

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: 1520 ORAM ST									
City: SCRANTON				State: PA		Zip Code: 18507			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	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 2020	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
				MO	DAY	YEAR	113		DEM
				11	3	2020	(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:				MO	DAY	YEAR	FOR OFFICE USE ONLY		
				1	1	2020			
A. Amount Brought Forward From Last Report				\$		181,195.20			
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		11,606.19			
C. Total Funds Available (Sum Of Lines A and B)				\$		192,801.39			
D. Total Expenditures (From Schedule III)				\$		21,340.73			
E. Ending Cash Balance (Subtract Line D From Line C)				\$		171,460.66			
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00			
G. Unpaid Debts And Obligations (From Schedule IV)				\$		1,700.00			

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>1/1/2020</u> To: <u>5/18/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 56.19

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)	\$ 7,300.00
All Other Contributions (Part D)	\$ 4,000.00
TOTAL for the Reporting Period (3)	\$ 11,300.00

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.)	\$ 11,606.19
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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 FLYNN, MARTY FRIENDS OF	Reporting Period From: <u>1/1/2020</u> To: <u>5/18/2020</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee HEALTH PARTNERS PLANS PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 901 MARKET ST, SUITE 500			1	16	2020	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107-0000				

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

PAGE TOTAL
\$ 250.00

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>1/1/2020</u> To: <u>5/18/2020</u>

DATE				AMOUNT
Full Name of Contributing Committee				
AQUA AMERICA INC H2O PAC (FEDERAL PAC)				
Mailing Address 762 W LANCASTER AVE				
City BRYN MAWR	State PA	Zip Code (Plus 4) 19010-3489		
	1	16	2020	\$ 500.00
Full Name of Contributing Committee				
PA OPTOMETRIC PAC				
Mailing Address 218 NORTH ST				
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-0000		
	1	16	2020	\$ 500.00
Full Name of Contributing Committee				
DUANE MORRIS GOVT COM				
Mailing Address 30 SOUTH 17TH ST				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103-4196		
	1	16	2020	\$ 500.00
Full Name of Contributing Committee				
TAYLOR, ROBERT S. (LOB)				
Mailing Address PO BOX 6349				
City HARRISBURG	State PA	Zip Code (Plus 4) 17112		
	3	19	2020	\$ 500.00
Full Name of Contributing Committee				
PAW-PAC				
Mailing Address 800 W. Hersheypark Dr				
City Hershey	State PA	Zip Code (Plus 4) 17033		
	3	19	2020	\$ 500.00

Full Name of Contributing Committee LAWPAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 212 N Broad St			3	19	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee PAMIC PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address 1017 MUMMA RD STE 103			3	19	2020	
City WORMLEYSBURG	State PA	Zip Code (Plus 4) 170430000				
Full Name of Contributing Committee DENTONS COHEN AND GRIGSBY PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 625 LIBERTY AVE			3	27	2020	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222-3152				
Full Name of Contributing Committee PA REALTORS PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 500 NORTH 12TH STREET			4	24	2020	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043				
Full Name of Contributing Committee PA MEDICAL PAC (PAM PAC)			MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. BOX 8820			4	24	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 171050000				
Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)			MO	DAY	YEAR	\$ 500.00
Mailing Address 319 N FRONT ST			4	24	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee LOCAL 0690 PLUMBERS UNION POL ACTION FUND			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2791 SOUTHAMPTON ROAD			4	24	2020	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191540000				
Full Name of Contributing Committee PAA PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1925 North Front Street			4	24	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17105				
Full Name of Contributing Committee PAA PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1925 North Front Street			4	24	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17105				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						PAGE TOTAL \$ 7,300.00

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>1/1/2020</u> To: <u>5/18/2020</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Thomas DiPietro					
Mailing Address 104 E. Warren Street	1	31	2020	\$	4,000.00
City Dunmore State PA Zip Code (Plus 4) 18512					
Employer Name DiPietro's Pharmacy	Occupation Pharmacist				
Employer Mailing Address/Principal Place of Business 104 E. Warren Street	City Dunmore		State PA	Zip Code (Plus 4) 18512	

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:

			DATE		AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
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>1/1/2020</u> To: <u>5/18/2020</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 RECIEVED - 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>1/1/2020</u> To: <u>5/18/2020</u>

DATE				AMOUNT		
To Whom Paid Goodfella's Pizza			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 1210 Mulberry St			4	24	2020	
City Scranton	State PA	Zip Code (Plus 4) 18510	Description of Expenditure Pizza Donation for Essential Employees			
To Whom Paid Mendola & Associates			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1109 Taylor Ave			4	2	2020	
City Dunmore	State PA	Zip Code (Plus 4) 18510	Description of Expenditure Professional Services			
To Whom Paid Friends of Harold Hayes			MO	DAY	YEAR	\$ 475.00
Mailing Address 2148 Andrea Dr			3	12	2020	
City Bensalem	State PA	Zip Code (Plus 4) 19020	Description of Expenditure Contribution			
To Whom Paid Powell for PA			MO	DAY	YEAR	\$ 50.00
Mailing Address 527 Linden St			2	23	2020	
City Scranton	State PA	Zip Code (Plus 4) 18503	Description of Expenditure Breakfast Fundraiser			
To Whom Paid Minooka Little League			MO	DAY	YEAR	\$ 100.00
Mailing Address 300 Walsh St			2	29	2020	
City Scranton	State PA	Zip Code (Plus 4) 18505	Description of Expenditure Donation			

To Whom Paid Friends of Bill Fox			MO	DAY	YEAR	\$ 100.00
Mailing Address Unknown			2	21	2020	
City Scranton	State PA	Zip Code (Plus 4) 18503	Description of Expenditure Contribution			

To Whom Paid K. C. Strategies			MO	DAY	YEAR	\$ 3,426.29
Mailing Address Unknown			2	25	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Mailer			

To Whom Paid St Patricks Parade Association			MO	DAY	YEAR	\$ 150.00
Mailing Address PO Box 25			2	29	2020	
City Scranton	State PA	Zip Code (Plus 4) 18501	Description of Expenditure Sponsorship			

To Whom Paid LCFDW			MO	DAY	YEAR	\$ 100.00
Mailing Address Unknown			1	30	2020	
City Scranton	State PA	Zip Code (Plus 4) 18503	Description of Expenditure Donation			

To Whom Paid American Cancer Society			MO	DAY	YEAR	\$ 150.00
Mailing Address 1300 Old Plank Rd			1	26	2020	
City Mayfield	State PA	Zip Code (Plus 4) 18433	Description of Expenditure Donation			

To Whom Paid Joe Kennedy for MA			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 15			2	2	2020	
City Boston	State MA	Zip Code (Plus 4) 02137	Description of Expenditure Contribution			

To Whom Paid Nunzi's Advertising			MO	DAY	YEAR	\$ 1,300.00
Mailing Address 1618 N Main Ave			2	17	2020	
City SCRANTON	State PA	Zip Code (Plus 4) 18509	Description of Expenditure Campaigning Items			

To Whom Paid Advantage Pep, LLC			MO	DAY	YEAR	\$ 250.00
Mailing Address 2285 Schoenersville Rd			1	30	2020	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure Campaign Consulting			

To Whom Paid Cookies for Kids Cancer			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 415			1	28	2020	
City Califon	State NJ	Zip Code (Plus 4) 07830	Description of Expenditure Donation			

To Whom Paid West Scranton HS Cheerleading			MO	DAY	YEAR	\$ 150.00
Mailing Address 1201 Luzerne St			1	27	2020	
City Scranton	State PA	Zip Code (Plus 4) 18504	Description of Expenditure Donation			

To Whom Paid Nunzi's Advertising			MO	DAY	YEAR	\$ 5,800.00
Mailing Address 1618 N Main Ave			1	10	2020	
City SCRANTON	State PA	Zip Code (Plus 4) 18508	Description of Expenditure Golf Fundraiser Gifts			

To Whom Paid Deluxe Checks			MO	DAY	YEAR	\$ 39.44
Mailing Address Unknown			1	22	2020	
City SCRANTON	State PA	Zip Code (Plus 4) 18509	Description of Expenditure Check Printing Fees			

To Whom Paid WOLFPAC			MO	DAY	YEAR	
Mailing Address 6230 Wilshire Blvd			1	8	2020	
City Los Angeles	State CA	Zip Code (Plus 4) 90048	Description of Expenditure Contribution			

To Whom Paid Marty B. Flynn			MO	DAY	YEAR	
Mailing Address Oram St			1	29	2020	
City Scranton	State PA	Zip Code (Plus 4) 18505	Description of Expenditure Loan Repayment to Candidate			

To Whom Paid Friends of Kyle Mullins			MO	DAY	YEAR	
Mailing Address Unknown			1	3	2020	
City Peckville	State PA	Zip Code (Plus 4) 18452	Description of Expenditure Contribution			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 21,340.73

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>1/1/2020</u> To: <u>5/18/2020</u>			
							Outstanding Balance of Debt
				DATE			
Name of Creditor Marty B Flynn				MO	DAY	YEAR	
Mailing Address Oram St				5	18	2020	\$ 1,700.00
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 \$ 1,700.00