Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion 2020)C0145			Repo		С	ANDI	DATE	√	СС	MMITTE		LOB	BYIS	ſ		
Number :	-		• • • • • • •		Filed	-		*1775		•								
Name of Filing G	Committee, Candio	late or L	obbyist:		V. MIL	_00 M	IACKE	NZIE										
Street Address:																		
City:							State:					Zip Cod	Zip Code: 18015					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	P	POST-	3. X		AMENDMI REPORT?	ENT	Yes		No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5.		DAY CTION		POST-	6.		TERMINATION REPORT?		Yes	ſ	No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2020				ING M) CHE					PAPER		\checkmark	DISI	(ETTE	:]	
Name of Office	_ Sought by Candida	ite:							F ELE			District Number	Office Code		-	le Cou Coo		
REPRESENTAT	IVE IN THE GENE	RAL ASS	EMBLY				мо		DAY	YEA	R	131	STH	RE				
								11		3	2020		(SEE INS	TRUCTI	ONS FO	R CODE	S)	
	Receipts and	мо	DAY	YEAR		_	мо		DAY	YEA	R	FO	R OFFIC	E USE	ONL	Y		
Expenditures	s from:		5 19	2	020	то		6	2	22	2020							
A. Amount Bro	ought Forward Fro	m Last R	eport				\$				0.00							
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I))	\$		0.00									
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				0.00							
D. Total Expen	ditures (From Sch	edule II	I)				\$			10,00	0.00							
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$				0.00	-						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$				0.00							
G. Unpaid Deb	ts And Obligations	s (From S	Schedule IV	()			\$				0.00							
					IDAV													
	s a Committee rep																	
I swear (or affirm correct and compl) that this report, ind lete.	luding the	e attached sc	hedule	s filed o	n pape	er or by	electi	ronic me	edium, a	re to	the best of	my know	ledge	and b	elief, t	:rue	
Sworn to and sub	scribed before me thi day of 	s	20							Sig	natur	e of Person	Submitti	ng Re	port			
	Signati	ıre				_						Print	ed Name				_	
My Commission E	xpires											Email					_	
	мо	D	AY	YR					Are	ea Code		Daytime	e Telepho	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Cand	idate s	shall	sign he	ere.								
I swear (or affirm) No 320) as amend) that to the best of ed.	my knowle	edge and beli	ef this	politica	al com	mittee	has n	ot viola	ed any	provis	ions of the	act of Ju	ne 3,1	937 (F	P.L. 13	33,	
Sworn to and subscribed before me this											s	ignature o	f Candida	te			—	
day of 20												Printeo	i Name				_	
	Signature					_						Email						
My Commission Exp	pires											Emai	I					
	мо	D	AY	YR	ł				Area	Code		Da	ytime Te	lepho	ne Nur	nber	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** V. MILOU MACKENZIE From: <u>5/19/2020</u> **To:** 6/22/2020 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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						
				From: To:			:			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
inter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						0.00				

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 Candida	te		Rep	orting P	eriod					
			Fror	m:		Тс):			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00		

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:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.0	
Mailing Address							- \$	0.0	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	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 Re				eporting Period					
			Froi	n:		Т):		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

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				ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	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 Period	I	
V. MILOU MACKENZIE	From:	<u>5/19/2020</u> То:	<u>6/22/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name	Name of Filing Committee or Candidate				Reporting Period						
V. MILOU MACKENZIE				From	<u>5/19</u>	<u>9/2020</u>	То:	<u>6/22/2020</u>			
					DATE AMOUI						
To Wh	iom Paid			мо	DAY	YEAR					
FRIEN	IDS OF MILOU MACKENZIE										
Mailin	g Address			6	22	2020	\$	5,000.00			
City	BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		РА	18015	LOAN TO CAMPAIGN							
To Wh	om Paid			мо	DAY	YEAR					
FRIEN	IDS OF MILOU MACKENZIE										
Mailin	g Address			6	22	2020	\$	5,000.00			
City	BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 18015					LOAN TO CAMPAIGN						
_				_				PAGE TOTAL			
Enter	Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I	D .			\$	10,000.00			