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 201	60116			Repo Filed		CAN	NDIC	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		FRIEN	DS FO	R JUST	ΓIN E	BEHRE	INS							
Street Address:	Street Address: PO BOX 354																
City:	MOUNTAIN T	ОР					State	:	PA Zip Code: 18707								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.)		AY 1ARY	P	OST-	3.		AMENDMENT Yes REPORT?					
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.	30 D	AY	P	OST-	6.		TERMINATION Yes REPORT?					/
report type)	ANNUAL REPORT	7.	Year 2018					ETHOD PAPER CK ONE						DISKE	TTE		
Name of Office S	Sought by Candida	ate:	•			-	DAT	TE OF ELECTION District Office Party Code Number Code						ty Code	Count	ty	
							МО								couc		
								11		6	2018		(SEE IN	STRUCTI	ONS FOR O	ODES)	
	Receipts and	МО	DAY Y	EAR			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		3 27	20	018	ТО		4	3	30	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$	5			2,6	96.00						
B. Total Monet	ary Contributions	And Rec	eipts (From S	ched	dule I)	9	\$			1,1	00.00						
C. Total Funds	Available (Sum 0	f Lines A	and B)			9	\$			3,7	96.00						
D. Total Expen	ditures (From Scl	nedule II	I)			9	\$				0.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			9	\$			3,7	96.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	e II)	9	5			7	00.00						
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)			9	\$				0.00						
			ļ	4FF	IDAV	IT SE	ECTIO	N									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	f this	is a Ca	ndidat	e rej	port, c	andio	late sig	ın here.					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sche	dules	filed o	n papeı	or by e	lectro	onic me	edium,	are to t	he best o	f my kno	wledge	and belie	ef , tru	i e ,
Sworn to and subs	cribed before me th day of	is	20					-		s	ignature	of Perso	n Submit	ting Rep	ort		-
	Signat	ure				_		-				Prin	ted Name	e			-
My Commission Ex	cpires							-				Ema	il				_
	МО	D	AY	YR					Are	a Cod	е	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	didate's	authorized Co	omm	ittee,	Candi	date sh	all s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politica	l comr	nittee ha	as no	t violat	ed an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	,
Sworn to and subso	ribed before me this	i	20								s	ignature o	of Candid	ate			-
	day of											Printe	d Name				-
My Commission Eve	Signature							_				Ema	il				-
My Commission Exp																	
	МО	D	AY	YR		_			Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period						
FRIENDS FOR JUSTIN BEHRENS	From:	<u>3/27/20</u>	<u>18</u> To:	4/30/2018			
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)	\$	100.00					
TOTAL for the Reporting	\$	100.00					
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)			\$	1,000.00			
TOTAL for the Reporting	Period	(3)	\$	1,000.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting) Period	(4)	\$	0.00			
			<u> </u>				
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			\$	1,100.00			

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					
		F	rom:				
		·		DATE			AMOUNT
Full Name of Contributing Com	mittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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 Candidate

Reporting Period

FRIENDS FOR JUSTIN BEHRENS

From: 3/27/2018 To:

DATE

4/30/2018

AMOUNT

Full Name of Contributor ELAINE AND FRANK SCHMIDT					DAY	YEAR	
Mailing Address 685 BROAD ST							\$ 100.00
City	WEST HAZLETON	State	Zip Code (Plus 4)	4	19	2018	
		PA	18202				

PAGE TOTAL

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

\$ 100.00

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:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOT	AL
Enter Grand Total of Part C on School	dule I, Detailed Sun	nmary 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								
FRIENDS FOR JUSTIN BEHRENS	S FOR JUSTIN BEHRENS From:				<u>3/27/2</u>	018 T	To: 4/30/2018		
			DATE				AMOUNT		
Full Name of Contributor JOHN CHRIN				МО	DAY	YEAR	\$	1,000.00	
Mailing Address 1400 STONES CROSSING RD				2	20	2018	$\overline{\ }$		
City EASTON	State	Zip Code (Plus	s 4)	_	20	-01			
	PA	18045					-		
Employer Name CIRCLE WEALTH MGT				Occupat	ion	PARTNI	≣R		
Employer Mailing Address/Principal Place of Business City State						Zip	Code (Plus 4)		
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ummary Page,	Section	on 3.			\$	PAGE TOTAL 1,000.00	

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				ing Peri	od			
			From:			To:		
		•		E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	'				•			
Futor Curred Total of Doub	For Cabadula I Batailad	Summer Base Se		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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 FOR JUSTIN BEHRENS	From:	3/27/2018 To :	4/30/2018
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)	\$	700.00
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,		\$	700.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Ca	Reporting Period						
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						- \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•				
					Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	ımary Pa	ge,		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 FOR JUSTIN BEHRENS
 From: 3/27/2018
 To: 4/30/2018

						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
HOUSE REPUBLICAN CAMPAIGN COMM.									700.00
Mailing Address 500 N. 3RD S	T FL 4				4	27	2018	\$	700.00
City HARRISBURG	State		e(Plus 4)						
	PA								
Employer of Contributor	-				Occupa	tion			
mployer Mailing Address/Princi	pal Place of Business	Cit	S	tate	Zip (Code(Plus 4)	Descri	otion of	Contribution
							DATA	&	LISTS
Enter Grand Total of Part G o	n Schedule II In-Ki	ind (tions Deta	halic					PAGE TOTAL
Summary Page, Section 3.	ni Schedule II, III K	······································	itions bett	uncu					700.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
	From			То:			
			DATE MO DAY YEAR				AMOUNT
To Whom Paid			мо	YEAR			
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)) Description of Expenditure				
Enter Crand Total of Evnanditures	on Dogg 1 Donowh (Cover Dage Item F					PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report C	Lover Faye, Item L	, .			\$	0.00