

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 : 20190255		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: BROWN, MARGIE FRIENDS OF									
Street Address: 106 SUMAR RD									
City: ST. MARYS					State: PA		Zip Code: 15857		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2020	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate: SENATOR IN THE GENERAL ASSEMBLY					DATE OF ELECTION			District Number	Office Code
					MO	DAY	YEAR	25	STS
					11	3	2020		DEM
								24	
								(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR
		5	19	2020			6	22	2020
FOR OFFICE USE ONLY									
A. Amount Brought Forward From Last Report					\$ 2,511.58				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 1,632.00				
C. Total Funds Available (Sum Of Lines A and B)					\$ 4,143.58				
D. Total Expenditures (From Schedule III)					\$ 84.66				
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 4,058.92				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00				

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
BROWN, MARGIE FRIENDS OF	From: <u>5/19/2020</u> To: <u>6/22/2020</u>

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)	\$ 632.00
TOTAL for the Reporting Period (2)	\$ 632.00

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)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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.)	\$ 1,632.00
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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 Candidate BROWN, MARGIE FRIENDS OF	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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DATE	AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$ 20.00
Ronald mcGonigle						
Mailing Address			5	19	2020	
403 Bolivar Dr						
City	State	Zip Code (Plus 4)				
Bradford	PA	16701				

Full Name of Contributor			MO	DAY	YEAR	\$	25.00
Sean McLaughlin							
Mailing Address			5	21	2020		
23 Gates Hollow							
City	Bradford	State	Zip Code (Plus 4)				
		PA	16701				

Full Name of Contributor				MO	DAY	YEAR	\$25.00
Joshua Catalano							
Mailing Address				5	21	2020	
660 Hall Avenue		State	Zip Code (Plus 4)				
City	St. Marys	PA	15857				

Full Name of Contributor				MO	DAY	YEAR	\$25.00
Marléne Lang							
Mailing Address				5	22	2020	
7 Liberty Street							
City	Rixford	State	PA	Zip Code (Plus 4)	16745		

Full Name of Contributor			MO	DAY	YEAR	\$ 50.00
Dave Cardellino						
Mailing Address			5	25	2020	
28 Keeney Mtn. Ln						
City	State	Zip Code (Plus 4)				
Cross Fork	PA	17729				

Full Name of Contributor LEROY REIST II			MO	DAY	YEAR	\$ 100.00
Mailing Address 1292 STONY FORK RD			5	25	2020	
City Wellsboro	State PA	Zip Code (Plus 4) 16901				

Full Name of Contributor Stephanie White			MO	DAY	YEAR	\$ 100.00
Mailing Address 311 Ridgewood rd			5	30	2020	
City Shipperville	State PA	Zip Code (Plus 4) 16254				

Full Name of Contributor Stanley McCoy			MO	DAY	YEAR	\$ 50.00
Mailing Address 11 Clapp St			6	1	2020	
City Easthampton	State MA	Zip Code (Plus 4) 01027				

Full Name of Contributor Jay Smith			MO	DAY	YEAR	\$ 2.00
Mailing Address 50 Williams St			6	2	2020	
City Bradford	State PA	Zip Code (Plus 4) 16701				

Full Name of Contributor Blake Cohen			MO	DAY	YEAR	\$ 50.00
Mailing Address 823 Bellefonte Ave			6	3	2020	
City Lock Haven	State PA	Zip Code (Plus 4) 17745				

Full Name of Contributor Lori Elias			MO	DAY	YEAR	\$ 25.00
Mailing Address 26 Larkspur Ln			6	5	2020	
City Ridgway	State PA	Zip Code (Plus 4) 15853				

Full Name of Contributor Stephanie Farrell				MO	DAY	YEAR	\$ 10.00
Mailing Address PO Box 13				6	16	2020	
City Rew	State PA	Zip Code (Plus 4) 16744					

Full Name of Contributor Peter Colomaio				MO	DAY	YEAR	\$ 25.00
Mailing Address 617 Bolivar Dr				6	18	2020	
City Bradford	State PA	Zip Code (Plus 4) 16701					

Full Name of Contributor Barbara Brown				MO	DAY	YEAR	\$ 50.00
Mailing Address 15015 Balmoral Loop				6	18	2020	
City Ft. Myers	State FL	Zip Code (Plus 4) 33919					

Full Name of Contributor Jack K. & Mary Ann Cyphert				MO	DAY	YEAR	\$ 25.00
Mailing Address PO Box 174				6	18	2020	
City Ridgway	State PA	Zip Code (Plus 4) 15853					

Full Name of Contributor Elizabeth Costello				MO	DAY	YEAR	\$ 50.00
Mailing Address 604 W. Washington St.				6	18	2020	
City Bradford	State PA	Zip Code (Plus 4) 16701					

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

PAGE TOTAL
\$ 632.00

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	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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 BROWN, MARGIE FRIENDS OF	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Scott Brown							
Mailing Address 106 Sumar Rd				6	18	2020	\$ 1,000.00
City St Marys	State PA	Zip Code (Plus 4) 15857					
Employer Name Allegheny Coatings				Occupation General Manager			
Employer Mailing Address/Principal Place of Business 224 River Rd.			City St Marys		State PA	Zip Code (Plus 4) 15857	

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

PAGE TOTAL
\$ 1,000.00

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			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	
BROWN, MARGIE FRIENDS OF		From: <u>5/19/2020</u> To: <u>6/22/2020</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 RECEIVED - 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:

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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
BROWN, MARGIE FRIENDS OF	From <u>5/19/2020</u> To: <u>6/22/2020</u>

DATE				AMOUNT		
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 19.83
Mailing Address PO Box 441146			6	1	2020	
City Somerville	State MA	Zip Code (Plus 4) 02144-0031	Description of Expenditure Service Fee			
To Whom Paid United States Postal Service			MO	DAY	YEAR	\$ 26.35
Mailing Address 115 Boylston St			5	22	2020	
City Bradford	State PA	Zip Code (Plus 4) 16701	Description of Expenditure Postage for Report			
To Whom Paid Adobe			MO	DAY	YEAR	\$ 13.77
Mailing Address 345 Park Ave			6	18	2020	
City San Jose	State CA	Zip Code (Plus 4) 95110	Description of Expenditure Office Software Monthly fee			
To Whom Paid Bradford Notary			MO	DAY	YEAR	\$ 10.00
Mailing Address 10 Derrick Rd			5	20	2020	
City Bradford	State PA	Zip Code (Plus 4) 16701	Description of Expenditure Reporting Notary Fee			
To Whom Paid Vantiv eCommerce			MO	DAY	YEAR	\$ 14.71
Mailing Address 8500 Governor's Hill Dr			6	8	2020	
City Symmes Twp	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fundraising Service fee			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 84.66

