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 2020	0044			Repo Filed		:	CANDI	ANDIDATE			4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	F	RIEN	DS (OF N	MILOU M	1ACKEI	NZIE							
Street Address:	2050 DENNIS	LANE															
City:	BETHLEHEM							State:	PA			Zip Cod	ie: 18	015			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.		DA RIMA		POST-	3. X		AMENDM REPORT		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION	PRE-	- 5.		DA LECT		POST-	6.		TERMINA REPORT		Yes	No		\
report type)	ANNUAL REPORT	7.	Year 2020					IG METH				PAPER			DISKE	TTE	
Name of Office S	Sought by Candida	te:						DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
	· ,							МО	DAY	YI	AR	REP				couc	
							İ	11		3	2020	(SEE INSTRUCTIONS FOR CODES))
•	Receipts and	МО	DAY YE	AR				мо	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		5 19	20)20	то		6	5	22	2020						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			13,3	336.17						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sc	hec	lule I)	\$			12,8	350.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 26,186.17																	
D. Total Expenditures (From Schedule III) \$ 8,418.58						18.58											
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			17,7	67.59						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)		\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$			25,1	.00.00			'			
			A	FF1	[DAV	/IT	SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here	e. I	f this	is a	Can	didate r	eport, d	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached schedu	ıles	filed o	n pa	per c	or by elect	tronic m	edium	, are to t	he best o	f my knov	wledge	and beli	ef , tr	ue
Sworn to and subs	cribed before me this day of	5	20							9	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	re				_						Prin	ted Name				
My Commission Ex	cpires											Ema	il				_
	МО	D	AY	ΥR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Cor	nm	ittee,	Can	dida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief t	his	politic	al co	mmi	ttee 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	ribed before me this								-		s	ignature o	of Candida	ate			-
	day of					_						Printe	d Name				-
	Signature					_											_
My Commission Exp	ires											Ema					
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF MILOU MACKENZIE	From:	<u>5/19/202</u>	<u>0</u> To:	6/22/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	500.00
TOTAL for the Reporting	(2)	\$	500.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,000.00
All Other Contributions (Part D)			\$	10,350.00
TOTAL for the Reporting	g Period	(3)	\$	12,350.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	12,850.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Reporting Period					
			Fre	om:		То	:	
		l			DATE			AMOUNT
Full Name of Contributi	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	•			•	•	\vdash	DACE TOTAL

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 Candidat	lame of Filing Committee or Candidate			Reporting Period					
FRIENDS OF MILOU MACKENZIE			From	ı:	5/19/2	2 <u>020</u> To	: <u>6/22/2020</u>		
				l	DATE		AMOUNT		
Full Name of Contributor CHARLES E. MACKENZIE				мо	DAY	YEAR			
Mailing Address 3620 LINCOLN AVE					20	2020	\$ 250.00		
City ALLENTOWN	State	Zip Code (Plus 4)		6	20	2020			
	PA	18103							
Full Name of Contributor GARY J. IACOCCA				мо	DAY	YEAR			
Mailing Address 3515 FOX RUN DR.				_			\$ 250.00		
City ALLENTOWN	State	Zip Code (Plus 4)		6	1	2020			
	PA	18103							

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

PAGE TOTAL \$ 500.00

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 Candid	ame of Filing Committee or Candidate Repo		Reporting	g Period				
FRIENDS OF MILOU MACKENZIE			From:	<u>5/1</u>	9/2020	То:	6/22/2020	
				DA	TE		AMOUNT	
Full Name of Contributing Committee	ee			мо	DAY	YEAR		
Mailing Address 5934 MEMORIAL	_ RD.						\$ 1,	00.00
City GERMANSVILLE	State PA	Zip Cod 180532	e (Plus 4) 2404	6	22	2020		
Full Name of Contributing Committee CITIZENS FOR STAN SAYLOR	ee			мо	DAY	YEAR		
Mailing Address 208 ROBIN DR.							\$ 1,	00.00
City RED LION	State PA	Zip Cod 17356	e (Plus 4)	6	18	2020		
							PAGE TO	TAL

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

PAGE TOTAL \$ 2,000.00

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 Per	riod			
FRIENDS OF MILOU MACKENZIE				Fron	n:	<u>5/19/2</u>	<u>020</u> To) :	6/22/2020
					DA	ATE		АМ	OUNT
Full Name of Contributor JM ULIANA & ASSOCIATES, LLC					мо	DAY	YEAR		
Mailing 2571 BAGLYOS CIRCI	_E B20							\$	350.00
City BETHLEHEM	State	Zij	Code (Plus	4)	6	10	2020)	
	PA	18	8020						
Employer Name JOE ULIANA JM ULIAN	NA & ASSOCIAT	ΓES,	LLC		Occupat	ion	WNER		
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code	(Plus 4)
2571 BAGLYOS CIRCLE B20			BETHLEH	EM		PA		18020	
Full Name of Contributor V. MILOU MACKENZIE					мо	DAY	YEAR		
Mailing 2050 DENNIS LANE								\$	5,000.00
City BETHLEHEM	State PA		Code (Plus	4)	6	22	2020)	
Employer Name V.M. MACKENZIE INT	LERIOR DESIGN SELF	E-EM	1PLOYED		Occupat	ion) WNER		
Employer Mailing Address/Principal Plac Business	e of		City		l	State		Zip Code	(Plus 4)
2050 DENNIS LANE			BETHLEH	EM		PA		18015	
Full Name of Contributor V. MILOU MACKENZIE					мо	DAY	YEAR		
Mailing 2050 DENNIS LANE Address								\$	5,000.00
City BETHLEHEM	State PA		Code (Plus	i 4)	6	22	2020		
Employer Name V.M. MACKENZIE INTERIOR DESIGN SELF-EMPLOYED				Occupation OWNER					
Employer Mailing Address/Principal Place of Business City				State			Zip Code (Plus 4)		
2050 DENNIS LANE BETHLEHEM			EM		PA		18015		

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

PAGE TOTAL

10,350.00

\$

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 Perio	od			
			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 Schedule I. Detailed	d Summary Page	Section	4			ı	PAGE TOTAL
	Journal 1, Betailet	a cannual y 1 age,	2000011	••			\$	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								
FRIENDS OF MILOU MACKENZIE	From:	<u>5/19/2020</u> To:	<u>6/22/2020</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	L. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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	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 Candid	Reporting 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	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	te				Re	porting	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	- 1		•			Occupa	ition			
Employer Mailing Address/Principal P Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on So Summary Page, Section 3.	chedule II, 1	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candid	ate			Reportir	ng Period			
FRIENDS OF MILOU MACKENZIE				From		9/2020	То:	6/22/2020
					DATE			AMOUNT
To Whom Paid ADVANTAGE DIRECT COMMUNICATI	IONS			мо	DAY	YEAR		
Mailing Address 6609 WILLOW PA	ARK DRIVE SUITE	E 100		5	22	2020	\$	191.91
City NAPLES	State FL		p Code (Plus 4) 34109	-	otion of Exp			
To Whom Paid PATHFINDER COMMUNICATIONS, LL	-C			МО	DAY	YEAR		
Mailing Address 857 NATHAN HA	LE ROAD			5	22	2020	\$	5,414.00
City BERWYN	State PA		p Code (Plus 4) 19312	1 -	otion of Exp			N SHOPPERS
To Whom Paid PATHFINDER COMMUNICATIONS, LL	-C			МО	DAY	YEAR		
Mailing Address 857 NATHAN HA	LE ROAD			5	22	2020	\$	985.00
City BERWYN	State PA		p Code (Plus 4) 19312	1 -	otion of Exp			
To Whom Paid TOM CAROCCI				МО	DAY	YEAR		
Mailing Address 2063 PHEASANT	СТ.			6	3	2020	\$	107.67
City BETHLEHEM	State PA		p Code (Plus 4)	1 -	otion of Exp FOR ELECT			DAY

To Whom Paid ZACH PETIET	H PETIET ing Address 2507 WASSERGASS ROAD HELLERTOWN State Zip Code (Plus 4)				YEAR	
Mailing Address 2507 WASSERGASS	ROAD		6	3	2020	\$ 150.0
City HELLERTOWN	State PA	Zip Code (Plus 4) 18055		otion of Exp		

To Whom Paid ALSTAN WOLFE	МО	DAY	YEAR				
Mailing Address 2516 OLD HARROW COURT	6	3	2020	\$	150.00		
City HELLERTOWN State Zip Code (Plus 18056	Descri	ption of Exp					
To Whom Paid ZACH NICHOLAS	МО	DAY	YEAR				
Mailing Address 1818 MEADOWS ROAD	6	3	2020	\$	150.00		
City HELLERTOWN State Zip Code (Plus 18055	Descri	Description of Expenditure CAMPAIGN WORK					
To Whom Paid COLIN ZYCK	МО	DAY	YEAR				
Mailing Address 1576 MERRYWEATHER DR.	6	3	\$	150.00			
City BETHLEHEM State Zip Code (Plus 18015	Descri	Description of Expenditure CAMPAIGN WORK					
	G/ ii 11 /						
To Whom Paid TALIA AVIA	мо	DAY	YEAR				
To Whom Paid				\$	150.00		
To Whom Paid TALIA AVIA	MO 6 s 4) Descri	DAY	YEAR 2020 penditure	\$	150.00		
To Whom Paid TALIA AVIA Mailing Address 1228 THIRD AVE. City HELLERTOWN State Zip Code (Plus	MO 6 s 4) Descri	DAY 3	YEAR 2020 penditure	\$	150.00		
To Whom Paid TALIA AVIA Mailing Address 1228 THIRD AVE. City HELLERTOWN State PA 18055 To Whom Paid	MO 6 S 4) Descri	DAY 3 ption of Exp	YEAR 2020 Denditure	\$	150.00		
To Whom Paid TALIA AVIA Mailing Address 1228 THIRD AVE. City HELLERTOWN State PA 18055 To Whom Paid BRAYDYN LUGARDO	MO 6 S 4) Descri	DAY 3 ption of Exp. IGN WORK DAY	YEAR 2020 Denditure YEAR 2020 Denditure				
To Whom Paid TALIA AVIA Mailing Address 1228 THIRD AVE. City HELLERTOWN State PA 18055 To Whom Paid BRAYDYN LUGARDO Mailing Address 2079 JOHNSTON AVE. City BETHLEHEM State Zip Code (Plus	MO 6 S 4) Descri	DAY 3 ption of Exp IGN WORK DAY 3 ption of Exp	YEAR 2020 Denditure YEAR 2020 Denditure				
To Whom Paid TALIA AVIA Mailing Address 1228 THIRD AVE. City HELLERTOWN State PA 18055 To Whom Paid BRAYDYN LUGARDO Mailing Address 2079 JOHNSTON AVE. City BETHLEHEM State PA 18015 To Whom Paid	MO 6 S 4) Description CAMPA MO 6 S 4) Description CAMPA	DAY 3 Ption of Exp IGN WORK DAY 3 Ption of Exp IGN WORK	YEAR 2020 Penditure 2020 Penditure				

To Whom Paid			МО	DAY	VEAD				
AIDEN RENNINGER				DAY	YEAR				
Mailing Address 1615 OAKRIDGE LANE			6	3	2020	\$	120.00		
City HELLERTOWN State Zip Code (Plus 4) PA 18055			Descrip	tion of Exp	enditure				
			CAMPAIGN WORK						
To Whom Paid	-		мо	DAY	YEAR				
JARED THATCHER									
Mailing Address 2643 MORI	NING LANE		6	3	2020	\$	120.00		
City HELLERTOWN	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	18055	CAMPAIGN WORK						
To Whom Paid	<u> </u>		мо	DAY	YEAR				
MATTHEW MARKER			1.0						
Mailing Address 2059 PHEASANT CT.			6	3	2020	\$	40.00		
City BETHLEHEM State		Zip Code (Plus 4)	Description of Expenditure						
PA 18015				CAMPAIGN WORK					
To Whom Paid	<u>'</u>		мо	DAY	YEAR				
ASHLEY & amp; WILLIAM NAG	Y								
Mailing Address 2073 DENNIS LANE			6	3	2020	\$	90.00		
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure CAMPAIGN WORK						
SETTE TELL	PA	18015							
			1				PAGE TOTAL		
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D				\$	8,118.58		

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 Reporting			ng Period					
RIENDS OF MILOU MACKENZIE From:		<u>5</u>	5/19/2020	То:		6/22/2020		
					DATE			Outstanding Balance of Debt
Name of Creditor VICTORIA MILOU MACKENZIE			мо	DAY	YEAR			
Mailing Address 2050 DENNIS LANE			6	22	2020	\$	5,000.00	
State Zip Code (Plus 4) PA 18015			Description of Debt LOAN TO CAMPAIGN					
				Outstanding DATE Balance of Debt				Outstanding Balance of Debt
Name of Creditor VICTORIA MILOU MACKENZIE			МО	DAY	YEAR			
Mailing Address 2050 DENNIS LANE			6	22	2020	\$	5,000.00	
City BETHLEHEM	BETHLEHEM State PA Zip Code (Plus 4) 18015			Description of Debt LOAN TO CAMPAIGN				
				DATE			Outstanding Balance of Debt	
Name of Creditor VICTORIA MILOU MACKENZIE				МО	DAY	YEAR		
Mailing Address 2050 DENNIS LANE	<u> </u>			1	23	2020	\$	100.00
City BETHLEHEM	State PA	Zip Code (Plu 18015	ıs 4)	Description of Debt LOAN TO CAMPAIGN				
					DATE			Outstanding Balance of Debt
Name of Creditor VICTORIA MILOU MACKENZIE				МО	DAY	YEAR		
Mailing Address 2050 DENNIS LANE	Ξ			2	9	2020	\$	5,000.00
City BETHLEHEM State Zip Code (Plus 4) PA 18015			Description of Debt LOAN TO CAMPAIGN					

				DATE			Outstanding Balance of Debt
Name of Creditor VICTORIA MILOU MACKENZIE			мо	DAY	YEAR		
Mailing Address 2050 DENNIS LANE			1	28	2020) 4	5,000.00
City BETHLEHEM	State	Zip Code (Plus 4)	Descrip	otion of Del	ot	•	
DE MILLENET	PA	18015	LOAN TO CAMPAIGN				
				DATE			Outstanding Balance of Debt
Name of Creditor KEVIN D. BROWN			мо	DAY	YEAR		
Mailing Address 2050 DENNIS LANE			4	28	2020) 4	5,000.00
City BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Del	ot		
DETTILETEN	PA	18015	LOAN TO CAMPAIGN				
			1				PAGE TOTAL
Enter Grand Total of Unpaid Debt	s on Page 1, Rep	oort Cover Page, Item	1 G.			\$	25,100.00