OFFICE USE ONLY			
					4	12	2016				
					5	16	2016				
A. Amount Brought Forward From Last Report					\$ 4,920.79						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 7,427.20						
C. Total Funds Available (Sum Of Lines A and B)					\$ 12,347.99						
D. Total Expenditures (From Schedule III)					\$ 5,571.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 6,776.99						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 13,471.10						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 36,113.69						

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
FRIENDS OF JOHN BROWN	From: <u>4/12/2016</u> To: <u>5/16/2016</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)	\$ 5,000.00
All Other Contributions (Part D)	\$ 2,427.20
TOTAL for the Reporting Period (3)	\$ 7,427.20

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 7,427.20
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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.

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

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

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

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
FRIENDS OF JOHN BROWN	From: <u>4/12/2016</u> To: <u>5/16/2016</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	5,000.00
CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC									
Mailing Address					5	3	2016		
228 S WASHINGTON ST STE 115									
City	ALEXANDRIA	State	VA	Zip Code (Plus 4)	22314				

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

PAGE TOTAL
\$ 5,000.00

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 FRIENDS OF JOHN BROWN	Reporting Period From: <u>4/12/2016</u> To: <u>5/16/2016</u>
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				DATE	AMOUNT	
Full Name of Contributor	MO	DAY	YEAR			
DAVID CERAUL					\$ 2,427.20	
Mailing Address 22 MARKET ST	5	16	2016			
City BANGOR State PA Zip Code (Plus 4) 18013						
Employer Name CERAUL LAW OFFICES	Occupation ATTORNEY					
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)			
22 MARKET ST	BANGOR	PA	18013			

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

PAGE TOTAL
\$ 2,427.20

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:
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			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.

PAGE TOTAL
\$ 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 Period	
FRIENDS OF JOHN BROWN		From: <u>4/12/2016</u> To: <u>5/16/2016</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
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 RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 13,471.10
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.)			\$ 13,471.10

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
FRIENDS OF JOHN BROWN	From: <u>4/12/2016</u> To: <u>5/16/2016</u>

				DATE	AMOUNT		
Full Name of Contributor REPUBLICAN PARTY OF PA				MO	DAY	YEAR	\$ 13,471.10
Mailing Address 112 STATE ST				4	26	2016	
City HARRISBURG	State PA	Zip Code(Plus 4) 17101					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution CAMPAIGN LITERATURE AND POSTAGE		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 13,471.10

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JOHN BROWN	From <u>4/12/2016</u> To: <u>5/16/2016</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
SMART CENTS NAZARETH				
Mailing Address	4	14	2016	\$ 11.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
			NOTARY FEES	
To Whom Paid	MO	DAY	YEAR	
ATRO				
Mailing Address	4	26	2016	\$ 60.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
RYDAL	PA	19046	EVENT TICKET	
To Whom Paid	MO	DAY	YEAR	
BRABENDER COX				
Mailing Address	5	6	2016	\$ 4,500.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
PITTSBURGH	PA	15211	WEBSITE	
To Whom Paid	MO	DAY	YEAR	
PHOENIX FUNDRAISING PARTNERS LLC				
Mailing Address	5	6	2016	\$ 1,000.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
HARRISBURG	PA	17110	CONSULTING	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 5,571.00

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**

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JOHN BROWN	From: <u>4/12/2016</u> To: <u>5/16/2016</u>

				DATE		Outstanding Balance of Debt	
Name of Creditor LN CONSULTING				MO	DAY	YEAR	\$ 20,980.00
Mailing Address 121 STATE ST				5	2	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Debt CONSULTING FEB, MAR, APR, MAY & POSTAGE				
Name of Creditor BRABENDER COX				MO	DAY	YEAR	\$ 2,257.70
Mailing Address 1218 GRANDVIEW AVE				5	16	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15211	Description of Debt SIGNS				
Name of Creditor PHOENIX FUNDRAISING PARTNERS LLC				MO	DAY	YEAR	\$ 6,000.00
Mailing Address 2601 N FRONT ST STE 101				4	1	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Debt FUNDRAISING CONSULTING MAR, APR, MAY				
Name of Creditor VOIT CAMPAIGN				MO	DAY	YEAR	\$ 3,056.10
Mailing Address PO BOX 303				5	16	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Debt RECEPTION SHARE				
Name of Creditor COMMUNICATION CONCEPTS				MO	DAY	YEAR	\$ 1,500.00
Mailing Address 2906 WILLIAM PENN HWY STE 401				5	16	2016	
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Debt SURVEY				
Name of Creditor REPUBLICAN PARTY OF PA				MO	DAY	YEAR	\$ 1,050.00
Mailing Address 112 STATE ST				5	16	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Debt EVENT EXPENSE				

Name of Creditor JOHN BROWN			MO	DAY	YEAR	\$ 1,269.89
Mailing Address 500 SOUTH 7TH ST			5	16	2016	
City BANGOR	State PA	Zip Code (Plus 4) 18013	Description of Debt REIMBURSE TRAVEL AND CAMPAIGN EXPENSES			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 36,113.69