

# 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>		2010237		<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> ROSEMARY BROWN FOR STATE REP.												
<b>Street Address:</b> PO BOX 17												
<b>City:</b> TANNERSVILLE						<b>State:</b> PA			<b>Zip Code:</b> 18372			
<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 POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes		No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2018		<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>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	189	STH	REP	45
						11	6	2018	(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>			
		10	23	2018		11	26	2018				
<b>A. Amount Brought Forward From Last Report</b>						\$ 37,267.12						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 8,966.10						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 46,233.22						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 9,055.46						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 37,177.76						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 22,211.78						
<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>
ROSEMARY BROWN FOR STATE REP.	From: <u>10/23/2018</u> To: <u>11/26/2018</u>

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

<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>	\$ 663.15
<b>All Other Contributions (Part B)</b>	\$ 500.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,163.15

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 6,500.00
<b>All Other Contributions (Part D)</b>	\$ 1,251.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 7,751.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 1.95

<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>	\$ 8,966.10
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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>  ROSEMARY BROWN FOR STATE REP.	<b>Reporting Period</b>  <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</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> LEHMAN TOWNSHIP REPUBLICAN CLUB			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 163.15
<b>Mailing Address</b> PO BOX 604			11	23	2018	
<b>City</b> BUSHKILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18324				

<b>Full Name of Contributing Committee</b> PENNSYLVANIA SCHOOL BOARD ASSOC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 400 BENT CREEK BLVD.			11	2	2018	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17050				

<b>Full Name of Contributing Committee</b> POCONO BUILDERS ASSOC. PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 556 MAIN ST			10	29	2018	
<b>City</b> STBG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360				

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

<b>PAGE TOTAL</b>
\$ 663.15

**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> ROSEMARY BROWN FOR STATE REP.	<b>Reporting Period</b> <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</u>
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<b>DATE</b>	<b>AMOUNT</b>
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<b>Full Name of Contributor</b> RUSSELL D. SCOTT III				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 200.00
<b>Mailing Address</b> PO BOX 1067				10	23	2018	
<b>City</b> MARSHALLS CREEK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18335					

<b>Full Name of Contributor</b> JUDY/JAMES ALFIERI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 2103 KNOB HILL CIR.			11	6	2018	
<b>City</b> EAST STBG.	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18302				

<b>Full Name of Contributor</b> SUMAN/RAJ KUMAR KATARA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 135 LARSENS LANE			11	6	2018	
<b>City</b> STBG.	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360				

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

<b>PAGE TOTAL</b>
\$ 500.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  ROSEMARY BROWN FOR STATE REP.	<b>Reporting Period</b>  <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee PA. OPHTHALMOLOGY PAC				MO	DAY	YEAR	\$ 2,000.00
Mailing Address 200 N. THIRD STREET SUITE 1500				10	24	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee MONROE COUNCIL OF REPUBLICAN WOMEN				MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 844				10	25	2018	
City STBG	State PA	Zip Code (Plus 4) 18360					
Full Name of Contributing Committee BARTOS FOR PENNSYLVANIA				MO	DAY	YEAR	\$ 500.00
Mailing Address 239 WINDING WAY				10	29	2018	
City MERION STATION	State PA	Zip Code (Plus 4) 19066					
Full Name of Contributing Committee TOBASH FOR A BETTER 125TH				MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 52				10	29	2018	
City CRESSONIA	State PA	Zip Code (Plus 4) 17929					
Full Name of Contributing Committee ERIE INSURANCE POL. ACTION COM				MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 1699				10	29	2018	
City ERIE	State PA	Zip Code (Plus 4) 16530					

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,500.00
PIKE COUNTY REP. COM.						
Mailing Address			10	29	2018	
PO BOX 391						
City	NEW FOUNDLAND	State				
		PA				
		Zip Code (Plus 4)				
		18445				

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

<b>PAGE TOTAL</b>
\$ 6,500.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  ROSEMARY BROWN FOR STATE REP.	<b>Reporting Period</b>  <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
BHAVNA/MAHESH CHHABRIA							
<b>Mailing Address</b> 104 KRESGO LN.				11	6	2018	\$ 251.00
City STBG	State PA	Zip Code (Plus 4) 18360					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Full Name of Contributor				MO	DAY	YEAR	
JAMES/KARRIE ERTLE							
<b>Mailing Address</b> 181 SILVER SPRINGS BLVD.				11	15	2018	\$ 1,000.00
City KUNKLETOWN	State PA	Zip Code (Plus 4) 18058					
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>
\$ 1,251.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  ROSEMARY BROWN FOR STATE REP.	<b>Reporting Period</b>  <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 1.95
ESSA				10	31	2018	
Mailing Address							
200 PALMER ST							
City		State	Zip Code (Plus 4)	10	31	2018	
STBG		PA	18360				
Receipt Description							
INTEREST							

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

PAGE TOTAL	
\$	1.95

## 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>	
ROSEMARY BROWN FOR STATE REP.		From: <u>10/23/2018</u> To: <u>11/26/2018</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)		\$	248.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	21,963.78
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.)		\$	22,211.78

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

<b>Name of Filing Committee or Candidate</b>  ROSEMARY BROWN FOR STATE REP.	<b>Reporting Period</b>  <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
HRCC							
Mailing Address PO BOX 11787				11	10	2018	\$ 248.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							<b>PAGE TOTAL</b>  \$ 248.00

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

<b>Name of Filing Committee or Candidate</b>  ROSEMARY BROWN FOR STATE REP.	<b>Reporting Period</b>  From: <u>10/23/2018</u> To: <u>11/26/2018</u>
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					DATE		AMOUNT		
Full Name of Contributor MARIO SCAVELLO					MO	DAY	YEAR	\$ 300.00	
Mailing Address FAIRVIEW ST MT POCONO PA					10	30	2018		
City		State		Zip Code(Plus 4)					
Employer of Contributor					Occupation SENATOR				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code(Plus 4)		Description of Contribution NAIL FILES - AD

Full Name of Contributor REPUBLICAN PARTY OF PA.				MO	DAY	YEAR	\$ 5,779.00
Mailing Address 112 STATE ST.				11	8	2018	
City HARRISBURG	State PA	Zip Code(Plus 4) 17101					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution  CAMPAIGN LITERATURE & POSTAGE	

Full Name of Contributor REPUBLICAN PARTY OF PA.				MO	DAY	YEAR	\$ 4,780.00
Mailing Address 112 STATE ST.				11	8	2018	
City HARRISBURG	State PA	Zip Code(Plus 4) 17101					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution  CAMPAIGN LITERATURE & POSTAGE	

<b>Full Name of Contributor</b> REPUBLICAN PARTY OF PA.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 8,460.00
<b>Mailing Address</b> 112 STATE ST.				11	8	2018	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 17101					
<b>Employer of Contributor</b>				<b>Occupation</b>			
<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> CAMPAIGN LITERATURE & POSTAGE		

  

<b>Full Name of Contributor</b> TROOPERS ASSOC. PAC.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 2,644.78
<b>Mailing Address</b> 3625 VARTAN WAY				11	8	2018	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 17110					
<b>Employer of Contributor</b>				<b>Occupation</b>			
<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> PRE ELECTION MAILER		

  

<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>						<b>PAGE TOTAL</b> 21,963.78
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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
ROSEMARY BROWN FOR STATE REP.	From <u>10/23/2018</u> To: <u>11/26/2018</u>

DATE				AMOUNT			
To Whom Paid FIRST NATIONAL BANK OF OMAHA				MO	DAY	YEAR	\$ 287.11
Mailing Address PO BOX 2818				10	24	2018	
City OMAHA		State NE	Zip Code (Plus 4) 681032818	Description of Expenditure EIG CONSTANT CONTACT OTC BRANDS, INC.			
To Whom Paid RED MAVERICK				MO	DAY	YEAR	\$ 900.00
Mailing Address 1426 N. 3RD ST SUITE 310				10	25	2018	
City HARRISBURG		State PA	Zip Code (Plus 4) 17102	Description of Expenditure FACEBOOK DISPLAY ADS			
To Whom Paid RED MAVERICK MEDIA				MO	DAY	YEAR	\$ 1,024.00
Mailing Address 1426 N 3RD ST				11	14	2018	
City HARRISBURG		State PA	Zip Code (Plus 4) 17102	Description of Expenditure DIRECT MAIL & POSTAGE			
To Whom Paid PIKE COUNTY DISPATCH				MO	DAY	YEAR	\$ 1,067.85
Mailing Address 105 WEST CATHARINA ST				10	28	2018	
City MILFORD		State PA	Zip Code (Plus 4) 18337	Description of Expenditure AD			
To Whom Paid NEVERSINK MEDIA				MO	DAY	YEAR	\$ 714.00
Mailing Address 15 NERVERSINK DR.				10	27	2018	
City PORT JARVIS		State NY	Zip Code (Plus 4) 12771	Description of Expenditure AD (RADIO)			

<b>To Whom Paid</b> CONNESSE MEDIA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 639 MAIN ST			10	28	2018	
<b>City</b> STBG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> AD (RADIO)			

<b>To Whom Paid</b> ST JOHN'S LUTHERAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 9 N. 9TH ST			11	3	2018	
<b>City</b> STBG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> DONATION			

<b>To Whom Paid</b> PIKE COUNTY UNITED WAY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 209 E. RAFTIS ST.			11	8	2018	
<b>City</b> MILFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18337	<b>Description of Expenditure</b> EVENT			

<b>To Whom Paid</b> ESSA BANK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 200 PALMER ST.			10	23	2018	
<b>City</b> STBG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Description of Expenditure</b> CHECK ORDER			

<b>To Whom Paid</b> FIRST NATIONAL BANK OF OMAHA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 2818			11	25	2018	
<b>City</b> OMAHA	<b>State</b> NE	<b>Zip Code (Plus 4)</b> 681032818	<b>Description of Expenditure</b> USPS, STAPLES, CAPITAL PROMOTIONS EIG CONSTANT CONTACT, CAMPAIGN			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 9,055.46

