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 :	ion 2019	0125			Repo Filed			CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST	
	Committee, Candida	ate or Lo	obbyist:			-		L MALKI	[N							
Street Address:	PO BOX 353															
City:	INGOMAR						9	State:	PA			Zip Co	de: 15	127		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.		DAY [MAI		POST-	3.		AMENDMENT REPORT?		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		DAY ECTI		POST-	6.		TERMIN REPORT		Yes	No	^ ^
report type)	ANNUAL REPORT	7. X	Year 2020					G МЕТНО НЕСК О				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candidat	te:						DATE O	F ELEC	CTIC	N	District Number	Office Code	Par	ty Code	County Code
							ľ	мо	DAY	Y	EAR					
								11		3	2020		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			ľ	мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 24	20	020	го		12	(*)	81	2020					
A. Amount Bro	ught Forward From	n Last R	eport				\$				559.62					
B. Total Monetary Contributions And Receipts (From Schedule							\$			5,9	955.00	_				
C. Total Funds Available (Sum Of Lines A and B)							\$			6,	514.62					
D. Total Expen	D. Total Expenditures (From Schedule III)						\$			9	917.38					
E. Ending Cash	Balance (Subtract	: Line D	From Line	C)			\$			5,5	597.24	_				
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)		\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV)			\$			2,0	005.00					
				AFF	IDAV	IT S	SEC	TION								
	s a Committee repo	•	-						• •			-				
I swear (or affirm correct and comple) that this report, incluete.	uding the	e attached scl	nedules	s filed or	1 pap	er oi	r by elect	ronic me	dium	, are to	the best c	of my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of		20							5	Signature	e of Perso	n Submitt	ing Rep	oort	
						_						Prir	ited Name			
My Commission E	Signatur xpires	e										Ema	il			
	мо	D	AY	YR					Are	a Co	de	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee, (Cand	lida	te shall	sign he	ere.						
I swear (or affirm) No 320) as amende) that to the best of m ed.	ıy knowle	edge and beli	ef this	politica	l con	nmit	tee has n	ot violat	ed ar	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	cribed before me this										s	ignature	of Candida	ite		
	day of											Printe	ed Name			
	Signature					_						Ema				
My Commission Exp	bires											Eille				
	мо	D	AY	YR		_			Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
BRIAN SAMUEL MALKIN	From:	<u>11/24/20</u>	<u>20</u> To:	<u>12/31/2020</u>				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting	J Period	(1)	\$	25.00				
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)	All Other Contributions (Part B)							
TOTAL for the Reporting	TOTAL for the Reporting Period (2)							
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)			\$	5,105.00				
TOTAL for the Reporting	J Period	(3)	\$	5,105.00				
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	5,955.00				

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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:		То	:	
		ľ		DATE			AMOUNT
Full Name of Contributing Com	mittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City)						
						Γ	PAGE TOTAL

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

0.00

\$

Use this Part to i	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 Candid	late		Reporting P	eriod						
BRIAN SAMUEL MALKIN			From:	<u>11/24/</u>	2020 To	12/31/2020				
				DATE	AMOUNT					
Full Name of Contributor Debbie Boncek			мо	DAY	YEAR					
Mailing Address 1803 Thornewoo	d Court					\$ 250.00				
City Pittsburgh	State PA	Zip Code (Plus 4) 15237	12	19	2020					
Full Name of Contributor Sailesh Kapadia	•		мо	DAY	YEAR					
Mailing Address 2553 Glenwood I	Dr					\$ 100.00				
City Wexford	State PA	Zip Code (Plus 4) 15090	12	19	2020					
Full Name of Contributor Elaine Dimasi			мо	DAY	YEAR					
Mailing Address 472 Jean Street			12	19	2020	\$ 125.00				
City Oakland	State CA	Zip Code (Plus 4) 94610								
Full Name of Contributor Darryn Zawitz			мо	DAY	YEAR					
Mailing Address 215 Tamarack D)rive					\$ 100.00				
City Mars	State PA	Zip Code (Plus 4) 16046	12	19	2020					
Full Name of Contributor Vincent Quatrini			мо	DAY	YEAR					
Mailing Address 1401 Delview Dr						\$ 250.00				
City Greensburg	State PA	Zip Code (Plus 4) 15601	12	31	2020					

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

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

ame of Filing Committee or Candidate				Reporting Period						
BRIAN SAMUEL MALKIN				Fron	n:	<u>11/24/2</u>	<u>020</u> To	: <u>12/31/2020</u>		
					DA	TE		AMOUNT		
Full Name of Contributor Richard Shenkan					мо	DAY	YEAR			
Mailing 6550 Lakeshore Stree	t							\$ 2,600.00		
City West Bloomfield	State MI		Code (Plus	4)	12	19	2020			
Employer Name					Occupat	ion S	Law Offices			
Employer Mailing Address/Principal Place of City Business Attorney					State		Zip Code (Plus 4)			
Full Name of Contributor Craig Malkin					мо	DAY	YEAR			
Mailing 150 Radcliffe Rd Address								\$ 500.00		
City Belmont	State MA		Code (Plus 478	4)	12	19	2020			
Employer Name YM Psychotherapy					Occupation Psychologist					
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)		
Full Name of Contributor Brian Samuel Malkin					мо	DAY	YEAR			
Mailing 2347 Nevin Drive								\$ 2,005.00		
City Pittburgh	State PA	-	237	4)	12	20	2020			
Employer Name Ference & amp; Associates LLC				Occupation Attorneyr						
Employer Mailing Address/Principal Plac Business	mployer Mailing Address/Principal Place of City usiness		City	I		State		Zip Code (Plus 4)		
409 Broad Streeet				h	РА			15143		

\$

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		Report	ting Perio	bd				
			From:			То:	:		
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description				I					
Enter Grand Total of Part E c	n Schedule I. Detailer	l Summary Page	Section	4				PAGE TOT	AL
	in Schedule I, Detailet	i Summaly Paye,	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 Perio	d	
BRIAN SAMUEL MALKIN	From:	<u>11/24/2020</u> To:	<u>12/31/2020</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	ſF)		
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			Reportin	g Period				
			From:			То:		
				DATE		ΑΜΟυΙ	NT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	'					
Description of Contribution:								
inter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.					je,	PAGE TOTAL		
					4	5	0.00	

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

Name of Filing Committee or Candidate					Re	porting P	Period				
					Fro	om:		То:	To:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State	Zip Code(Plus 4)									
Employer of Contributor						Occupa	tion				
Employer Mailing Address/Principal Place of City Business				State	Zip Code(Plus 4)		Code(Plus	Description of Contribut		of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, Ir	n-Kind	Contributio	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
BRIAN SAMUEL MALKIN			From	<u>11/24</u>	<u>4/2020</u>	То:	<u>12/31/2020</u>
				DATE			AMOUNT
To Whom Paid Amanda DiGregory			мо	DAY	YEAR		
Mailing Address 2639 Brighton Road	I		12	19	2020	\$	500.00
City Pittsburgh	State PA	Zip Code (Plus 4) 15212		otion of Ex ign Manag		1	
To Whom Paid First Commonwealth Bank			мо	DAY	YEAR		
Mailing Address PO Box 400			12	20	2020	\$	14.00
City Indiana	State PA	Zip Code (Plus 4) 15701		otion of Exp e Fees sinc			
To Whom Paid Raise The Money			мо	DAY	YEAR		
Mailing Address PO Box 26466			12	23	2020	\$	42.89
City Little Rock	State AR	Zip Code (Plus 4) 72221		otion of Exp Car Proces			
To Whom Paid Raise The Money			мо	DAY	YEAR		
Mailing Address PO Box 26466			12	28	2020	\$	129.12
City Little Rock	State AR	Zip Code (Plus 4) 72221		otion of Exp Card Proce			
To Whom Paid Raise The Money			мо	DAY	YEAR		
Mailing Address PO Box 26466	Aailing Address PO Box 26466		12	29	2020	\$	6.37
City Little Rock	State AR	Zip Code (Plus 4) 72221		otion of Exp Card Proce			

	/hom Paid h Lee Coffey			мо	DAY	YEAR		
Mailin	g Address 819 Heberton Stre	et		12	29	2020	\$	225.00
City	Pittsburg	Description of Expenditure Campaign Graphics						
Enter	Grand Total of Expenditures	on Page 1, Repo	ort Cover Page, Item D.					PAGE TOTAL
							\$	917.38

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

Name of Filing Committee or Candidate			Reporting Period					
BRIAN SAMUEL MALKIN			From:	<u>11</u>	/24/2020	То:	<u>1</u>	12/31/2020
					DATE			Outstanding Balance of Debt
Name of Creditor Brian Samuel Malkin				мо	DAY	YEAR		
Mailing Address 2347 Nevin Drive	2			12	1	2020	\$	2,005.00
City Pittsburgh	State	Zip Code (P	Zip Code (Plus 4) Description of Debt			ot	•	
	РА	15237		Loan to Campaign				
				-				PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	2,005.00