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	20190	258				Repor Filed	_	CA	NDII	DATE		COM	4ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, (Candida	te or Lo	bbyist:		В	BRANC	O, KE	VIN F	RIEN	NDS O	F							
Street Address:	6003 V	ALLEY F	ORGE	DR															
City:	COOPER	RSBURG	ì						State	e:	PA			Zip Cod	le: 18	036			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FR: PRIMAR		PRE-	2.	30 D/ PRIM		Р	POST- 3.			AMENDMENT REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FR: ELECTION		PRE-	5.	30 D		Р	OST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL RE	PORT	7. X	Year 20)20				NG ME		_			PAPER		√	DISK	ETTE	
Name of Office S	ought by Ca	andidate	e:				-	-	DAT	ΈO	F ELE	CTIC	N	District Number	Office Code	Par	ty Cod	e Cour	
REPRESENTATI	VE IN THE	GENER	ΔΙ Δ S SI	EMRI Y					МО		DAY	YI	EAR	131	STH	DEI	1	39	
REFRESENTATI	VE IN THE	OLIVLIV	AL ASSI	LINDLI						11		3	2020		(SEE INS	TRUCTI	ONS FOI	CODES)
Summary of		and	МО	DAY		YEAR			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	7	
Expenditures	Trom:			1	1	20	19 1	ГО		12		31	2019						
A. Amount Bro	ught Forwai	rd From	Last R	eport				\$					0.00						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 11,975.05																			
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B) \$ 11,975.05																		
D. Total Expend	ditures (Fro	m Sche	dule III	[)				\$	1				176.23						
E. Ending Cash	Balance (Si	ubtract	Line D	From Li	ne C)		\$				11,4	198.82						
F. Value Of In-	Kind Contrib	outions	Receive	ed (Fron	n Scl	hedule	e II)	\$	1				0.00						
G. Unpaid Debt	s And Oblig	ations (From S	chedule	iV)			\$,				0.00		,				
						AFFI	DAV:	IT SE	CTI	NC									
PART I - If this is	a Committe	ee repo	rt, trea	surer si	gn h	ere. If	this i	s a Ca	ndida	te re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		ort, inclu	ding the	attached	d sche	edules 1	filed on	paper	or by	electr	onic m	edium	, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before day of	me this		20								S	Signature	of Perso	n Submitt	ing Re	ort		_
		Signature	e	_				_						Print	ted Name				_
My Commission Ex	pires							_		•				Emai	ı				
	мо)	DA	Υ		YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of	a candi	date's	authoriz	zed C	Commi	ittee, (Candid	late s	halls	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	/ knowle	dge and	belie	f this p	oolitical	comm	ittee l	as no	ot viola	ted ar	y provis	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	з,
Sworn to and subsc		ne this		20									s	ignature o	f Candida	ite			_
-	day of — —			- <u>20</u> - –				_						Printe	d Name				-
	Sigi	nature						_											_
My Commission Exp	ires													Emai	il				
		мо	D#	λΥ		YR		_			Area	Code		Da	ytime Te	elephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	J Period		
BRANCO, KEVIN FRIENDS OF	From:	1/1/201	<u>9</u> To:	12/31/2019
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)			\$	0.00
All Other Contributions (Part B)			\$	2,375.00
TOTAL for the Reporting) Period	(2)	\$	2,375.00
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)			\$	9,600.05
TOTAL for the Reporting	Period	(3)	\$	9,600.05
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	11,975.05

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value	\$2	250.00) in the				
Name of Filing Committee or Candidate			Reporting Period From:			То	:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL										
\$	0.00									

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 Candidat	e	Reporting F	Reporting Period							
BRANCO, KEVIN FRIENDS OF			From:	1/1/	2019 T o	<u>12/31/2019</u>				
				DATE		AMOUNT				
Full Name of Contributor Christine Guro			МО	DAY	YEAR					
Mailing Address 2188 Silver Creek F	Rd					\$ 250.00				
City hellertown	State PA	9	20	2019						
Full Name of Contributor Karen Parker	МО	DAY	YEAR							
Mailing Address 143 Walker drive City Northampton	9	20	2019	\$ 100.00						
Full Name of Contributor Marjorie Hunt		•	МО	DAY	YEAR					
Mailing Address P.O. Box 432						\$ 100.00				
City Springtown	State PA	Zip Code (Plus 4) 18081	9	20	2019					
Full Name of Contributor Margaret K. McDonald			МО	DAY	YEAR					
Mailing Address 2575 Forty Shilling City Coopersburg	9	24	2019	\$ 100.00						
Full Name of Contributor Mark Vallone	МО	DAY	YEAR							
Mailing Address 2521 alpine drive City Hellertown	9	25	2019	\$ 100.00						

							FAGL 5	
Full Name of	f Contributor							
Jeffrey Nowi	ricki			МО	DAY	YEAR		
Mailing Addr	ress 38 North H	Hillside dr					\$ 25	5.00
City Chat	tham	State	Zip Code (Plus 4)	10	3	2019		
		NJ	07928					
Full Name of Rick Story	f Contributor			МО	DAY	YEAR		
Mailing Addr	ress 1888 Mill r	un ct				\$ 250	0.00	
City Helle	ty Hellertown State Zip Code (Plus 4)				5	2019		
riciic	Citowii	PA	18055					
Full Name of Christine Sli	f Contributor ifer	·	мо	DAY	YEAR			
Mailing Address 1961 Delancey st							\$ 100	0.00
City Helle	ertown	State	Zip Code (Plus 4)	10	30	2019		
		PA	18055					
			•					
Full Name of Manny dece	f Contributor eia	·		МО	DAY	YEAR		
	eia	n Drive		МО	DAY		\$ 150	0.00
Manny dece	r ess 1674 Kevir	n Drive State	Zip Code (Plus 4)	мо 10	DAY 20	YEAR 2019	\$ 150	0.00
Manny dece	eia		Zip Code (Plus 4) 18015				\$ 150	0.00
Mailing Addr City Beth	ress 1674 Kevir nlehem f Contributor	State					\$ 150	0.00
Mailing Addr City Beth	ress 1674 Kevin hlehem f Contributor	State PA		- 10 MO	20 DAY	2019 YEAR	\$ 150 \$ 100	
Manny dece Mailing Addr City Beth Full Name of Barry Ander Mailing Addr	ress 1674 Kevir nlehem f Contributor rson ress 412 Eagle	State PA		10	20	2019		
Mailing Addr City Beth Full Name of Barry Ander Mailing Addr	ress 1674 Kevir nlehem f Contributor rson ress 412 Eagle	State PA Drive	18015	- 10 MO	20 DAY	2019 YEAR		
Manny dece Mailing Addr City Beth Full Name of Barry Ander Mailing Addr City Blance	ress 1674 Kevir nlehem f Contributor rson ress 412 Eagle ndon	State PA Drive State	18015 Zip Code (Plus 4)	- 10 MO	20 DAY	2019 YEAR		
Mailing Addr City Beth Full Name of Barry Ander Mailing Addr City Bland	ress 1674 Kevir nlehem f Contributor rson ress 412 Eagle ndon f Contributor an	State PA Drive State PA	18015 Zip Code (Plus 4)	мо 10 мо	20 DAY 30	2019 YEAR 2019		0.00
Manny dece Mailing Addr City Beth Full Name of Barry Ander Mailing Addr City Bland Full Name of Jack Sassma Mailing Addr Add	ress 1674 Kevir nlehem f Contributor rson ress 412 Eagle ndon f Contributor an	State PA Drive State PA	18015 Zip Code (Plus 4)	- 10 MO	20 DAY 30	2019 YEAR 2019	\$ 100	1.00
Manny dece Mailing Addr City Beth Full Name of Barry Ander Mailing Addr City Bland Full Name of Jack Sassma Mailing Addr Add	ress 1674 Kevir nlehem f Contributor rson ress 412 Eagle ndon f Contributor an	State PA Drive State PA	Zip Code (Plus 4) 19510	мо 10 мо	20 DAY 30	2019 YEAR 2019	\$ 100	1.00

						TAGE 0
Full Name of Contributor Dodd Lamberton			мо	DAY	YEAR	
Mailing Address 4475 founde	rs drive		1.0		2010	\$ 50.00
City Center Valley	State PA	Zip Code (Plus 4) 18034	12	11	2019	
Full Name of Contributor Evan Chromczak			МО	DAY	YEAR	
Mailing Address 3826 King Si				\$ 250.00		
City alexandria	alexandria State VA 2ip Code (Plus 4) 22302					
Full Name of Contributor Michael Schlossberg		МО	DAY	YEAR		
Mailing Address 944 North 19	9th st					\$ 250.00
City allentown	State PA	Zip Code (Plus 4) 18104	12	11	2019	
Full Name of Contributor George Torrella			МО	DAY	YEAR	
Mailing Address 2408 Bethlel City Bethlehem	State	Zip Code (Plus 4) 18015	12	11	2019	\$ 250.00
Full Name of Contributor julianne gallagher	мо	DAY	YEAR			
Mailing Address 3140 muirfield rd City coopersburg State Zip Code (Plus 4) PA 18036				1	2019	\$ 100.00
		10030				PAGE TOTAL

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

PAGE TOTAL \$ 2,375.00

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.

lame of Filing Committee or Candidate		Reporting Period						
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Sur	nmary P	age, Sectio	n 3.			\$	0.00

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 Co	ommittee or Candidate				Rep	orting Pe	riod					
BRANCO, KEVIN	I FRIENDS OF				Fror	n:	<u>1/1/2</u>	019 T o) :	: <u>12/31/2019</u>		
						DA	ATE		AM	10UNT		
Full Name of Con	tributor											
Martin Gould						МО	DAY	YEAR				
Mailing Address	P.O. Box 3200								\$	1,000.00		
City Sag harb	or	State	Zip	Code (Plus	(4)	9	25	2019	'			
July 114.12	.	NY	119	63								
Employer Name	tzell Travel					Occupat	t ion t	ravel ag	gent			
Employer Mailing Business	Address/Principal Plac	ce of		City			State		Zip Code	e (Plus 4)		
1633 broadway New York				NY		10019						
Full Name of Con	Full Name of Contributor						DAY	VEAD				
Kenneth Rampol	la					МО	DAY	YEAR				
Mailing Address	1858 Springwood rd								\$	1,000.00		
City Bethlehe	m	State	Zip	Code (Plus	4)	9	30	2019	'			
		PA	180	15								
Employer Name	RMI					Occupation CEO						
Employer Mailing Business	Address/Principal Place	ce of		City			State		Zip Code	e (Plus 4)		
782 Main Street				hellertow	n		PA		18055			
Full Name of Con	tributor											
Kenny Rampolla						МО	DAY	YEAR				
Mailing Address	720 Buttermilk Rd								\$	300.00		
City Hellertow	/n	State	Zip	Code (Plus	4)	9	30	2019	'			
		PA	180	55								
Employer Name RMI				Occupation Sales								
Employer Mailing Address/Principal Place of Business City				State Zip Code (Plus			e (Plus 4)					
782 Main Street						PA 18055						

Full Name of Contri Andy Lee	ibutor				мо	DAY	YEAR			
Mailing 4 Address	30 Main Steet							\$	500.00	
City Hellertown		State	Zip	Code (Plus 4)	10	3	2019			
Tiellertown		PA	18	055						
Employer Name B	Braveheart pub				Occupat	ion C)wner			
Employer Mailing Ad Business	ddress/Principal Place	e of		City		State		Zip Code (Plus 4)	
430 Main Street				hellertown		PA		18055		
Full Name of Contri	ibutor									
David Heintzelman					МО	DAY	YEAR			
Mailing Address	326 Main Street							\$	1,000.00	
City hellertown		State	Zip	Code (Plus 4)	10	5	2019			
		PA	18	055						
Employer Name Heintzelman Funeral Home						Occupation Owner				
Employer Mailing Address/Principal Place of City Business					State Zip Code (Plus			Plus 4)		
326 Main Street				Hellertown		PA		18055		
Full Name of Contri	ibutor				МО	DAY	YEAR			
Mike Eshleman								Ц		
Mailing Address	27 constitution ave						2010	\$	1,000.05	
City Hellertown		State	Zip	Code (Plus 4)	10	28	2019			
		PA	18	055						
Employer Name	1 and J outdoor service	ces			Occupation self employed					
Employer Mailing Ad Business	ddress/Principal Place	e of		City	1	State	T	Zip Code (Plus 4)	
327 Constitution av	ve			Hellertown		PA		18055		
Full Name of Contri James Martin	ibutor				мо	DAY	YEAR			
Mailing Address	3737 Colins ave							\$	1,500.00	
City Miami Beac	ity Miami Beach State Zip Code (Plus 4)				11	25	2019			
FL 33140										
Employer Name Buckwampum Farm				Occupation self employed						
Employer Mailing Address/Principal Place of City			1	State		Zip Code (Plus 4)			
Business 6145 rt-412 reiglesville					PA		18077			
<u> </u>										

							PAGE 10		
Full Name of Contributor				мо	DAY	YEAR			
James Martin				1-10					
Mailing 3737 Colins ave							\$ 1,500.00		
City Miami Beach	State	Zij	Code (Plus 4)	12	26	2019	9		
	FL	33	140						
Employer Name Buckwampum Farm				Occupation self employed					
Employer Mailing Address/Principal Plac Business	e of		City		Zip Code (Plus 4)				
6145 rt-412 reiglesville					PA		18077		
Full Name of Contributor		МО	DAY	YEAR					
joe brookes	MO	DAI	ILAN						
Mailing 1341 High point rd		,	201/	\$ 1,500.00					
City coopersburg	State	Zij	Code (Plus 4)	11	3	2019	9		
	PA	18	036						
Employer Name tower health				Occupation nurse					
Employer Mailing Address/Principal Plac Business	e of		City	State Zip Code (Plu			Zip Code (Plus 4)		
420 south 5th ave			west reading	PA 19611			19611		
Full Name of Contributor				МО	DAY	YEAR			
kyle gallagher				МО	DAT	ILAR			
Mailing 3140 muirfield rd				10	_	201	\$ 300.00		
City center valley	State	Zij	Code (Plus 4)	12	1	2019	9		
	PA	18	034						
Employer Name US Pipe					c ion	elf em	ployed		
Employer Mailing Address/Principal Place of Business City			City		State		Zip Code (Plus 4)		
4624 sunset dr coopersburg				PA		18036			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect						Ī	PAGE TOTAL		

9,600.05

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 Can	Name of Filing Committee or Candidate			Reporting Period				
			From:			To:		
				D	ATE			AMOUNT
Full Name		-		мо	DAY	YEAR		-
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description								
Enter Grand Total of Part E on S	Schedule I Detailer	d Summary Page	Section	4		[P	PAGE TOTAL
zne. Grana rotar or r art z on o	renedure 1/ Detaned	· Summary rage,	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	I	
BRANCO, KEVIN FRIENDS OF	From:	<u>1/1/2019</u> To:	<u>12/31/2019</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candidate			Reporting	g Period	Period				
			From:			To:			
				DATE			AMOUNT		
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL		
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL		
						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting	Period				
					Fro	om:		То	:		
					•		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address								\$	0.00		
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•					Occupa	ation				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Desc	cript	ion of	f Contribution
Enter Grand Total of Part G on Sci Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed					PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
BRANCO, KEVIN FRIENDS OF	From	1/1/2019	То:	12/31/2019

						AMOUNT
To Whom Paid actblue			мо	DAY	YEAR	
Mailing Address P.O. Box 441146			10	1	2019	\$ 31.50
City Somerville	Somerville State Zip Code (Plus 4) MA 02144-0031			tion of Exp	penditure	
To Whom Paid actblue			МО	DAY	YEAR	
Mailing Address P.O. Box 441146			11	1	2019	\$ 31.89
City Somerville	State MA	Zip Code (Plus 4) 02144-0031	Descrip service	tion of Exp		
To Whom Paid actblue			мо	DAY	YEAR	
Mailing Address P.O. Box 441146			12	1	2019	\$ 7.50
City Somerville	State Zip Code (Plus 4) MA 02144-0031			tion of Exp	penditure	
To Whom Paid actblue			МО	DAY	YEAR	
Mailing Address P.O. Box 441146			12	31	2019	\$ 6.38
City Somerville	State MA	Zip Code (Plus 4) 02144-0031	Descrip service	otion of Exp		
To Whom Paid squarespace.com			МО	DAY	YEAR	
Mailing Address 8 clarkson st			11	15	2019	\$ 228.96
City New York	State NY	Zip Code (Plus 4) 10014		tion of Exp hosting	enditure	

						PAGE 16
To Whom Paid Lead PA			мо	DAY	YEAR	
Mailing Address P.O. Box 22	2588		10	1	2019	\$ 170.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Ex	enditure	
	PA	19110	ready t	o lead trai	ning	
	,	I				PAGE TOTAL
Enter Grand Total of Expend	litures on Page 1, Re	eport Cover Page, Item D	•			\$ 476.23