Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion 4002	23			Repor	rt	CANDI	DATE	\checkmark	СС	OMMITTEI		LOB	BYIST	
Number :	100	_			Filed	-									
Name of Filing	Committee, Candio	late or L	obbyist:		BROWI	NE, PA	AT								
Street Address:							_				-				
City:							State:				Zip Cod	e:			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D PRIM	DAY I IARY	POST-	3.		AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRI	E- 5. X	30 D ELEC	DAY I CTION	POST-	6.		TERMINA REPORT?	TION	Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2004	ŀ			ING METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	nte:					DATE O	F ELE			District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEA	R	131	STH	REP	•	39
REPRESENTAT	IVE IN THE GENE	RAL ASS	SEMBLY				11		2	2004	├──	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YEA	R	FO	R OFFIC	E USE	ONLY	
Expenditure	s from:		1 1	L	1	ГО	10	1	.8	2004					
A. Amount Bro	ought Forward Fro	m Last R	leport			4	\$		(29	9.45)]				
B. Total Monet	edule I)	9	\$		1,41	.7.64									
C. Total Funds	Available (Sum O	f Lines A	and B)			5	\$		1,38	8.19					
D. Total Exper	ditures (From Sch	edule II	I)			9	\$		1,41	7.64					
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$		(29	9.45)					
F. Value Of In-	-Kind Contribution	s Receiv	ed (From S	Schedu	le II)		\$			0.00					
G. Unpaid Deb	ts And Obligations	G (From S	Schedule I	V)		9	\$			0.00					
				AFF	IDAV	IT SI	ECTION								
	is a Committee rep														• •
I swear (or affirm correct and comp) that this report, ind lete.	luding the	e attached so	chedule	s filed or	ı papeı	r or by elect	ronic me	edium, a	are to	the best of	my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me thi day of	S	20						Sig	Inatur	e of Person	Submitt	ing Rep	oort	
	Signati	ıre				_					Print	ed Name			
My Commission E	xpires										Email	l			
	мо	D	AY	YR				Are	a Code		Daytime	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	l Comr	nittee, (Candio	date shall	sign he	ere.						
I swear (or affirm No 320) as amend) that to the best of ed.	my knowl	edge and bel	lief this	s political	l comr	nittee has n	ot violat	ed any	provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subs	cribed before me this day of		20							s	ignature o	f Candida	ite		
			-~			_					Printeo	l Name			
My Commission Ex	Signature pires										Emai	1			
	мо		A Y						Code		D-	vtime Te	lanha	o Numb	
	MO	D	AY	YR	t i			Area	coue		ра	ytime Te	reprior	ie itumb	e1

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BROWNE, PAT From: To: 10/18/2004 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 1,417.64 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,417.64 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,417.64 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidat	e		Reporting Period					
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

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 Candidat	e			orting P	eriod			
			Fro	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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 Cand	lidate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	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			Repo	orting Pe	riod			
BROWNE, PAT			Fron	n:		То	: <u>10/18/2004</u>	
				DA	TE		AMOUNT	
Full Name of Contributor PAT BROWNE				мо	DAY	YEAR		
Mailing 1800 LEHIGH PARKWAY EAST							\$ 1,417.64	
City ALLENTOWN	State PA	Zip Code (Plus	; 4)	10	22	2004		
Employer Name COMM OF PA				Occupation LEGISLATOR				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)	
18EN MAIN CAPITOL		HARRISE	URG		РА			
Enter Grand Total of Part C on Sche	dule I, Detailed Su	immary Page,	Sectio	on 3.		4	PAGE TOTAL 5 1,417.64	

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		Report	ting Perio	od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (Plus 4)					
Receipt Description				1	1	1		
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4			PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y Page,	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		
BROWNE, PAT	From:	То:	<u>10/18/2004</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
			From:			То:	
				DATE		АМО	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	,				
Description of Contribution:							
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candi	idate				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	lus 4)						
Employer of Contributor	I		1			Occupat	tion	-		
Employer Mailing Address/Principa Business	l Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
				_						PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
BROWNE, PAT			From			То:	<u>10/18/2004</u>
				DATE			AMOUNT
To Whom Paid PUERTO RICAN CULTURAL ALLIANCE			мо	DAY	YEAR		
Mailing Address FIRE LANE			7	15	2004	\$	90.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18015		ition of Exp L BANFQU		1	
To Whom Paid NORTHAMPTON REPUBLICAN COMMITT	ΈĒ		мо	DAY	YEAR		
Mailing Address 2 BETHLEHEM PLAZ	A		7	19	2004	\$	25.00
CityBETHLEHEMStateZip Code (Plus 4)PA18018			Descrip FUNDR	ition of Exp AISER	benditure		
To Whom Paid LEHIGH COUNTY REPUBLICAN COMMIT	TEE		мо	DAY	YEAR		
Mailing Address 1544 HAMILTON ST	REET		8	9	2004	\$	150.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18102	Descrip FUNDR	ition of Exp AISER	benditure		
To Whom Paid LEHIGH COUNTY REPUBLICAN COMMIT	TEE		мо	DAY	YEAR		
Mailing Address 1544 HAMILTON ST	REET		8	10	2004	\$	20.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18102	Descrip FUNDR	tion of Exp	penditure		
To Whom Paid PERSONALIZED BOOKS GIVEN TO CHII	DREN		мо	DAY	YEAR		
Mailing Address 2334 S. CHURCH ST	REET		8	30	2004	\$	146.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103		ition of Exp ORSHIP	benditure		

To Whom Paid				мо	DAY	YEAR	
NORTHAMPTON	REPUBLICAN COMMITT	EE					
Mailing Address	ROUTE 191			9	24	2004	\$ 100.00
City NAZARE	TH	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	
		РА	18064	FUNDR	AISER		
To Whom Paid WELLER CENTER	2			мо	DAY	YEAR	
Mailing Address	325 NORTHAMPTON	STREET		10	15	2004	\$ 30.00
City EASTON		State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	
		PA	18042	BANQU	ET		
To Whom Paid VALLEY YOUTH I	HOUSE			мо	DAY	YEAR	
Mailing Address	829 LINDEN STREE	Г		10	8	2004	\$ 250.00
City ALLENTO	ALLENTOWN				tion of Ex	penditure	
		PA	18102				
To Whom Paid HUMAN RELATIC	ONS COMMISSION			мо	DAY	YEAR	
Mailing Address							
Mailing Address	435 HAMILTON STR	EET		10	14	2004	\$ 35.00
Mailing Address City ALLENTC		EET State	Zip Code (Plus 4)		14 ption of Exp		35.00
			Zip Code (Plus 4) 18102		tion of Exp		35.00
City ALLENTO		State PA		Descrip	tion of Exp		35.00
City ALLENTO	DWN BUILDING COMMUNITIE	State PA		Descrip BANQU	Dition of Exp	penditure	35.00
City ALLENTO	DWN BUILDING COMMUNITIE 830 HAMILTON STR	State PA		Descrip BANQU MO	Day	YEAR 2004	\$
City ALLENTO	DWN BUILDING COMMUNITIE 830 HAMILTON STR	State PA S EET	18102	Descrip BANQU MO	DAY	YEAR 2004	\$
City ALLENTO	DWN BUILDING COMMUNITIE 830 HAMILTON STR	State PA S EET State PA	18102 Zip Code (Plus 4)	Descrip BANQU MO	DAY	YEAR 2004	\$
City ALLENTO	DWN BUILDING COMMUNITIE 830 HAMILTON STR DWN	State PA ES EET State PA ITTEE	18102 Zip Code (Plus 4)	MO Descrip BANQU 5 Descrip	DAY 26 DAY	yEAR 2004	\$
City ALLENTO	DWN BUILDING COMMUNITIE 830 HAMILTON STR DWN ICAN CAMPAIGN COMM 500 N. THIRD STRE	State PA ES EET State PA ITTEE	18102 Zip Code (Plus 4)	MO MO 9	DAY 26 DAY DAY	YEAR 2004 Denditure YEAR 2004	\$ 150.00

To Whom Paid ALLENTOWN MINI STORAGE Mailing Address 1700 S. 4TH STREET			мо	DAY	YEAR		
			10	22	2004	\$	311.64
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103	Description of Expenditure MAY-OCT STORAGE FOR CAMP.				
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D				\$	PAGE TOTAL 1,417.64
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D				\$	
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D				\$	

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