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 20	10090			Repor Filed E		CAND	IDATE		СОМ	ITTEE	✓	LOBE	SYIST			
Name of Filing C	Committee, Cand	lidate or L	obbyist:	M	1ULLEF	RY, GE	RALD C	ITIZEN	S FOI	₹		_					
Street Address:	6 MARIE DI	RIVE															
City:	NANTICOKE						State:	PA			Zip Cod	de: 18	3634-0	000			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	RE-	2.	30 DA		POST-	3. X		AMENDM REPORT		Yes	No			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PI ELECTION	RE-	5.	30 DA		POST-	6.		TERMIN/ REPORT		Yes	No	~		
report type)	ANNUAL REPO	7.	Year 2020				NG METH				PAPER	Y					
Name of Office S	Sought by Candi	date:	•		<u> </u>		DATE (OF ELE	CTIC)N	District Number	Office Code	Part	ty Code	County Code		
							МО	DAY	YI	EAR	119	STH	DEM	1	40		
REPRESENTATI	VE IN THE GEN	ERAL ASS	EMBLY				1:	1	3	2020	-	(SEE INSTRUCTIONS FOR					
	Receipts and	МО	DAY YEA	AR			МО	DAY	Y	EAR	l l						
Expenditures	5 Trom:		5 19	20	20 T	0	(5	22	2020							
A. Amount Bro	ught Forward F	om Last R	eport			\$			29,3	301.18							
B. Total Monet	ary Contribution	s And Rec	eipts (From Sch	ned	ule I)	\$			1,8	359.24							
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			31,	160.42							
D. Total Expend	ditures (From S	chedule II	I)			\$			1,9	944.80							
E. Ending Cash	Balance (Subtr	act Line D	From Line C)			\$			29,2	215.62							
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sched	lule	e II)	\$				0.00							
G. Unpaid Debt	ts And Obligatio	ns (From S	Schedule IV)			\$				0.00			1				
			AF	FI	DAVI	T SE	CTION										
PART I - If this is			_							_							
I swear (or affirm) correct and complete		ncluding the	e attached schedul	les 1	filed on	paper	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , true		
Sworn to and subs	cribed before me	his	20						5	Signature	of Perso	n Submit	ting Rep	ort			
	- Cian		_			-					Prin	ted Name	e				
My Commission Ex	_	iture									Ema	il					
	мо	D	AY Y	'n		_		Ar	ea Cod	le	Daytim	ne Telepi	none Nui	mber			
Part II- If this is	a report of a ca	ındidate's	authorized Com	ımi	ittee, C	andid	ate shall	l sign h	ere.								
I swear (or affirm) No 320) as amende		f my knowl	edge and belief th	is p	oolitical	comm	ittee has	not viola	ted ar	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,		
Sworn to and subsc		is								s	ignature o	of Candid	ate				
	day of					_					Police*	d Na					
	Signatu	·e				_					Printe	ed Name					
My Commission Exp	-										Ema	il					
	МО	D	AY Y	/R		_		Area	Code		D	aytime T	elephon	e Numbe	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MULLERY, GERALD CITIZENS FOR	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) Period	(1)	\$	9.24
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)			\$	0.00
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)			\$	1,350.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	Period	(3)	\$	1,850.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,859.24

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	Part to itemize on an aggregate val				•			
Name of Filing Committee	or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Co	mmittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
							$\overline{\Box}$	PAGE TOTAL

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

0.00

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 Cand	idate		Re	porting P	eriod			
			Fro	From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	_							

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

PAGE TOTAL \$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	y Period				
MULLERY, GERALD CITIZENS FOR			From:	<u>5/1</u>	9/2020	То:	<u>6</u>	5/22/2020
				DA	TE		A	MOUNT
Full Name of Contributing Committee DUANE MORRIS LLP GOVT.				мо	DAY	YEAR		
Mailing Address 30 S. 17TH ST.							\$	350.00
City PHILADELPHIA	State PA	Zip Code 19103	e (Plus 4)	6	6	2020)	
Full Name of Contributing Committee VALUE DRUG COMPANY PAC				МО	DAY	YEAR		
Mailing Address 195 THEATER DRIV	Ē						\$	500.00
City DUNCANSVILLE	State PA	Zip Code 16635	e (Plus 4)	6	6	2020	0	
Full Name of Contributing Committee COMM. TO ELECT EDDIE PASHINSKI				МО	DAY	YEAR		
Mailing Address 1089 WYOMING AV	E.						\$	500.00
City FORTY FORT	State PA	Zip Code 18704	e (Plus 4)	6	6	2020		
							-	PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary Pa	age, Sectio	n 3.			\$	1,350.00

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			Repo	orting Pe	riod			
MULLERY, GERALD CITIZENS FOR			Fron	n:	<u>5/19/2</u>	<u>020</u> To	o: <u>6</u>	5/22/202 <u>0</u>
				D/	ATE		AMO	UNT
Full Name of Contributor GREGORY FELLERMAN				МО	DAY	YEAR		
Mailing 183 MARKET ST. SUI	TE 200				16	2020	\$	500.00
City KINGSTON	State	Zip Code (Plus	4)	6	16	2020	'	
	PA	18704						
Employer Name FELLERMAN & amp; C.	IRIAMBOLI			Occupat	ion A	ATTORN	EY	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)
183 MARKET ST.SUITE 200		KINGSTO	N		PA		18704	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary Page.	Section	on 3.			PAGI	E TOTAL
		, , , , , , , , , , , , , , , , , , , ,		· - ·			\$	500.00

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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
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 T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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 Peri	iod	
MULLERY, GERALD CITIZENS FOR	From:	<u>5/19/2020</u> To:	6/22/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candid	ate		Reporting	g 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 Candidate					Re	porting	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	ation		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
MULLERY, GERALD CITIZENS FOR	From	<u>5/19/2020</u>	То:	<u>6/22/2020</u>	

				DATE		AMOUNT
To Whom Paid GNASD			МО	DAY	YEAR	
Mailing Address 425 KOSCIUS	ZKO ST.		6	1	2020	\$ 250.00
City NANTICOKE	State PA	Zip Code (Plus 4) 18634	1	otion of Exp RY AWARD		
To Whom Paid MOUNTAIN TOP EAGLE			МО	DAY	YEAR	
Mailing Address PO BOX 10			6	1	2020	\$ 60.00
City MOUNTAINTOP	State PA	Zip Code (Plus 4) 18707	1	otion of Exp		
To Whom Paid SLOCUM TWP. VOLUNTEER FIRE	co.		мо	DAY	YEAR	
Mailing Address 1923 SLOCUM	1 RD.		6	2	2020	\$ 50.00
City WAPWALLOPEN	State PA	Zip Code (Plus 4) 18660	Descrip DONAT	otion of Exp	penditure	
To Whom Paid ACT BLUE			МО	DAY	YEAR	
Mailing Address PO BOX 4411	46		6	9	2020	\$ 12.07
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144		otion of Exp CE FEES	penditure	
To Whom Paid OFFICE MAX			МО	DAY	YEAR	
Mailing Address 107 WYOMING	G VALLEY MALL		6	12	2020	\$ 455.38
City WILKES BARRE	State PA	Zip Code (Plus 4) 18701	Description of Expenditure OFFICE SUPPLIES			

							17.62 12
To Whom Paid OVERSTOCK			мо	DAY	YEAR		
Mailing Address 799 W. COLISEUM WAY			6	18	2020	\$	158.35
City MIDVALE	State	Zip Code (Plus 4)	Description of Expenditure				
· MIDVALE	UT	84047	OFFICE SUPPLIES				
To Whom Paid FUTURISTIC INNOVATIVE GRAPHICS			МО	DAY	YEAR		
Mailing Address 156 S. PENNSYLVANIA AVE			6	2	2020	\$	140.00
City WILKES-BARRE	State	Zip Code (Plus 4)	Descri	l ption of Exp	enditure	<u> </u>	
	PA	18701	SUPPORT LOCAL DONATION				
To Whom Paid LHU ATHLETICS			МО	DAY	YEAR		
Mailing Address 401 N. FAIRVIEW ST.			6	1	2020	\$	100.00
City LOCK HAVEN	State	Zip Code (Plus 4)	Description of Expenditure DONATION				
2001(1),(021)	PA	17745					
To Whom Paid BOOSTING BLUE			МО	DAY	YEAR		
Mailing Address 626 E. 82ND ST., #240			5	28	2020	\$	599.00
City BLOOMINGTON	State	Zip Code (Plus 4)	Description of Expenditure				
	MN	55425	WEBSITE DESIGN				
To Whom Paid LEHIGH ATHLETICS			МО	DAY	YEAR		
Mailing Address 641 TAYLOR ST.			5	28	2020	\$	100.00
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	18015	DONATION				
To Whom Paid KNIGHTS OF COLUMBUS			МО	DAY	YEAR		
Mailing Address PO BOX 317			6	1	2020	\$	20.00
City NANTICOKE	State	Zip Code (Plus 4)	Description of Expenditure				
MANTICORE	PA	18634	DONATION				
Enter Grand Total of Expend	itures on Page 1 Pc	anort Cover Page Item D					PAGE TOTAL
Lines Grand Total of Expendi	cares on rage 1, Re	port cover rage, item b	·•			\$	1,944.80