

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 : | | 20120140 | | Report Filed By : | | CANDIDATE | | COMMITTEE <input checked="" type="checkbox"/> | | LOBBYIST | | |
| Name of Filing Committee, Candidate or Lobbyist: Friends of Maureen Madden | | | | | | | | | | | | |
| Street Address: PO Box 1186 | | | | | | | | | | | | |
| City: Stroudsburg | | | | | | State: PA | | | Zip Code: 18360 | | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE-PRIMARY | 2. | 30 DAY POST-PRIMARY | 3. X | AMENDMENT REPORT? | Yes | No | <input checked="" type="checkbox"/> | | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5. | 30 DAY POST-ELECTION | 6. | TERMINATION REPORT? | Yes | No | <input checked="" type="checkbox"/> | | |
| | ANNUAL REPORT | 7. | Year 2018 | 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 |
| REPRESENTATIVE IN THE GENERAL ASSEMBLY | | | | | | MO | DAY | YEAR | 115 | STH | DEM | 45 |
| | | | | | | 11 | 6 | 2018 | (SEE INSTRUCTIONS FOR CODES) | | | |
| Summary of Receipts and Expenditures from: | | MO | DAY | YEAR | TO | MO | DAY | YEAR | FOR OFFICE USE ONLY | | | |
| | | 5 | 1 | 2018 | | 6 | 4 | 2018 | | | | |
| A. Amount Brought Forward From Last Report | | | | | | \$ 19,522.12 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | | \$ 1,330.00 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | \$ 20,852.12 | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ 1,924.57 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | \$ 18,927.55 | | | | | | |
| F. Value Of In-Kind Contributions Received (From Schedule II) | | | | | | \$ 0.00 | | | | | | |
| G. Unpaid Debts And Obligations (From Schedule IV) | | | | | | \$ 1,650.00 | | | | | | |

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

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period |
| Friends of Maureen Madden | From: <u>5/1/2018</u> To: <u>6/4/2018</u> |

| | |
|--|-----------|
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | |
| TOTAL for the Reporting Period (1) | \$ 230.00 |

| | |
|--|-----------|
| 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 Period (2) | \$ 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 |

| | |
|---|-------------|
| 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.) | \$ 1,330.00 |
|---|-------------|

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

| | |
|-------------------|------|
| PAGE TOTAL | |
| \$ | 0.00 |

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)**

| | |
|---|--|
| Name of Filing Committee or Candidate Friends of Maureen Madden | Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u> |
|---|--|

| | | | | DATE | | | AMOUNT | |
|--|--|----------|--------------------------------|------|----|-----|--------|-----------|
| Full Name of Contributor Clavertis Miller | | | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 402 Brushy Mountain Rd | | | | | 5 | 10 | 2018 | |
| City East Stroudsburg | | State PA | Zip Code (Plus 4) 183019346 | | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 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: | 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.

| |
|------------|
| PAGE TOTAL |
| \$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 Friends of Maureen Madden | Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u> |
|---|--|

| | | | | DATE | AMOUNT | | |
|---|------------------------|---|--------------------------------|--------------------------------|---|------|------------------|
| Full Name of Contributor | | | | MO | DAY | YEAR | |
| Ali Askari | | | | | | | |
| Mailing Address 5420 Shelbrooke Dr | | | | 5 | 10 | 2018 | \$ 1,000.00 |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183608995 | | | | | |
| Employer Name self | | | | Occupation business man | | | |
| Employer Mailing Address/Principal Place of Business 5420 Shelbrooke Dr | | | City Stroudsburg | State PA | Zip Code (Plus 4) 183608995 | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 1,000.00 |

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 | | | | |
| 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 Maureen Madden | | From: <u>5/1/2018</u> To: <u>6/4/2018</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) | \$ 0.00 |
| 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.) | | | \$ 0.00 |

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

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

| | | | | 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 | | | |
| | | | | From: | | To: | |
| <div> <div>DATE</div> <div>AMOUNT</div> </div> | | | | | | | |
| Full Name of Contributor | | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | | |
| City | State | Zip Code(Plus 4) | | | | | |
| Employer of Contributor | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Business | | City | State | Zip Code(Plus 4) | | Description of Contribution | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | PAGE TOTAL 0.00 | |

SCHEDULE III STATEMENT OF EXPENDITURES

| | |
|--|--|
| Name of Filing Committee or Candidate | Reporting Period |
| Friends of Maureen Madden | From <u>5/1/2018</u> To: <u>6/4/2018</u> |

| DATE | | | | AMOUNT |
|--|-----------------|------------------------------------|--|-----------|
| To Whom Paid Act Blue | MO | DAY | YEAR | |
| Mailing Address 366 Summer St | 5 | 3 | 2018 | \$ 13.45 |
| City Somerville | State MA | Zip Code (Plus 4) 021443132 | Description of Expenditure bank fee | |
| To Whom Paid Act Blue | MO | DAY | YEAR | |
| Mailing Address 366 Summer St | 5 | 23 | 2018 | \$ 100.00 |
| City Somerville | State MA | Zip Code (Plus 4) 021443132 | Description of Expenditure contribution | |
| To Whom Paid Act Blue | MO | DAY | YEAR | |
| Mailing Address 366 Summer St | 5 | 30 | 2018 | \$ 60.00 |
| City Somerville | State MA | Zip Code (Plus 4) 021443132 | Description of Expenditure contribution | |
| To Whom Paid Act Blue | MO | DAY | YEAR | |
| Mailing Address 366 Summer St | 6 | 4 | 2018 | \$ 1.52 |
| City Somerville | State MA | Zip Code (Plus 4) 021443132 | Description of Expenditure bank fee | |
| To Whom Paid Michael Chung | MO | DAY | YEAR | |
| Mailing Address 1111 Dreher Ave | 5 | 21 | 2018 | \$ 50.00 |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183601407 | Description of Expenditure contract work | |

| | | | | | | |
|--|-------------|--------------------------------|---|-----|------|-----------|
| To Whom Paid Citizens Bank | | | MO | DAY | YEAR | \$ 3.00 |
| Mailing Address 812 Main St | | | 5 | 31 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183601602 | Description of Expenditure bank fee | | | |
| To Whom Paid Lucas Debartolo | | | MO | DAY | YEAR | \$ 105.00 |
| Mailing Address 1215 Woodland Dr | | | 5 | 21 | 2018 | |
| City East Stroudsburg | State PA | Zip Code (Plus 4) 183017168 | Description of Expenditure contract work | | | |
| To Whom Paid David Derosa | | | MO | DAY | YEAR | \$ 25.00 |
| Mailing Address 2052 Candlewood Dr | | | 5 | 10 | 2018 | |
| City East Stroudsburg | State PA | Zip Code (Plus 4) 183018528 | Description of Expenditure reimburse sign permit | | | |
| To Whom Paid Dunkin Dounuts | | | MO | DAY | YEAR | \$ 23.88 |
| Mailing Address 529 POCONO Blvd | | | 5 | 16 | 2018 | |
| City Mount Pocono | State PA | Zip Code (Plus 4) 18344 | Description of Expenditure food for poll workers | | | |
| To Whom Paid Lehigh Valley Print Center | | | MO | DAY | YEAR | \$ 524.70 |
| Mailing Address 1701 Union Blvd | | | 5 | 14 | 2018 | |
| City Allentown | State PA | Zip Code (Plus 4) 181091685 | Description of Expenditure printing materials | | | |
| To Whom Paid Lockwood Properties | | | MO | DAY | YEAR | \$ 175.00 |
| Mailing Address PO Box 608 | | | 5 | 31 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183600608 | Description of Expenditure rent | | | |

| | | | | | | |
|--|----------|-----------------------------|---|-----|------|-----------|
| To Whom Paid Melissa Manzoni | | | MO | DAY | YEAR | \$ 70.00 |
| Mailing Address 1170 Surrey Rd Apt 204 | | | 5 | 21 | 2018 | |
| City Philadelphia | State PA | Zip Code (Plus 4) 191154532 | Description of Expenditure contract work | | | |
| To Whom Paid Jacob Meissner | | | MO | DAY | YEAR | \$ 50.00 |
| Mailing Address 515 N 5th St | | | 5 | 16 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183602440 | Description of Expenditure contract work | | | |
| To Whom Paid Jemia Meissner | | | MO | DAY | YEAR | \$ 20.00 |
| Mailing Address 511 N 5th St | | | 5 | 21 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183602440 | Description of Expenditure contract work | | | |
| To Whom Paid ngp van | | | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 3901 Centerview Dr Ste W | | | 5 | 2 | 2018 | |
| City Chantilly | State VA | Zip Code (Plus 4) 201513229 | Description of Expenditure software program | | | |
| To Whom Paid ngp van | | | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 3901 Centerview Dr Ste W | | | 6 | 4 | 2018 | |
| City Chantilly | State VA | Zip Code (Plus 4) 201513229 | Description of Expenditure software program | | | |
| To Whom Paid one & one | | | MO | DAY | YEAR | \$ 9.99 |
| Mailing Address 701 Lee Rd Ste 300 | | | 5 | 9 | 2018 | |
| City Chesterbrook | State PA | Zip Code (Plus 4) 190875612 | Description of Expenditure internet service | | | |

| | | | | | | |
|--|--------------------|---------------------------------------|---|------------|-------------|---------|
| To Whom Paid Paya | | | MO | DAY | YEAR | \$ 1.22 |
| Mailing Address 12120 Sunset Hills Rd Ste 500 | | | 5 | 10 | 2018 | |
| City Reston | State VA | Zip Code (Plus 4) 201905858 | Description of Expenditure bank fee | | | |

| | | | | | | |
|--|--------------------|---------------------------------------|--|------------|-------------|----------|
| To Whom Paid Alex Reinke | | | MO | DAY | YEAR | \$ 70.00 |
| Mailing Address 1305 Brislin Rd | | | 5 | 21 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183606207 | Description of Expenditure contract work | | | |

| | | | | | | |
|------------------------------------|--------------------|---------------------------------------|---|------------|-------------|---------|
| To Whom Paid Starbucks | | | MO | DAY | YEAR | \$ 4.19 |
| Mailing Address 745 Main St | | | 5 | 15 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183602059 | Description of Expenditure meeting beverage | | | |

| | | | | | | |
|--|--------------------|---------------------------------------|---|------------|-------------|-----------|
| To Whom Paid Texas Roadhouse | | | MO | DAY | YEAR | \$ 115.11 |
| Mailing Address 318 Stroud Mall | | | 5 | 16 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183601139 | Description of Expenditure meeting food | | | |

| | | | | | | |
|---------------------------------------|--------------------|---------------------------------------|---|------------|-------------|-----------|
| To Whom Paid Vincent's Deli | | | MO | DAY | YEAR | \$ 186.03 |
| Mailing Address 2885 Route 611 | | | 5 | 17 | 2018 | |
| City Tannersville | State PA | Zip Code (Plus 4) 183727990 | Description of Expenditure poll worker food | | | |

| | | | | | | |
|--------------------------------------|--------------------|---------------------------------------|---|------------|-------------|----------|
| To Whom Paid Weiss Markets | | | MO | DAY | YEAR | \$ 16.48 |
| Mailing Address 1070 N 9th St | | | 5 | 16 | 2018 | |
| City Stroudsburg | State PA | Zip Code (Plus 4) 183601210 | Description of Expenditure supplies | | | |

| | | | | | | |
|--|--|--|--|--|--|-------------------|
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL |
| | | | | | | \$ 1,924.57 |

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 Friends of Maureen Madden | | | | Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u> | | | |
| | | | | | | | Outstanding Balance of Debt |
| | | | | DATE | | | |
| Name of Creditor Maureen Madden | | | | MO | DAY | YEAR | |
| Mailing Address PO Box 1186 | | | | 5 | 1 | 2016 | \$ 1,650.00 |
| City Stroudsburg | State PA | | Zip Code (Plus 4) 183604186 | | Description of Debt loan from candidate for previous expenses | | |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | | | PAGE TOTAL \$ 1,650.00 |