

# Campaign Finance Report

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

Filer Identification Number : 2010090		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: MULLERY, GERALD CITIZENS FOR											
Street Address: 6 MARIE DRIVE											
City: NANTICOKE				State: PA		Zip Code: 18634-0000					
TYPE OF REPORT  (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	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2020	FILING METHOD ( ) CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	119	STH	DEM	40
					11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		11	24	2020			12	31	2020		
A. Amount Brought Forward From Last Report					\$ 28,149.87						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 459.46						
C. Total Funds Available (Sum Of Lines A and B)					\$ 28,609.33						
D. Total Expenditures (From Schedule III)					\$ 255.80						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 28,353.53						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

## 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>
MULLERY, GERALD CITIZENS FOR	From: <u>11/24/2020</u> To: <u>12/31/2020</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>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 459.46

<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>	\$ 459.46
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<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.)

Name of Filing Committee or Candidate	Reporting Period
	From: <span style="float: right;">To:</span>

				DATE	AMOUNT	
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name				Occupation		
Employer Mailing Address/Principal Place of Business			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 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>  MULLERY, GERALD CITIZENS FOR	<b>Reporting Period</b>  <b>From:</b> <u>11/24/2020</u> <b>To:</b> <u>12/31/2020</u>
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				DATE		AMOUNT	
<b>Full Name</b> Deluxe				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 40.46
<b>Mailing Address</b> 101 Hazle Street				12	1	2020	
<b>City</b> Wilkes-Barre	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18702					
<b>Receipt Description</b> Incorrectly double billed.							
<b>Full Name</b> The Citizens Voice				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 312.00
<b>Mailing Address</b> PO Box 3478				12	1	2020	
<b>City</b> Scranton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18505					
<b>Receipt Description</b> Incorrectly double billed.							
<b>Full Name</b> The Times Leader				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 60.00
<b>Mailing Address</b> PO Box 2180				12	1	2020	
<b>City</b> Wilkes-Barre	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18703					
<b>Receipt Description</b> Refund.							
<b>Full Name</b> Greater White Haven Chamber				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 47.00
<b>Mailing Address</b> PO Box 363				12	1	2020	
<b>City</b> White Haven	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18661					
<b>Receipt Description</b> Refund.							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL	
\$	459.46



## 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>	
MULLERY, GERALD CITIZENS FOR		From: <u>11/24/2020</u> To: <u>12/31/2020</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

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MULLERY, GERALD CITIZENS FOR	From <u>11/24/2020</u> To: <u>12/31/2020</u>

DATE				AMOUNT
<b>To Whom Paid</b> USPS	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 70 N. Market Street	12	1	2020	\$ 3.15
<b>City</b> Nanticoke	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18634	<b>Description of Expenditure</b> postage	
<b>To Whom Paid</b> Choice One FCU	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 101 Hazle Street	12	1	2020	\$ 20.00
<b>City</b> Wilkes-Barre	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18702	<b>Description of Expenditure</b> Electronic Transfer Fee	
<b>To Whom Paid</b> Office Depot	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 107 Wyoming Valley Mall	12	1	2020	\$ 1.05
<b>City</b> Wilkes-Barre	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18702	<b>Description of Expenditure</b> Balancing error	
<b>To Whom Paid</b> Act Blue	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO Box 441146	12	9	2020	\$ 1.12
<b>City</b> Somerville	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 02144	<b>Description of Expenditure</b> Service fee	
<b>To Whom Paid</b> Plymouth Public Library	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 107 W. Main Street	12	14	2020	\$ 54.01
<b>City</b> Plymouth	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18651	<b>Description of Expenditure</b> Donation	

<b>To Whom Paid</b> Mountaintop Eagle			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 80.00
<b>Mailing Address</b> PO Box 10			12	14	2020	
<b>City</b> Mountain Top	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18707	<b>Description of Expenditure</b> Advertisement			

  

<b>To Whom Paid</b> Nova Community College Education Foundation			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 46.47
<b>Mailing Address</b> 4001 Wakefield Chapel Road			12	15	2020	
<b>City</b> Annandale	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 22003	<b>Description of Expenditure</b> Donation			

  

<b>To Whom Paid</b> Slocum Township Volunteer Fire Co.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 50.00
<b>Mailing Address</b> 1923 Slocum Road			12	23	2020	
<b>City</b> Wapwallopen	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18660	<b>Description of Expenditure</b> Donation			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 255.80

