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 2016	0009			Rep File			CANE	IDA	TE		COMM	IITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	ND	S OF	JOHN B	ROV	VN								
Street Address:	403 S MAIN S	ST																
City:	NAZARETH							State:	PA	4			Zip Cod	le: 18	064			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	- 2	2.	30 DA		POS	ST- 3	3.		AMENDM REPORT?		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pri	Ē- 5	5. X	30 DA		POS	ST- 6	5.		TERMINA REPORT?		Yes	No		\
report type)	ANNUAL REPORT	7.	Year 2016					NG METI CHECK					PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE	OF I	ELEC	TIOI	N	District Number	Office Code	Par	ty Code	Coun	
								МО	D/	AY	YE	AR		1	REP			
								1	1	8	3	2016		(SEE IN	STRUCTIO	ONS FOR (CODES)
	Receipts and	МО	DAY	YEAR	ł			МО	D	AY	YE.	AR	FO	R OFFIC	CE USE	ONLY		
Expenditures	s from:		9 20	2	016	Т	0	1	0	24	4	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				8,6	41.77						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				8,6	64.52						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				17,3	06.29						
D. Total Expen	enditures (From Schedule III)						\$				13,50	09.32						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$				3,79	96.97						
F. Value Of In-	Kind Contributions	s Receiv	ed (From So	chedu	le II)	\$				13,9	16.02						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$;	35,98	80.00			•			
				AFF	IDA	VI	T SE	CTION										
PART I - If this is	s a Committee rep	ort, trea	surer sign l	nere.	If thi	is is	a Car	ndidate	repo	rt, ca	ndid	ate sig	n here.					
I swear (or affirm) correct and complete) that this report, inc ete.	luding the	e attached sch	nedule	s filed	l on	paper	or by ele	tron	ic med	lium,	are to t	he best o	f my knov	wledge a	and beli	ef , tr	ue.
Sworn to and subs	cribed before me this	5	20								Si	gnature	of Perso	n Submitt	ing Rep	ort		_
			_				-		_				Prin	ted Name)			-
My Commission Ex	Signatu kpires	re							_				Ema	il				-
	МО	D	AY	YR			_			Area	Code	e	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andid	ate sha	l sig	n her	e.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and beli	ef this	politi	ical	comm	ittee has	not v	violate	d any	/ provisi	ons of the	e act of Ju	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this								_			Si	gnature o	of Candida	ate			-
	day of						_		_				Drint-	d Nama				_
	Signature						-						Printe	d Name				
My Commission Exp	-												Ema	il				_
	МО	D	AY	YR	l		•		-	Area C	ode		Da	aytime To	elephon	e Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JOHN BROWN	From:	9/20/201	<u>б</u> То:	10/24/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	50.00
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)			\$	529.32
TOTAL for the Reporting	y Period	(2)	\$	629.32
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)			\$	2,985.20
TOTAL for the Reporting	J Period	(3)	\$	7,985.20
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	d enter am ge, Item B.	ount)	\$	8,664.52

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		
FRIENDS OF JOHN BROWN	From:	9/20/2016	То:	10/24/2016
		DATE		AMOUNT

	ame of Contrib	uting Committee SCANLON			мо	DAY	YEAR	
Mailin	g Address	1173 CLAY AVEN	UE		10	5	2016	\$ 100.00
City	SCRANTON		State	Zip Code (Plus 4)	10		2010	
			PA	18510				

PAGE TOTAL100.00

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

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 C	andidate		Reporting P	eriod		
FRIENDS OF JOHN BROWN			From:	9/20/	2016 T o	o: <u>10/24/2016</u>
				DATE		AMOUNT
Full Name of Contributor ALBERT A HAZZOURI, JR. DDS,	MS		мо	DAY	YEAR	
	VANNA AVENUE					\$ 100.00
City SCRANTON	State PA	Zip Code (Plus 4) 18503	10	5	2016	
Full Name of Contributor HERBERT JOSHUA WEINSTEIN	<u> </u>		мо	DAY	YEAR	
Mailing Address 170 AUGUS	TA TERRACE					\$ 100.00
City EASTON	State PA	Zip Code (Plus 4) 18042	9	29	2016	
Full Name of Contributor JOSEPH MESKO			мо	DAY	YEAR	
Mailing Address 738 N WEBS	STER AVENUE					\$ 100.00
City SCRANTON	State PA	Zip Code (Plus 4) 185101811	10	5	2016	
Full Name of Contributor		•	мо	DAY	YEAR	
LANCE J STANGE, JR Mailing Address 117 ARNOLI	AVENUE					\$ 60.00
City SCRANTON	State PA	Zip Code (Plus 4)	10	7	2016	9 00.00
Full Name of Contributor VICTORIA COLLINS			МО	DAY	YEAR	
Mailing Address 250 BRISTO	L LANE					\$ 96.80
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	10	4	2016	
Full Name of Contributor DOROTHY NIKOLOS			МО	DAY	YEAR	
Mailing Address 1321 MAIN	STREET					\$ 72.52
City BATH	State PA	Zip Code (Plus 4) 18014	10	11	2016	

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

PAGE TOTAL \$ 529.32

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	eriod		
FRIENDS OF JOHN BROWN	From:	9/20/2016	То:	<u>10/24/2016</u>

DATE AMOUNT

Full Name of Contributing Committee			мо	DAY	YEAR	
REPUBLICAN COMMITTEE OF CHESTER	COUNTY		110	DA!	IEAR	\$ 5,000.00
Mailing Address 15 SOUTH CHURCH S	STREET		10	17	2016	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City WEST CHESTER	State	Zip Code (Plus 4)	10		2010	
	PA	193823206				

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 of Candidate				кер	orting Pe	riod				
FRIENDS OF JOHN BROWN				Fror	n:	9/20/2	<u>016</u> T	o:	10/2	<u>4/2016</u>
					D	ATE			AMOUN	Γ
Full Name of Contributor					мо	DAY	YEAR			
LAWERENCE J TABAS					MO	DAT	TEAR		\$	1,000.00
Mailing Address 130 S 18TH STREET	Γ				10	11	201	\Box		
City PHILADELPHIA	State	Zi	p Code (Plus	34)]		201			
	PA	19	9103					ı		
Employer Name OBERMAYER REBMAN	N MAWELL & F	HIPP	EL LLP		Occupat	tion	ATTOR	NEY		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	p Code (Plu	s 4)
CENTER SQUARE WEST, 34TH FLOOR1!	500 MARKET STREE	Т	PHILADEL	.PHIA		PA		19	102	
Full Name of Contributor			-		мо	DAY	YEAR		\$	F00.00
PAUL J LABELLE					110	5711			≯	500.00
Mailing Address 112 GREENBRIAR D	RIVE				10	5	201	5		
City CLARKS GREEN	State	Zi	p Code (Plus	s 4)						
	PA	18	3411					ı		
Employer Name PAUL J LABELLE &	; ASSOCIATES, LLC	2			Occupat	tion	ATTOR	NEY		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	p Code (Plu	s 4)
3703 BIRNEY AVENUE			MOOSIC			PA		18	3507	
Full Name of Contributor						DAY	VEAD			
CHARLES R DIACONT					МО	DAY	YEAR		\$	1,000.00
Mailing Address 648 BOK ROAD					10	9	201	\Box		
City NAZARETH	State	Zi	p Code (Plus	34)]		201			
	PA	18	3064					l		
Employer Name ARCADIA PROPERTIES	S, LLC				Occupat	tion	ATTOR	NEY		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	p Code (Plu	s 4)
100 GATEWAY DR.SUITE 310			BETHLEHE	ΞM		PA		18	3017	
Full Name of Contributor										
DAVID CERAUL					МО	DAY	YEAR		\$	485.20
Mailing Address 22 MARKET STREET	-				10	4	201			
City BANGOR	State	Zij	p Code (Plus	s 4)	1 10	1	201	'		
	PA	18	3013					-		
Employer Name CERAUL LAW OFFICES	5				Occupat	tion	ATTOR	NEY		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	p Code (Plu	s 4)
22 MARKET STREET			BANGOR			PA		18	8013	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımn	nary Page,	Section	on 3.				PAGE TO	OTAL

2,985.20

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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•					
Enter Grand Total of Part I	on Schodulo I. Dotailed	Summary Dage	Soction	4			PAGE TOTAL
cinter Granu Total Of Part I	on Schedule 1, Detalled	Summary Page,	Section	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 Perio	d	
FRIENDS OF JOHN BROWN	From:	<u>9/20/2016</u> To:	10/24/2016
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)	\$	13,916.02
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		\$	13,916.02

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reportin	g Period				
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	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
 Reporting Period

 FRIENDS OF JOHN BROWN
 From: 9/20/2016
 To: 10/24/2016

					DATE			AMOUNT
Full Name of Contributor REPUBLICAN PARTY OF PA				МО	DAY	YEAR		
Mailing Address 112 STATE ST	ī			10	18	2016	\$	13,916.02
City HARRISBURG	State		e(Plus 4)	1				
	PA							
Employer of Contributor		•		Occupa	tion	•		
Employer Mailing Address/Princip	oal Place of Business	City	Sta	te Zip	Code(Plus 4)	Descri	ption o	f Contribution
						CAMPA POSTA		ITERATURE AND
Enter Grand Total of Part G o	on Schedule II. In-K	ind C	ıtions Detail	ed				PAGE TOTAL
Summary Page, Section 3.	n Schedule 11, 111 K		acions Decan	-u				13,916.02

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period							
FRIENDS OF JOHN BROWN				From <u>9/20/2016</u>			10/24/2016				
				DATE	AMOUNT						
To Whom Paid			МО	DAY	YEAR						
REPUBLICAN PARTY OF PA											
Mailing Address 112 STATE ST				22	2016	\$	90.00				
City HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	•					
	PA	17101	EVENT I	EXPENSE							
To Whom Paid JOHN BROWN	мо	DAY	YEAR								
Mailing Address 500 S 71	10	12	2016	\$	10,405.92						
City BANGOR	State	Zip Code (Plus 4)	Descript	l tion of Exp	L enditure	1					
	PA	18013	CANDIDATE EXPENSE REIMBURSEME				MENT				
To Whom Paid	<u> </u>	·	МО	DAY	YEAR						
M&T BANK				DAT	ILAK						
Mailing Address			10	11	2016	\$	1.40				
City State Zip Code (Plus 4)			Description of Expenditure								
	BAN					BANK SERVICE CHARGE					
To Whom Paid			МО	DAY	YEAR						
MARY BARKET											
Mailing Address 169 SPRING ST				18	2016	\$	1,000.00				
City NAZARETH	Description of Expenditure										
	PA	18064	CAMPAI	GN MANA							
To Whom Paid	МО	DAY	YEAR								
PHOENIX FUNDRAISING PA	RTNERS										
Mailing Address 2601 N FRONT ST STE 101				26	2016	\$	2,000.00				
City HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure						
	17110	FUNDRAISING CONSULTING									
To Whom Paid			МО	DAY	YEAR						
SMART CENTS											
Mailing Address 37 E BEL	9	26	2016	\$	12.00						
City NAZARETH	State	Zip Code (Plus 4)	Description of Expenditure								
PA 18064				NOTARY							
							PAGE TOTAL				
Enter Grand Total of Expe	anditures on Dage 1 Do	nort Cover Page Ttem	,								

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				<u>9</u>	<u>9/20/2016</u> To:			10/24/2016		
					DATE			Outstanding Salance of Debt		
Name of Creditor LN CONSULTING				мо	DAY	YEAR				
Mailing Address 121 STATE ST				6	1	2016	5 \$	35,980.00		
City HARRISBURG	State	Zip Code (P	lus 4)	Description of Debt						
PA 17101 CONSULTING MAR, APR, & Amp; POSTAGE							MAY, JUN, JULY, AUG			
								PAGE TOTAL		
Enter Grand Total of Unpaid Debt	s on Page 1, Repo	ort Cover Pa	ge, Item	G.			\$	35,980.00		