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 :		Report			ITTEE	ITTEE / L		BYIST								
Name of Filing C	ommittee, Can	didate or L	obbyist:	В	RANCO), KE\	VIN FRIE	NDS O	F							
Street Address:																
City:	COOPERSB	URG					State:	PA			Zip Cod	de: 18	8036			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	E-	2. X	30 DA		POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPO	RT 7.	Year 2020				NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	ought by Candi	date:			-		DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
DEDDE 051/T1T	\		EMBLY.				МО	DAY	YE	AR	131	STH	DEN	1	39	
REPRESENTATI	VE IN THE GEN	IERAL ASS	EMBLY				11		3	2020		(SEE IN:	STRUCTIO	ONS FOR C	ODES)	
Summary of		МО	DAY YEA	\R			МО	DAY	YI	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures	trom:		3 10	202	20 T	0	5		18	2020						
A. Amount Bro	ught Forward F	rom Last R	eport			\$			12,2	243.88						
B. Total Moneta	ary Contribution	ns And Rec	eipts (From Sch	edu	ule I)	\$			1,7	729.67						
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			13,9	73.55						
D. Total Expend	ditures (From S	chedule II	I)			\$			2,2	257.20						
E. Ending Cash	Balance (Subtr	act Line D	From Line C)			\$			11,7	16.35						
F. Value Of In-	Kind Contributi	ons Receiv	ed (From Sched	ule	· II)	\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From S	Schedule IV)			\$				0.00						
			AF	FΙ	DAVI	T SE	CTION									
PART I - If this is	a Committee r	eport, trea	surer sign here	. If	this is	a Car	ndidate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and complete		including the	e attached schedul	es f	iled on	paper	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me day of	this	20						S	ignature	of Perso	n Submitt	ting Rep	ort		_
	Sign	ature				- -					Prin	ted Name	<u> </u>			-
My Commission Ex	-										Ema	il				-
	мо	D	AY Y	R				Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized Com	mit	ttee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief th	is p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc		nis								s	ignature (of Candida	ate			-
	day of ————————————————————————————————————					-					Printe	ed Name				-
	Signatu	re				-										_
My Commission Exp	ires										Ema	il				
	МО	D	AY Y	/R		•		Area	Code		D	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BRANCO, KEVIN FRIENDS OF	From:	3/10/202	<u>:0</u> To:	<u>5/18/2020</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	1,176.81
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	150.00
All Other Contributions (Part B)			\$	402.86
TOTAL for the Reporting	g Period	(2)	\$	552.86
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)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			1	
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			\$	1,729.67

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	Reporting	Period		
BRANCO, KEVIN FRIENDS OF	From:	3/10/2020	То:	5/18/2020
		DATE		AMOUNT

Full Na	Full Name of Contributing Committee						VEAD	
UPPER	UPPER PERK DEMOCRATS-AREA2					DAY	YEAR	
Mailing Address				7	Q	2020	\$ 150.00	
City	GREENLANE	State		Zip Code (Plus 4)	,		2020	
		PA		18054-0000				

PAGE TOTAL150.00

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

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 Candida	te		Rep	oorting P	eriod				
BRANCO, KEVIN FRIENDS OF			Fro	m:	3/10/2	2020 T o):	<u>5/18/2020</u>	
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Patricia Bruno									
Mailing Address							\$	100.00	
City Easton	State	Zip Code (Plus 4)	4	16	2020			
	PA	18042							
Full Name of Contributor				мо	DAY	YEAR			
Thomas Montesano									
Mailing Address	•	•					\$	100.00	
City Emmaus	State	Zip Code (Plus 4)	5	18	2020			
	PA	18049							
Full Name of Contributor				мо	DAY	YEAR			
Elizabeth VanVleck					57(1				
Mailing Address							\$	142.86	
City Philadelphia	State	Zip Code (Plus 4)	5	18	2020			
	PA	19118							
Full Name of Contributor				мо	DAY	YEAR			
Elizabeth Williams				МО	DAI	ILAK			
Mailing Address							\$	60.00	
City Alamogordo	State	Zip Code (Plus 4)	5	18	2020			
	NM	88310							
	•					•			

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

PAGE TOTAL \$ 402.86

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary Pa	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 Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	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 Candidate		Report	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	'	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	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 Perio	od	
BRANCO, KEVIN FRIENDS OF	From:	3/10/2020 To :	<u>5/18/2020</u>
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	TF)		
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 Car	Name of Contributor				Reporting Period					
			From:			To	:			
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						7 \$		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•		•				
					-					
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•		
Section 2.						\$	(0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
BRANCO, KEVIN FRIENDS OF	From	3/10/2020	То:	<u>5/18/2020</u>

				DATE			AMOUNT		
To Whom Paid			МО	DAY	YEAR				
actblue			МО	DAI	ILAK				
Mailing Address			4	1	2020	\$	8.27		
City Somerville, MA 02144-0031	State	Zip Code (Plus 4)	Description of Expenditure						
	MA	02144-0031	service fee						
To Whom Paid				DAY	YEAR				
act blue			МО		ILAK				
Mailing Address			5	1	2020	\$	5.96		
City Somerville	State	Zip Code (Plus 4)	Description of Expenditure						
	MA	02144-0031	service fee						
To Whom Paid			мо	DAY	YEAR				
actblue									
Mailing Address			5	18	2020	\$	12.97		
City Somerville	State	Zip Code (Plus 4)	Description of Expenditure						
	MA	02144-0031	service fees						
To Whom Paid			мо	DAY	YEAR				
Advantage PEP, LLC									
Mailing Address			4	27	2020	\$	1,400.00		
City Easton	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	14042	management apr and may						
To Whom Paid			мо	DAY	YEAR				
The Breakthrough Company			M		ILAK				
Mailing Address			4	11	2020	\$	830.00		
City astoria	State	Zip Code (Plus 4)	Description of Expenditure						
	NY	11105	palm card design and print						
							PAGE TOTAL		
Enter Grand Total of Expenditures	on Page 1, Re	port Cover Page, Item D	-			\$	2,257.20		
						L			