#### **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 :	Filer Identification 20160009 Number :					port ed B		CAND	IDATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBE	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		FRI	END	S OF .	JOHN BI	ROWN							
Street Address:	403 S MAIN :	ST														
City:	NAZARETH							State:	PA			Zip Cod	le: 1	8064		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT?		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	POST- 6.			TERMINATION Yes REPORT?			<b>~</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2016					IG METH CHECK C				PAPER DISKETTE				ГТЕ
Name of Office S	Sought by Candida	ite:						DATE (	OF ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
	<b>-</b>							МО	DAY	YE	AR	Number	Code			code
								1:	1	8	2016		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures			4 12	20	016	<b>T</b>	0	!	5	16	2016					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			4,9	920.79					
B. Total Monetary Contributions And Receipts (From Schedule I)							7,4	127.20								
C. Total Funds Available (Sum Of Lines A and B)							\$			12,3	347.99					
D. Total Expenditures (From Schedule III)						\$			5,5	71.00						
E. Ending Cash	ng Cash Balance (Subtract Line D From Line C)					\$			6,7	76.99						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edu	le II	I)	\$			13,4	71.10					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$		36,113.69							
			F	۱FF	ΙDΑ	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	[f th	nis is	a Can	didate r	eport,	candi	date sig	ın here.				
I swear (or affirm) correct and complete	) that this report, inc ete.	luding the	attached sched	dules	file	ed on	paper (	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signati	ıre					- -					Prin	ted Nam	e		
My Commission Ex	_											Emai	il			
	мо	D	AY	YR			_		Ar	ea Cod	le	Daytim	e Telep	hone Nu	mber	
Part II- If this is	a report of a can	didate's	authorized Co	omn	nitte	ee, C	andida	ate shall	l sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of e	my knowl	edge and belief	this	poli	itical	commi	ittee has	not viola	ted an	y provis	ions of the	e act of I	lune 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this								-		s	ignature o	of Candid	late		
	day of 						-					D»:+-	d Name			
	Signature						-					Frinte	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	ytime 1	Telephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF JOHN BROWN	From:	4/12/20	016 <b>To</b> :	<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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	7,427.20

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period						
			From:		То	:			
		<b>I</b>		DATE			AMOUNT		
Full Name of Contributing C	ommittee		МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							

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 Cand	idate		Rep	oorting P	eriod			
			Fro	m:		To	):	
					DATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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 Pe	riod				
FRIENDS OF JOHN BROWN	From:	4/12/2016	То:	<u>5/16/2016</u>		

DATE AMOUNT

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

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

**PAGE TOTAL \$** 5,000.00

### 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	ame of Filing Committee or Candidate Re			Reporting Period				
FRIENDS OF JOHN BROWN			Fror	n:	<u>4/12/2</u>	<u>016</u> To	: <u>5/16/2016</u>	
				D/	ATE		AMOUNT	
Full Name of Contributor DAVID CERAUL				МО	DAY	YEAR		
Mailing 22 MARKET ST Address				5	16	2016	\$ 2,427.20	
City BANGOR	<b>State</b> PA	Zip Code (Plus 18013	5 4)	5	16	2016		
Employer Name CERAUL LAW OFFICE	S			Occupat	tion	ATTORNI	EY	
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Code (Plus 4)	
22 MARKET ST		BANGOR			PA		18013	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PAGE TOTAL \$ 2,427.20	

## 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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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								
FRIENDS OF JOHN BROWN	From:	4/12/2016 <b>To</b> :	<u>5/16/2016</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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)	\$	13,471.10							
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,		\$	13,471.10							

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

lame of Filing Committee or Candidate			Reporting Period				
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		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: 4/12/2016
 To: 5/16/2016

						DATE			AMOUNT
Full Name of Contributor REPUBLICAN PARTY OF PA					мо	DAY	YEAR		
Mailing Address 112 STATE ST							\$	13,471.10	
City HARRISBURG	State		Zip Code(Plu	ıs 4)	4	26	2016		
	PA		17101						
Employer of Contributor	· ·		•		Occupa	tion	•		
Employer Mailing Address/Princi Business	ipal Place of	City	City Stat		Zip 4)	Code(Plus	Description of Contribut		Contribution
							CAMPA POSTA		TERATURE AND
Enter Grand Total of Part G	on Schedule II.	In-Kind	Contribution	s Deta	iled				PAGE TOTAL
Summary Page, Section 3.	o ooouu.c 22,								13,471.10

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
FRIENDS OF JOHN BROWN			From	4/12	2/2016	То:	<u>5/16/2016</u>	
				DATE	AMOUNT			
To Whom Paid SMART CENTS NAZARETH			мо	DAY	YEAR			
Mailing Address				14	2016	\$	11.00	
City	State	Zip Code (Plus 4)	Description of Expenditure  NOTARY FEES					
To Whom Paid ATRO				DAY	YEAR			
Mailing Address 1218 FAIRY HILL RD			4	26	2016	\$	60.00	
City RYDAL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19046	Description of Expenditure EVENT TICKET					
To Whom Paid BRABENDER COX			МО	DAY	YEAR			
Mailing Address 1218 GRANDVIEW AVE			5	6	2016	\$	4,500.00	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15211	Description of Expenditure WEBSITE					
To Whom Paid PHOENIX FUNDRAISING PARTNERS LLC			мо	DAY	YEAR			
Mailing Address 2601 N FRONT ST STE 101			5	6	2016	\$	1,000.00	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	Description of Expenditure CONSULTING					
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					<sub>€</sub>	E E71 00		

5,571.00

## 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 Reportin			ng Period					
FRIENDS OF JOHN BROWN From:		From:	<u>4/12/2016</u> <b>To:</b>		То:	<u>5/16/2016</u>		
					DATE			Outstanding Balance of Debt
Name of Creditor LN CONSULTING			мо	DAY	YEAR			
Mailing Address 121 STATE ST			5	2	2016	\$	20,980.00	
City HARRISBURG State Zip Code (Plus 4)		Pagariation of Polit						
<b>City</b> HARRISBURG	PA	17101	ŕ	Description of Debt  CONSULTING FEB, MAR, APR POSTAGE			PR,	MAY &
				Outstanding DATE Balance of Debt				
Name of Creditor BRABENDER COX			МО	DAY	YEAR			
Mailing Address 1218 GRANDVIEW AVE			5	16	2016	\$	2,257.70	
City PITTSBURGH State Zip Code (Plus 4)			Description of Debt					
TTTOBOKON	PA	15211		SIGNS				
				Outstanding DATE Balance of Deb				
Name of Creditor PHOENIX FUNDRAISING PARTNERS LLC			мо	DAY	YEAR			
Mailing Address 2601 N FRONT ST STE 101			4	1	2016	\$	6,000.00	
City HARRISBURG	State	Zip Code (Pl	us 4)	Descrir	tion of Del	ot		
- HAMISSONG	PA	17110		FUNDRAISING CONSULTING MAR, APR, MAY				IAR, APR, MAY
			Outstanding DATE Balance of Debt					
Name of Creditor VOIT CAMPAIGN				МО	DAY	YEAR		
Mailing Address PO BOX 303			5	16	2016	\$	3,056.10	
City HARRISBURG State Zip Code (Plus 4)			Description of Debt					
City HARRISBURG	PA	17108		RECEPTION SHARE				
PA   1/108				LICELLI	TOIN DITAR	·-		

				DATE			Outstanding Balance of Debt	
Name of Creditor COMMUNICATION CONCEPTS			МО	DAY	YEAR			
Mailing Address 2906 WILLIAM PENN HWY STE 401			5	16	2016	\$	1,500.00	
City EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	Description of Debt SURVEY					
				DATE			Outstanding Balance of Debt	
Name of Creditor REPUBLICAN PARTY OF PA			МО	DAY	YEAR			
Mailing Address 112 STATE ST			5	16	2016	\$	1,050.00	
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	Description of Debt EVENT EXPENSE					
	•		DATE				Outstanding Balance of Debt	
Name of Creditor JOHN BROWN			мо	DAY	YEAR			
Mailing Address 500 SOUTH 7TH ST			5	16	2016	\$	1,269.89	
City BANGOR	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18013	Description of Debt  REIMBURSE TRAVEL AND CAMPAIGN EXPENSES				IPAIGN EXPENSES	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.					\$	<b>PAGE TOTAL</b> 36,113.69		