### **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	20120	)140			Repo		<i>'</i> :	CAN	DIE	DATE		COMN	MITTEE	<b>✓</b>	LOE	BYIS	ST	
Name of Filing C	ommittee,	Candida	ite or Lo	obbyist:		MADE	DEN	, MA	UREEN	l FF	RIEND	S OF	FOR S	TATE RE	PRESEN	ITATI	VE		
Street Address:	РО ВО	X 1186																	
City:	STROU	IDSBURG	G						State:		PA			Zip Cod	le: 18	360	_		
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE-	2.		30 DA PRIMA		P	OST-	3. <b>X</b>		AMENDMENT REPORT?		Yes		No	<b>/</b>
(place X to the right of	6TH TUESD PRE-ELECTI		4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA		P	OST-	6.		TERMINA REPORT?		Yes		No	<b>\</b>
report type)	ANNUAL R	EPORT	7.	<b>Year</b> 2019					IG MET CHECK					PAPER		<b>\</b>	DIS	KETTE	
Name of Office S	ought by C	Candidate	e:	-					DATE	OF	ELE	CTIO	N	District Number	Office Code	Pa	rty C	ode Cou	
									МО		DAY	YE	AR						
									1	11		5	2019		(SEE IN	STRUCT	IONS I	OR CODE	S)
Summary of		and	МО	DAY	YEAR				МО		DAY	YI	EAR	FO	R OFFI	CE US	E ON	LY	
Expenditures	from:			5 7	20	019	TC	)		6	1	10	2019						
A. Amount Bro	ught Forwa	rd From	Last R	eport				\$				19,9	970.71						
B. Total Moneta	ary Contrib	utions A	nd Rec	eipts (Fron	n Sche	dule I	()	\$				5,1	161.00						
C. Total Funds	Available (	Sum Of	Lines A	and B)				\$				25,1	131.71						
D. Total Expenditures (From Schedule III)								\$				5,1	.09.82						
E. Ending Cash	Balance (S	Subtract	Line D	From Line	C)			\$				20,0	21.89						
F. Value Of In-	Kind Contri	ibutions	Receive	ed (From S	chedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obli	gations (	(From S	Schedule IV	/)			\$					0.00						
					AFF	IDA\	/IT	SE	CTIO	N									
PART I - If this is		-	•	-															
I swear (or affirm) correct and comple		port, inclu	iding the	attached sc	hedules	filed	on p	aper	or by ele	ectr	onic me	edium	, are to t	he best of	f my knov	wledge	and	belief , 1	rue
Sworn to and subs	cribed before day of	e me this		20						-		S	Signature	of Persoi	n Submit	ting Re	port		_
		Cit					_			-				Print	ted Name	•			-
My Commission Ex	pires	Signature	е							-				Emai	i				_
	M	o	D/	AY	YR					-	Are	a Coc	le	Daytim	e Teleph	one N	umbe	r	
Part II- If this is	a report o	f a candi	idate's	authorized	Comm	ittee,	, Ca	ndid	ate sha	ıll s	ign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge and beli	ief this	politic	al c	omm	ittee has	s no	t violat	ed an	y provisi	ions of the	e act of J	une 3,:	1937	(P.L. 13	33,
Sworn to and subsc		me this											Si	ignature o	of Candida	ate			— <b> </b>
	day of ——													Printe	d Name				_
	Sic	gnature								_									_
My Commission Exp	_	-												Emai	il				
		мо	DA	AY	YR					•	Area	Code		Da	ytime T	elepho	ne Nı	ımber	_

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From:	5/7/2019	<u>)</u> To:	6/10/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	61.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	250.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	4,850.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	4,850.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	0.00
		Т		_
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			\$	5,161.00

#### **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 CandidateReporting PeriodMADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVEFrom: 5/7/2019To: 6/10/2019

DATE AMOUNT

Full Name of Contributing Committee INDEPENDENCE BLUE CROSS PAC (IBC	NDEPENDENCE BLUE CROSS PAC (IBC PAC)					
Mailing Address 1901 MARKET ST				_		\$ 250.00
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191031480	5	9	2019	

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

**PAGE TOTAL \$** 250.00

### 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 Candi	date			Rep	orting P	eriod			
				Fro	m:		To	):	
						DATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus 4)						
								$\overline{}$	

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

**PAGE TOTAL \$**0.00

#### **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	DEN, MAUREEN FRIENDS OF FOR STATE ESENTATIVE  Name of Contributing Committee  A-PACE FOR STATE ELECTIONS		Reporting	Period			
MADDEN, MAUREEN FRIENDS OF FOR S REPRESENTATIVE	TATE		From:	<u>5/</u>	7/2019	То:	6/10/2019
-				DA	TE		AMOUNT
Full Name of Contributing Committee PSEA-PACE FOR STATE ELECTIONS				МО	DAY	YEAR	
Mailing Address 400 N THIRD ST						2010	\$ 4,000.00
City HARRISBURG	State	Zip Code	e (Plus 4)	5	8	2019	
	PA	17105-	1724				
Full Name of Contributing Committee Friends of James Smith				МО	DAY	YEAR	
Mailing Address 80 Broad St							\$ 850.00
City Stroudsburg	State	Zip Code	e (Plus 4)	5	20	2019	
	PA	18360					

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

**PAGE TOTAL \$** 4,850.00

### 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			Rep	orting Pe	riod			
			Fron	n:		To	<b>)</b> :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	PAGE TOTAL
							\$	0.00

## 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Total of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	Section	••			\$	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		
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From:	<u>5/7/2019</u> <b>To:</b>	6/10/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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)	\$	0.00
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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (	Contributions De	etaile	ed				PAGE TOTAL 0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
MADDEN, MAUREEN FRIENDS OF FOR STATE REPRESENTATIVE	From	5/7/2019	То:	6/10/2019

				DATE		AMOUNT
<b>To Whom Paid</b> George Roberts Productions			мо	DAY	YEAR	
Mailing Address 6258 Rt 209 St	te 1		6	7	2019	\$ 75.00
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	<b>Descrip</b> ad prod	otion of Exp	penditure	
<b>To Whom Paid</b> Vantiv			МО	DAY	YEAR	
Mailing Address 8500 Governor	s Hill Dr		5	7	2019	\$ 0.54
<b>City</b> Cincinnati	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Descrip</b> bank fe	otion of Exp ee	penditure	
<b>To Whom Paid</b> Vantiv			МО	DAY	YEAR	
Mailing Address 8500 Governor	s Hill Dr		5	8	2019	\$ 0.54
<b>City</b> Cincinnati	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Descrip</b> bank fe	otion of Exp ee	enditure	
<b>To Whom Paid</b> Vantiv	•	·	МО	DAY	YEAR	
Mailing Address 8500 Governor	s Hill Dr		5	9	2019	\$ 0.54
<b>City</b> Cincinnati	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Descrip</b> bank fe	otion of Exp	penditure	
<b>To Whom Paid</b> Vantiv			МО	DAY	YEAR	
Mailing Address 8500 Governor	s Hill Dr		5	13	2019	\$ 0.54
<b>City</b> Cincinnati	State OH	<b>Zip Code (Plus 4)</b> 45249	<b>Descrip</b> bank fe	l otion of Exp ee	) Denditure	

<b>To Whom Paid</b> Vantiv				МО	DAY	YEAR			
Mailing Address 8500 Governors Hill Dr				6	3	2019	\$		2.50
<b>City</b> Cincinnati		State	Zip Code (Plus 4)	Descrin	tion of Exr	enditure			
Ciricimiaci		ОН	45249		<b>Description of Expenditure</b> bank fee				
To Whom Paid Vantiv			мо	DAY	YEAR				
Mailing Address 8500 Governors Hill Dr			6	5	2019	\$		0.54	
<b>City</b> Cincinnati		State	Zip Code (Plus 4)	Description of Expenditure					
J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		ОН	45249	bank fee					
To Whom Paid Vantiv			МО	DAY	YEAR				
Mailing Address 8500 Governors Hill Dr			6	7	2019	\$		0.54	
<b>City</b> Cincinnati		State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
		ОН	45249	bank fe					
<b>To Whom Paid</b> Vantiv				МО	DAY	YEAR			
Vantiv	8500 Governors Hill	Dr	ı	<b>MO</b> 6	<b>DAY</b> 10	<b>YEAR</b> 2019	\$		1.75
Vantiv  Mailing Address 8	8500 Governors Hill	Dr <b>State</b>	Zip Code (Plus 4)	6		2019	\$		1.75
Vantiv  Mailing Address 8	8500 Governors Hill		<b>Zip Code (Plus 4)</b> 45249	6	10	2019	\$		1.75
Vantiv  Mailing Address 8	8500 Governors Hill	State		6  Descrip	10	2019	\$		1.75
Vantiv  Mailing Address 8  City Cincinnati  To Whom Paid Citizens Bank	8500 Governors Hill	State		6  Description bank fee	10 etion of Exp	2019 penditure	\$		3.00
Vantiv  Mailing Address 8  City Cincinnati  To Whom Paid Citizens Bank  Mailing Address 8	812 Main St	State		6  Description bank fee  MO  5	10 DAY	2019  Penditure  YEAR  2019	\$		
Mailing Address 8  City Cincinnati  To Whom Paid Citizens Bank  Mailing Address 8	812 Main St	State OH	45249	6  Description bank fee  MO  5	10  Ition of Experie  DAY  31	2019  Penditure  YEAR  2019	\$		
Vantiv  Mailing Address 8  City Cincinnati  To Whom Paid Citizens Bank  Mailing Address 8	812 Main St	State OH State	45249  Zip Code (Plus 4)	6  Description MO  5  Description Description MO	10  Ition of Experie  DAY  31	2019  Penditure  YEAR  2019	\$		
Mailing Address 8  City Cincinnati  To Whom Paid Citizens Bank  Mailing Address 8  City Stroudsburg  To Whom Paid Act Blue	812 Main St	State OH State	45249  Zip Code (Plus 4)	6  Description Mo  5  Description bank fee	DAY  31  Stion of Expense	2019  Penditure  YEAR  2019  Penditure	\$		
Mailing Address 8  City Cincinnati  To Whom Paid Citizens Bank  Mailing Address 8  City Stroudsburg  To Whom Paid Act Blue	812 Main St	State OH State	45249  Zip Code (Plus 4)	6  Description MO  5  Description MO  6	DAY  31  Stion of Experience	2019  YEAR  2019  Penditure  YEAR  2019	\$		3.00

						FAGL	13		
To Whom Paid Inner City visions				DAY	YEAR				
Mailing Address 330 Somerset Dr				16	2019	\$	406.10		
East Stroudsburg	State Zip Code (Plus 4) PA 18301				Description of Expenditure contribution				
To Whom Paid Cancer Society				DAY	YEAR				
Mailing Address 2158 WMain St				23	2019	\$	100.00		
Stroudsburg	PA	<b>Zip Code (Plus 4)</b> 18360	<b>Descrip</b> contrib	ription of Expenditure ribution					
To Whom Paid Don Johnson				DAY	YEAR				
Mailing Address 510 THomas St			5	10	2019	\$	350.00		
Stroudsburg	PA	<b>Zip Code (Plus 4)</b> 18360	Description of Expenditure design						
To Whom Paid Keith Drayton				DAY	YEAR				
Mailing Address 124 Broad St			5	7	2019	\$	60.00		
Stroudsburg	PA	<b>Zip Code (Plus 4)</b> 18360	<b>Descrip</b> photogi	otion of Exp raphy	penditure				
To Whom Paid Lehigh Valley Print				DAY	YEAR				
Mailing Address 1701 Union Blvd			5	12	2019	\$	2,199.54		
Allentown	PA	<b>Zip Code (Plus 4)</b> 18109	Description of Expenditure signs						
To Whom Paid Lehigh Valley Print			мо	DAY	YEAR				
Lehigh Valley Print									
Lehigh Valley Print  Mailing Address 1701 Union Blvd			5	13	2019	\$	1,418.85		

							PAGE 14
<b>To Whom Paid</b> Gratz Washenik			мо	DAY	YEAR		
Mailing Address 120 Greenwood Cr				16	2019	\$	369.00
<b>City</b> Tobyhanna	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18466	Description of Expenditure reimburse write in				
<b>To Whom Paid</b> bj wholesale			МО	DAY	YEAR		
Mailing Address 250 Pocono Commons				13	2019	\$	74.19
<b>City</b> Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18360	Description of Expenditure supplies				
To Whom Paid one and one				DAY	YEAR		
Mailing Address 701 Lee Rd Ste 300			5	9	2019	\$	9.99
<b>City</b> Chesterbrook	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19087	Description of Expenditure internet				
To Whom Paid one and one				DAY	YEAR		
Mailing Address 701 Lee Rd Ste 300			6	7	2019	\$	9.99
<b>City</b> Chesterbrook	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19087	Description of Expenditure internet				
To Whom Paid Paradise Twp				DAY	YEAR		
Mailing Address 5912 Paradise Valley Rd				7	2019	\$	25.00
City Cresco	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18326	<b>Descrip</b> permit	otion of Exp			
Enter Grand Total of Expend	itures on Page 1. Po	uport Cover Page Ttem D	•				PAGE TOTAL
Enter Grand Total of Expend	ituics on raye 1, Re	port cover Page, Item D	•			\$	5,109.82