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	20190	0132				Repo Filed			CAI	NDII	DATE		COMM	4ITTEE	✓ [LOB	BYIST		
Name of Filing C	committee	e, Candida	ite or Lo	obbyist	t:	F	RIEN	DS O)F N	MARC	I M	USTEL	.LO							
Street Address:																				
City:	BUTL	ER								State	e:	PA			Zip Cod	le: 16	001			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FI PRIMA		PRE-	2.	30 PRI	DA'		POST- 3.		3.		AMENDM REPORT?		Yes] [No	\
(place X to the right of	6TH TUES		4.	2ND FI		PRE-	- 5.	30 ELE		Y ION	Р	POST- 6. X			TERMINA REPORT?		Yes		No	>
report type)	ANNUAL	REPORT	7.	Year 2	2020					G ME					PAPER		\	DIS	ETTE	
Name of Office S	- Sought by	Candidat	e:							DAT	E O	F ELE	CTI	ON	District Number	Office Code	Pa	rty Cod	le Cou	
										МО		DAY	Y	EAR			RE	P	•	
											11		3	2020		(SEE IN	STRUCT	ONS FO	R CODES	5)
Summary of		and	МО	DAY	'	YEAR				МО		DAY	١	/EAR	FO	R OFFIC	E USI	ONL	Y	
Expenditures	from:		1	LO	20	20	20	то			11	2	23	2020						
A. Amount Bro	ught Forv	vard From	Last R	eport					\$				23	,363.48						
B. Total Moneta	ary Contr	ibutions A	and Rec	eipts (I	From	Sched	lule I)	\$				1,	,458.10						
C. Total Funds	Available	(Sum Of	Lines A	and B))				\$				24	,821.58						
D. Total Expend	ditures (F	rom Sche	dule II	I)					\$					738.55						
E. Ending Cash	Balance	(Subtract	Line D	From L	ine C)		4	\$				24,	083.03						
F. Value Of In-	Kind Cont	tributions	Receive	ed (Fro	m Sc	hedule	e II)		\$				5,	435.02						
G. Unpaid Debt	s And Ob	ligations	(From S	chedu	le IV)	1			\$					0.00						
						AFFI	DAV	IT S	SE(CTIC	N									
PART I - If this is	s a Comm	ittee repo	rt, trea	surer s	sign h	ere. If	f this	is a C	Can	didat	e re	port, c	and	lidate sig	ın here.					
I swear (or affirm) correct and comple		eport, inclu	uding the	attache	ed sch	edules	filed o	n pap	er o	r by e	lectr	onic m	ediur	n, are to t	he best of	f my knov	vledge	and be	elief , tı	rue
Sworn to and subs	cribed befo	ore me this		20										Signature	of Person	1 Submitt	ing Re	port		
		Signatur						_							Print	ted Name	1			-
My Commission Ex	cpires	Signatui	e												Emai	il				-
	,	мо	D/	AY		YR						Are	ea Co	ode	Daytim	e Teleph	one Nı	ımber		_
Part II- If this is	a report	of a cand	idate's	author	ized (Commi	ittee,	Cand	lida	ite sh	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and	d belie	f this p	politica	l con	nmi	ttee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ıne 3,1	.937 (F	.L. 133	3,
Sworn to and subsc		re me this												s	ignature o	of Candida	ate			-
	day of —			20 				_							Printe	d Name				_
		Signature						_			_									_
My Commission Exp		-													Emai	il				
	_	МО	D	AY		YR		_				Area	Code)	Da	ytime To	elepho	ne Nun	ıber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF MARCI MUSTELLO	From:	10/20/202	<u>0</u> To:	11/23/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	90.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)			\$	100.00
TOTAL for the Reporting	Period	(2)	\$	350.00
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)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	1,018.10
			1	
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,458.10

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	Reporting Period From: <u>10/20/2020</u> To: <u>1</u>			
FRIENDS OF MARCI MUSTELLO	From:	10/20/2020	То:	11/23/2020	
		DATE		AMOUNT	

Full Nan	ll Name of Contributing Committee				DAY	VEAD	
PENNSY	LVANIA COAL PAC			МО	DAY	YEAR	
Mailing Address			11	6	2020	\$ 250.0	
City	HARRISBURG	State	Zip Code (Plus 4)	1		2020	
		PA	171011505				

PAGE TOTAL 250.00

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 Candidate

Reporting Period

FRIENDS OF MARCI MUSTELLO

From: <u>10/20/2020</u> To:

DATE

11/23/2020

AMOUNT

Full Name of Contributor WILLIAM AND SUSANNE GILLESPIE				МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	SAXONBURG	State	Zip Code (Plus 4)	11	6	2020	
		PA	16056				

PAGE TOTAL

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

100.00

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	me of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		P	AMOUNT	
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 Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00	

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					
				Fron	n:		٦	То:			
					D	ATE			А	MOUNT	
Full Name of Contributor					мо	DAY	YEAR	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		z	ip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Sເ	umm	nary Page,	Section	on 3.			\$	F	PAGE TOTA	L .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 Committ	ee or Candidate			Report	ing Perio	d			
FRIENDS OF MARCI MU	JSTELLO			From:		<u>10/20/202</u>	<u>:0</u> To:	11/23/2020	
					D	ATE			AMOUNT
Full Name GENERAL BUTLER FRIEN	IDS OF THE NRA				мо	DAY	YEAR	\$	325.00
Mailing Address			I		11	23	2020	1	
City VALENCIA		State PA	Zip Code (1 16059	Plus 4)					
Receipt Description	STALE-DATED CH	HECK (#154) FROM M	IARCH 5, 20	20; ALSC), BANQI	JET WAS N	IOT HEL	D	
Full Name LN CONSULTING					мо	DAY	YEAR	\$	693.10
Mailing Address		Γ	1		11	23	2020	1	
City HARRISBURG		State PA	Zip Code (1 17101	Plus 4)					
		K LOST BY PAYEE; WI REVERSED IN CHEC		SSUED AF	TER THI	S REPORTI	ING PER	IOD.	CHECK #172
			_	. .:	_		Γ		PAGE TOTAL
Enter Grand Total of Pa	art E on Schedu	ie 1, Detailed Summ	nary Page,	Section	4.			\$	1,018.10

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 Per	riod							
FRIENDS OF MARCI MUSTELLO	From:	<u>10/20/2020</u> To:	11/23/2020						
. 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)	\$	5,435.02						
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,	•	\$	5,435.02						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

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

Name of Filing Committee or Candidate

FRIENDS OF MARCI MUSTELLO

Reporting Period

From: 10/20/2020 To: 11/23/2020

TRIENDS OF MARCI MOSTELLO						<u>20</u> 10.	11/23/2020		
			•		DATE		AMOUNT		
Full Name of Contributor PA GOP - REPUBLICAN PARTY OF PENN	SYLVANIA			мо	DAY	YEAR			
Mailing Address				10	24	2020	\$ 3,402.08		
City HARRISBURG	State	Zip Code(Plus 4)						
	PA	17101							
Employer of Contributor PA GOP				Occupa	tion P(OLITICAL COMMITTEE			
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip Code(Plus 4)		Descri	ption of Contribution		
HARRISBURG				171	01	CAMPA POSTA	AIGN LITERATURE AND IGE		
Full Name of Contributor PA GOP - REPUBLICAN PARTY OF PENNSYLVANIA MO DAY					DAY	YEAR			
Mailing Address				10	24	2020	\$ 988.94		
City HARRISBURG	State	Zip Code(Plus 4)						
	PA	17101							
Employer of Contributor PA GOP	•	•		Occupa	tion P(OLITICAL	COMMITTEE		
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip Code(Plus 4) Descrip			ption of Contribution		
		HARRISBURG	PA	171	01	CAMPAIGN LITERATURE AND POSTAGE			
Full Name of Contributor				мо	DAY	YEAR			
MICHELE MUSTELLO Mailing Address			•	10	29	2020	\$ 1,044.00		
	State	Zin Code (Blue 4		10		2020			
City CHICORA	PA	Zip Code(Plus 4	'						
		16023							
Employer of Contributor COUNTY OF	Occupa			R OF DEEDS					
Employer Mailing Address/Principal Plac	e of Business	City BUTLER	State PA	160	Oode(Plus 4)	1	ption of Contribution RAISING SERVICES BY C NNI		
Enter Grand Total of Part G on Sch	adula II. In-Vi-	nd Contributions)otalia	d			PAGE TOTAL		

SCHEDULE III STATEMENT OF EXPENDITURES

Name	e of Filing Committee or Ca	ndidate		Reportir	ng Period				
FRIE	NDS OF MARCI MUSTELLC)		From	10/20	0/2020	То:	11/23/2020	
					DATE			AMOUNT	
To Wh	om Paid			МО	DAY	YEAR			
SCP G	GROUP			PIO		ILAK			
Mailin	g Address			11 2 2020 \$ 30					
City	SHARON	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	16146	PRINTIN	NG/POSTA	GE/MAIL	ING SERV	ICES	
To Wh	om Paid			МО	DAY	YEAR			
US PC	ST OFFICE			МО	DAI	ILAK			
Mailin	g Address		10 19 202					26.35	
City	LYNDORA	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	1		
		PA	16045	EXPRES	S MAIL				
To Whom Paid					DAY	VEAD			
ANN C	COLEMAN			МО	DAY	YEAR			
Mailin	g Address			10	24	2020	\$	40.25	
City	HERMITAGE	State	Zip Code (Plus 4)	Descript	tion of Exp				
		PA	16148	REIMBU	RSEMENT	FOR STA	MPS		
To Wh	om Paid			МО	DAY	YEAR			
MARC	I MUSTELLO			МО	DAI	ILAK			
Mailin	g Address			11	6	2020	\$	99.00	
City	BUTLER	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	16001	REIMBU	RSEMENT	FOR RAD	DIO ADS -	LABOR DAY	
To Wh	om Paid			МО	DAY	YEAR			
ANN C	COLEMAN			1-10		ILAK			
Mailin	g Address			11	6	2020	\$	270.00	
City	HERMITAGE	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	<u> </u>		
		PA	16148	COMME TO BUT		AD - PR	ESIDENT	TRUMP VISIT	
To Wh	om Paid			МО	DAY	YEAR			
ANED	ОТ								
Mailin	g Address			11	4	2020	\$	2.30	
City	NEW ORLEANS	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	•		
		LA	70112	SERVIC	E FEE FOR	ON-LINE	E DONATIO	ONNC	
				_				PAGE TOTAL	
Entor	Grand Total of Expend	itures on Page 1 Re	nort Cover Dage Item I	n					