

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20180491		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> BROWN, AMEN FRIENDS FOR											
<b>Street Address:</b> 3600 CONSHOHOCKEN AVE, APT 710											
<b>City:</b> PHILADELPHIA					<b>State:</b> PA		<b>Zip Code:</b> 19131				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2018	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	190	STH		51
					11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		11	19	2018		12	31	2018			
<b>A. Amount Brought Forward From Last Report</b>					\$		0.00				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		5,000.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		5,000.00				
<b>D. Total Expenditures (From Schedule III)</b>					\$		3,083.47				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		1,916.53				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		7,170.00				

## 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
BROWN, AMEN FRIENDS FOR	From: <u>11/19/2018</u> To: <u>12/31/2018</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 5,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 5,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 5,000.00
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Name of Filing Committee or Candidate	Reporting Period
	From: To:

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

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

<b>PAGE TOTAL</b>	
\$	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:	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.

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  BROWN, AMEN FRIENDS FOR	<b>Reporting Period</b>  <b>From:</b> <u>11/19/2018</u> <b>To:</b> <u>12/31/2018</u>
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				DATE	AMOUNT
<b>Full Name of Contributor</b> Ibaak Bordvich				<b>MO</b>	\$ 2,500.00
<b>Mailing Address</b> 25 Rittenhouse Circle				<b>DAY</b>	
<b>City</b> newtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18940		<b>YEAR</b> 2018	
<b>Employer Name</b> re/max access				<b>Occupation</b> realtor	
<b>Employer Mailing Address/Principal Place of Business</b> 1033 n. 2nd st			<b>City</b> phila	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19123
<b>Full Name of Contributor</b> Allen Bordvich				<b>MO</b>	\$ 2,500.00
<b>Mailing Address</b> 834 N.4th st, Suite one				<b>DAY</b>	
<b>City</b> Phila	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19123		<b>YEAR</b> 2018	
<b>Employer Name</b> re/max access				<b>Occupation</b> realtor	
<b>Employer Mailing Address/Principal Place of Business</b> 1033 n. 2nd st			<b>City</b> phila	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19123

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

<b>PAGE TOTAL</b>
\$ 5,000.00

## 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
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			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.**

<b>PAGE TOTAL</b>	
\$	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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
BROWN, AMEN FRIENDS FOR		From: <u>11/19/2018</u> To: <u>12/31/2018</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
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, AMEN FRIENDS FOR	From <u>11/19/2018</u> To: <u>12/31/2018</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Maggy Francois				
Mailing Address 2221 South Clark st	12	14	2018	\$ 2,000.00
City Arlington				
State VI				
Zip Code (Plus 4) 22202				
Description of Expenditure				
Stylist, photograher, travel logistics				
To Whom Paid	MO	DAY	YEAR	
Victoria Porterfield				
Mailing Address 6160 W. Oxford st Apt E301	12	11	2018	\$ 250.00
City Phila				
State PA				
Zip Code (Plus 4) 19151				
Description of Expenditure				
Preparing Campaign Office/staging and setup				
To Whom Paid	MO	DAY	YEAR	
sunoco				
Mailing Address 4600 Chestnut st	12	17	2018	\$ 20.00
City Phila				
State PA				
Zip Code (Plus 4) 19139				
Description of Expenditure				
gas for transportation to attend community event				
To Whom Paid	MO	DAY	YEAR	
Victor Scott				
Mailing Address 1111 hay st	12	12	2018	\$ 600.00
City Phila				
State PA				
Zip Code (Plus 4) 19151				
Description of Expenditure				
transport, office set up, shopping,				
To Whom Paid	MO	DAY	YEAR	
Maggianos				
Mailing Address 12& Filberth st	12	13	2018	\$ 46.33
City Phila				
State PA				
Zip Code (Plus 4) 19107				
Description of Expenditure				
dinner meeting				
To Whom Paid	MO	DAY	YEAR	
Restaurant Depot				
Mailing Address 2950 Roberts Ave	12	13	2018	\$ 69.72
City Phila				
State PA				
Zip Code (Plus 4) 19129				
Description of Expenditure				
supplies for event				

<b>To Whom Paid</b> Staples			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 30.20
<b>Mailing Address</b> 933 Montgomery Ave			12	29	2018	
<b>City</b> Narbert	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19072	<b>Description of Expenditure</b> supplies for event			

<b>To Whom Paid</b> Dunkin Donuts			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 16.83
<b>Mailing Address</b> 4160 Monument Road			12	18	2018	
<b>City</b> Phila	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19131	<b>Description of Expenditure</b> staff breakfast			

<b>To Whom Paid</b> Philadelphia Parking Authority			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3.50
<b>Mailing Address</b> 8th and Spring Garden st			12	17	2018	
<b>City</b> Phila	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19123	<b>Description of Expenditure</b> parking to attend an event			

<b>To Whom Paid</b> Philly Discounters			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 26.89
<b>Mailing Address</b> 5610 Lancaster Ave			12	23	2018	
<b>City</b> Phila	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19131	<b>Description of Expenditure</b> supplies for event			

<b>To Whom Paid</b> sunoco			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 20.00
<b>Mailing Address</b> 4600 Chestnut st			12	18	2018	
<b>City</b> Phila	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19139	<b>Description of Expenditure</b> gas for volunteer			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 3,083.47

**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**

<b>Name of Filing Committee or Candidate</b>  BROWN, AMEN FRIENDS FOR	<b>Reporting Period</b>  <b>From:</b> <u>11/19/2018</u> <b>To:</b> <u>12/31/2018</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 7,170.00
Clear Channel Outdoor							
Mailing Address				11	28	2018	
City		Phila	State	Zip Code (Plus 4)		Description of Debt	
		PA	19136		Posters/ Billboards		

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b>  \$                    7,170.00
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