

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 :		20120098		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FLYNN, MARTY FRIENDS OF												
Street Address: 1633 REAR DOROTHY ST												
City: SCRANTON						State: PA			Zip Code: 18504-1107			
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	113	STH	DEM	35
						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						\$ 140,486.47						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 8,750.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 149,236.47						
D. Total Expenditures (From Schedule III)						\$ 2,079.92						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 147,156.55						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 10,000.00						

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
FLYNN, MARTY FRIENDS OF	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)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 800.00
All Other Contributions (Part B)	\$ 1,600.00
TOTAL for the Reporting Period (2)	\$ 2,400.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,350.00
All Other Contributions (Part D)	\$ 4,000.00
TOTAL for the Reporting Period (3)	\$ 6,350.00

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.)	\$ 8,750.00
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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.**

Name of Filing Committee or Candidate				Reporting Period			
FLYNN, MARTY FRIENDS OF				From: <u>5/1/2018</u> To: <u>6/4/2018</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee LACKAWANNA CO DEM COM			MO	DAY	YEAR	\$ 40.00
Mailing Address PO BOX 441			5	3	2018	
City OLYPHANT	State PA	Zip Code (Plus 4) 18447				

Full Name of Contributing Committee Friends of Barb Dixon			MO	DAY	YEAR	\$ 40.00
Mailing Address 1439 Fellows Street			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18504				

Full Name of Contributing Committee Friends of Katie Gilmartin			MO	DAY	YEAR	\$ 80.00
Mailing Address 1525 Capouse Ave			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18509				

Full Name of Contributing Committee Friends of Jerry Notarianni			MO	DAY	YEAR	\$ 40.00
Mailing Address 321 Spruce St			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18503				

Full Name of Contributing Committee IPAL (IRONWORKERS POL ACTION LEAGUE)			MO	DAY	YEAR	\$ 100.00
Mailing Address 981 N PEIFERS LANE			5	17	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 171090000				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
MALADY & WOOTEN PAC						
Mailing Address			5	17	2018	
604 N THIRD ST						
City	HARRISBURG	State				
		PA				
		Zip Code (Plus 4)				
		17101-0000				

Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
DISTRICT COUNCIL 21 PAC							
Mailing Address				5	17	2018	
2980 SOUTHAMPTON RD							
City	PHILADELPHIA	State	Zip Code (Plus 4)				
		PA	19154				

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

PAGE TOTAL
\$ 800.00

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 FLYNN, MARTY FRIENDS OF	Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>
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DATE	AMOUNT
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Full Name of Contributor				MO	DAY	YEAR	\$40.00
Robert Noone							
Mailing Address				5	3	2018	
275 Christopher Dr							
City	Scranton	State	PA	Zip Code (Plus 4)	18504		

Full Name of Contributor			MO	DAY	YEAR	\$ 40.00
Joseph Corcoran						
Mailing Address			5	3	2018	
2102 Comegy's Ave						
City	Scranton	State				
		PA				
		Zip Code (Plus 4)				
		18509				

Full Name of Contributor				MO	DAY	YEAR	\$	40.00
Stepehn Armillay								
Mailing Address				5	3	2018		
409 Harrison Ave								
City		State	Zip Code (Plus 4)					
Taylor		PA	18517					

Full Name of Contributor				MO	DAY	YEAR	\$ 40.00
Colleen Gerrity							
Mailing Address 1226 Bryn Mawr St				5	3	2018	
City	Scranton	State	Zip Code (Plus 4)				
		PA	18504				

Full Name of Contributor			MO	DAY	YEAR	\$ 40.00
Joann Cherkas						
Mailing Address 165 S. Bromley Ave Rear			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18504				

Full Name of Contributor John C. Fletcher			MO	DAY	YEAR	\$ 40.00
Mailing Address 2646 Jackson St			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18504				

Full Name of Contributor Joseph Triano			MO	DAY	YEAR	\$ 100.00
Mailing Address 1467 Oram St			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18504				

Full Name of Contributor Christopher Paris			MO	DAY	YEAR	\$ 100.00
Mailing Address 2 Brenda Ln			5	3	2018	
City Dunmore	State PA	Zip Code (Plus 4) 18512				

Full Name of Contributor John Trently			MO	DAY	YEAR	\$ 80.00
Mailing Address 740 Cherry St			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18505				

Full Name of Contributor James Connors			MO	DAY	YEAR	\$ 40.00
Mailing Address 2630 Birney Ave			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18505				

Full Name of Contributor Gary Pelucacci			MO	DAY	YEAR	\$ 100.00
Mailing Address 1718 Thackery St			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18504				

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
Craig Kujawski						
Mailing Address 2730 Division St			5	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18504				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Maurice Nehme							
Mailing Address				5	3	2018	
307 Center Street							
City	State	Zip Code (Plus 4)					
Taylor	PA	18517					

Full Name of Contributor				MO	DAY	YEAR	\$ 40.00
David J, Solfanelli							
Mailing Address				5	3	2018	
259 S. Keyser Ave							
City	Old Forge	State	PA	Zip Code (Plus 4)	18518		

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Anne McNally							
Mailing Address				5	3	2018	
1132 St Anns St							
City	Scranton	State	Zip Code (Plus 4)				
		PA	18504				

Full Name of Contributor			MO	DAY	YEAR	\$250.00
James Munley						
Mailing Address			5	17	2018	
1009 Lewis Lane						
City	State	Zip Code (Plus 4)				
Clarks Summit	PA	18411				

Full Name of Contributor			MO	DAY	YEAR	\$ 50.00
William Cosgrove						
Mailing Address 2104 N. Maine Ave			5	17	2018	
City Scranton	State PA	Zip Code (Plus 4) 18508				

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

PAGE TOTAL

\$ 1,600.00

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
FLYNN, MARTY FRIENDS OF	From: <u>5/1/2018</u> To: <u>6/4/2018</u>

				DATE			AMOUNT	
Full Name of Contributing Committee EASTERN PA LABORERS LPL				MO	DAY	YEAR	\$ 1,000.00	
Mailing Address 540 GRANGE RD PO BOX 1038				5	3	2018		
City TREXLERTOWN	State PA	Zip Code (Plus 4) 18087-0000						
Full Name of Contributing Committee PSEA-PACE FOR STATE ELECTIONS				MO	DAY	YEAR	\$ 500.00	
Mailing Address 400 N THIRD ST				5	17	2018		
City HARRISBURG	State PA	Zip Code (Plus 4) 17105-1724						
Full Name of Contributing Committee LOCAL 0032BJ PA AMERICAN DREAM FUND				MO	DAY	YEAR	\$ 350.00	
Mailing Address 28 WEST 18TH ST				5	17	2018		
City NEW YORK	State NY	Zip Code (Plus 4) 10011						
Full Name of Contributing Committee CARPENTERS' LEG PROG OF GREATER PA				MO	DAY	YEAR	\$ 500.00	
Mailing Address 650 RIDGE RD STE 200				5	17	2018		
City PITTSBURGH	State PA	Zip Code (Plus 4) 15205-0000						

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

PAGE TOTAL
\$ 2,350.00

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 FLYNN, MARTY FRIENDS OF	Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>
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				DATE			AMOUNT
Full Name of Contributor Steven J. Brunetti				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 416 W. Church St				5	17	2018	
City Archbald	State PA	Zip Code (Plus 4) 18403					
Employer Name Self Employed				Occupation Doctor			
Employer Mailing Address/Principal Place of Business 1800 Mulberry St			City Scranton		State PA	Zip Code (Plus 4) 18510	
Full Name of Contributor William Rinaldi				MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. Box 3972				5	17	2018	
City Scranton	State PA	Zip Code (Plus 4) 18508					
Employer Name Self Employed				Occupation Lawyer			
Employer Mailing Address/Principal Place of Business P.O. Box 3972			City Scranton		State PA	Zip Code (Plus 4) 18508	
Full Name of Contributor Michael Minello				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 115 Echo Dr				5	17	2018	
City Clarks Summit	State PA	Zip Code (Plus 4) 18411					
Employer Name Self Employed				Occupation CPA			
Employer Mailing Address/Principal Place of Business 115 Echo Drive			City Clarks Summit		State PA	Zip Code (Plus 4) 18411	

Full Name of Contributor Thomas DiPietro			MO	DAY	YEAR	\$ 500.00
Mailing Address 104 E. Warren St			5	3	2018	
City Dunmore	State PA	Zip Code (Plus 4) 18512				
Employer Name Depietro's Pharmacy			Occupation Self-Employed			
Employer Mailing Address/Principal Place of Business 104 E Warren St		City Dunmore	State PA	Zip Code (Plus 4) 18512		

Full Name of Contributor Charles Volpe			MO	DAY	YEAR	\$ 500.00
Mailing Address 336 Oakford Rd			5	3	2018	
City Clarks Summit	State PA	Zip Code (Plus 4) 18411				
Employer Name Volpe Insurance			Occupation Self-Employed			
Employer Mailing Address/Principal Place of Business 423 Jefferson Ave		City Scranton	State PA	Zip Code (Plus 4) 18510		

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

PAGE TOTAL
\$ 4,000.00

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:
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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	
FLYNN, MARTY FRIENDS OF		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:
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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.						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
FLYNN, MARTY FRIENDS OF	From <u>5/1/2018</u> To: <u>6/4/2018</u>

DATE				AMOUNT		
To Whom Paid Stirna's Restuarant			MO	DAY	YEAR	\$ 1,229.92
Mailing Address 120 W. Market St			5	1	2018	
City Scranton	State PA	Zip Code (Plus 4) 18508	Description of Expenditure Brunch			
To Whom Paid Lauren Dibileo			MO	DAY	YEAR	\$ 200.00
Mailing Address Tony Dibileo Fundraiser			5	4	2018	
City Scranton	State PA	Zip Code (Plus 4) 18504	Description of Expenditure Donation			
To Whom Paid Morganz Pub			MO	DAY	YEAR	\$ 300.00
Mailing Address 315 Green Ridge Street			5	17	2018	
City Scranton	State PA	Zip Code (Plus 4) 18509	Description of Expenditure Fundraiser			
To Whom Paid Lackawanna County Democratic Party			MO	DAY	YEAR	\$ 350.00
Mailing Address P.O. Box 441			5	29	2018	
City Olyphant	State PA	Zip Code (Plus 4) 18447	Description of Expenditure Donation			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 2,079.92

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 FLYNN, MARTY FRIENDS OF				Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>			
DATE							Outstanding Balance of Debt
Name of Creditor Martin Flynn				MO	DAY	YEAR	\$ 10,000.00
Mailing Address rebecca Ave				6	4	2018	
City Scranton	State PA		Zip Code (Plus 4) 18508		Description of Debt Loan from Candidate		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 10,000.00