

# 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>		20160116		<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> BEHRENS, JUSTIN FRIENDS FOR												
<b>Street Address:</b> PO BOX 354												
<b>City:</b> MOUNTAIN TOP						<b>State:</b> PA			<b>Zip Code:</b> 18707			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-ELECTION	6.	TERMINATION REPORT?	Yes		No	
	ANNUAL REPORT	7. X	Year 2017	<b>FILING METHOD ( ) CHECK ONE</b>				<b>PAPER</b>	<input checked="" type="checkbox"/>	<b>DISKETTE</b>		
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	REP			
						11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		11	28	2017		12	31	2017				
<b>A. Amount Brought Forward From Last Report</b>						\$ 750.00						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 946.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 1,696.00						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 0.00						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 1,696.00						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 456.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## 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>
BEHRENS, JUSTIN FRIENDS FOR	From: <u>11/28/2017</u> To: <u>12/31/2017</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<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>	\$ 90.00
<b>All Other Contributions (Part B)</b>	\$ 856.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 946.00

<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>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<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>	\$ 946.00
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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.**

<b>Name of Filing Committee or Candidate</b>  BEHRENS, JUSTIN FRIENDS FOR	<b>Reporting Period</b>  <b>From:</b> <u>11/28/2017</u> <b>To:</b> <u>12/31/2017</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> CITIZENS FOR MACKENZIE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 90.00
<b>Mailing Address</b> 3620 LINCOLN AVE			9	8	2017	
<b>City</b> ALLENTOWN	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  18103				

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

<b>PAGE TOTAL</b>
\$ 90.00

**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> BEHRENS, JUSTIN FRIENDS FOR	<b>Reporting Period</b> From: <u>11/28/2017</u> To: <u>12/31/2017</u>
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<b>DATE</b>	<b>AMOUNT</b>
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Full Name of Contributor			MO	DAY	YEAR	\$	250.00
PATRICK PRIBULA							
Mailing Address			8	5	2017		
1299 WYOMING AVE							
City	EXELER	State	Zip Code (Plus 4)				
		PA	18643				

Full Name of Contributor			MO	DAY	YEAR	\$	250.00
ED BEHRENS							
Mailing Address			8	5	2017		
1844 CARYN DRIVE							
City	HELLERTOWN	State	PA	Zip Code (Plus 4)	18055		

Full Name of Contributor				MO	DAY	YEAR	\$	156.00
LIZA BEHRENS								
Mailing Address				8	20	2017		
2 OAK DRIVE		City	MOUNTAIN TOP				State	PA

Full Name of Contributor				MO	DAY	YEAR	\$ 20.00
MARGE MATISKO							
Mailing Address				9	27	2017	
208 CRESENT AVE		City	State				Zip Code (Plus 4)
WILKES BARRE		PA	18702				

Full Name of Contributor SUSANNE AND TROY BRINDLE			MO	DAY	YEAR	\$ 100.00
Mailing Address 429 EAST EAGLE RD			9	22	2017	
City HAVERTOWN	State PA	Zip Code (Plus 4) 19083				

Full Name of Contributor				MO	DAY	YEAR	\$ 40.00
JAN PASDON							
Mailing Address				8	5	2017	
PO BOX 591							
City	State		Zip Code (Plus 4)				
SUGARLOAF	PA		18249				

Full Name of Contributor			MO	DAY	YEAR	\$ 40.00
LIEN NORK						
Mailing Address			8	5	2017	
930 W 21ST ST						
City	State	Zip Code (Plus 4)				
HAZLE TOWNSHIP	PA	18202				

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

PAGE TOTAL
\$ 856.00

**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	
	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.)

Name of Filing Committee or Candidate	Reporting Period
	From: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			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 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.

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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
BEHRENS, JUSTIN FRIENDS FOR		From: <u>11/28/2017</u> To: <u>12/31/2017</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 456.00
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.)			\$ 456.00

**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>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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

<b>Name of Filing Committee or Candidate</b>  BEHRENS, JUSTIN FRIENDS FOR				<b>Reporting Period</b>  From: <u>11/28/2017</u> To: <u>12/31/2017</u>			
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
ED BEHRENS					
<b>Mailing Address</b> 1844 CARYN DRIVE				8	5
<b>City</b> HELLERTOWN	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 18055	2017		
<b>Employer of Contributor</b> RETIRED				<b>Occupation</b> RETIRED	
<b>Employer Mailing Address/Principal Place of Business</b>	<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b>	
				TRAP SHOOT AND FOOD AND ADVERTISING	
<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>					<b>PAGE TOTAL</b> 456.00

## SCHEDULE III

# STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
	From To:

			DATE			AMOUNT	
To Whom Paid			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)	Description of Expenditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	
						\$ 0.00	

