

Commonwealth of Pennsylvania

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 : 20200045		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: CITIZENS FOR AMEN BROWN										
Street Address: 3600 CONSHOHOCKEN AVE, APT 710										
City: PHILADELPHIA			State: PA		Zip Code: 19131					
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	190	STH	DEM	51
				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	TO	12	31	2020		
A. Amount Brought Forward From Last Report				\$		1,102.06				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		308.58				
C. Total Funds Available (Sum Of Lines A and B)				\$		1,410.64				
D. Total Expenditures (From Schedule III)				\$		1,275.18				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		135.46				
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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR AMEN BROWN	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

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

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)	\$ 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)	\$ 308.58
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 308.58

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 308.58
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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: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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 Candidate	Reporting Period
	From: _____ To: _____

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

PAGE TOTAL
\$ 0.00

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 Candidate CITIZENS FOR AMEN BROWN	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	
Friends of Ann Marie Mitchell			12	7	2020	\$ 308.58
Mailing Address 172 Golfview Drive						
City Ivyland	State PA	Zip Code (Plus 4) 18974				

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

PAGE TOTAL
\$ 308.58

**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: _____ To: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	\$ 0.00
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.

PAGE TOTAL
\$ 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.

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

			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.

PAGE TOTAL
\$ 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 CITIZENS FOR AMEN BROWN	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
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: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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.				PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address					\$ 0.00
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
CITIZENS FOR AMEN BROWN	From <u>11/24/2020</u> To: <u>12/31/2020</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
ActBlue/Vantiv	12	3	2020	\$	4.50
Mailing Address 366 Summer Street					
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure processing fees		
To Whom Paid	MO	DAY	YEAR		
Park Harrisburg/On Street Meters					
Mailing Address 223 Walnut Street #1	12	3	2020	\$	3.00
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure travel expense/parking		
To Whom Paid	MO	DAY	YEAR		
Maggiano's					
Mailing Address 2000 NJ-38	11	28	2020	\$	251.88
City Cherry Hill	State NJ	Zip Code (Plus 4) 08002	Description of Expenditure dinner meeting		
To Whom Paid	MO	DAY	YEAR		
TD Bank					
Mailing Address 3735 Walnut Street	11	30	2020	\$	3.00
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure paper statement fee		
To Whom Paid	MO	DAY	YEAR		
Lowe's					
Mailing Address 1500 N 50th Street	12	4	2020	\$	467.41
City Philadelphia	State PA	Zip Code (Plus 4) 19131	Description of Expenditure supplies for repairs to campaign office		
To Whom Paid	MO	DAY	YEAR		
Sal's Produce					
Mailing Address 676 N Broad St	12	4	2020	\$	76.50
City Philadelphia	State PA	Zip Code (Plus 4) 19130	Description of Expenditure lunch for volunteers		

To Whom Paid PPA			MO	DAY	YEAR	\$	18.00
Mailing Address 701 Market St #5400			12	3	2020		
City Philadelphia	State PA	Zip Code (Plus 4) 19106	Description of Expenditure parking for meeting				
To Whom Paid Pete's pizza			MO	DAY	YEAR	\$	39.05
Mailing Address 4074 Lancaster Avenue			12	7	2020		
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure food for volunteers				
To Whom Paid ActBlue/Vantiv			MO	DAY	YEAR	\$	5.94
Mailing Address 366 Summer Street			12	9	2020		
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure processing fees				
To Whom Paid Hilton			MO	DAY	YEAR	\$	74.28
Mailing Address 1 N 2nd St			12	10	2020		
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure travel expense				
To Whom Paid Honey Grow			MO	DAY	YEAR	\$	57.62
Mailing Address 3731 Walnut Street			12	11	2020		
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure food for volunteers				
To Whom Paid PPA			MO	DAY	YEAR	\$	18.00
Mailing Address 701 Market St #5400			12	11	2020		
City Philadelphia	State PA	Zip Code (Plus 4) 19106	Description of Expenditure parking for meeting				
To Whom Paid Produce Junction			MO	DAY	YEAR	\$	213.00
Mailing Address 2243 Bryn Mawr Ave			12	21	2020		
City Philadelphia	State PA	Zip Code (Plus 4) 19131	Description of Expenditure food for community outreach				
To Whom Paid TD Bank			MO	DAY	YEAR	\$	3.00
Mailing Address 3735 Walnut Street			12	31	2020		
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure paper statement fee				

To Whom Paid			MO	DAY	YEAR	
Shell Oil						
Mailing Address 4628 Ridge Avenue			12	21	2020	\$ 40.00
City Philadelphia	State PA	Zip Code (Plus 4) 19129	Description of Expenditure gas for outreach volunteer			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,275.18

