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 2019	0171			Repo Filed			ANDI	DATE		COM	AITTEE	~	LUB	91191	
Name of Filing C	ommittee, Candida	ate or L	obbyist:		FRIEN	IDS OF	BRE	тт ві	JRMAN				•			
Street Address:	1064 TYLER D	RIVE														
City:	NEWTOWN SQ	UARE					Sta	te:	PA			Zip Co	de: 19	9073		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIN	AY IARY	F	POST-	3.		AMENDN REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 E	AY CTION	F	POST-	6.		TERMINA REPORT		Yes	No	
report type)	ANNUAL REPORT	7. X	Year 2020				NG M					PAPER		$\overline{}$	DISKE	TTE
Name of Office S	- Sought by Candidat	:e:					DA	TE O	F ELEC	CTIO	N	District Number	Office Code	Pai	ty Code	County Code
							МО		DAY	YE	AR			DEN	1	
								11		3	2020		(SEE IN	ISTRUCTI	ONS FOR	CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			МО		DAY	YE	AR	FC	OR OFFI	CE USE	ONLY	
			11 24	2	020	то		12	3	31	2020					
A. Amount Bro	ught Forward Fron	ı Last R	eport				\$				950.00					
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sche	dule I) !	\$			13,0)50.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			!	\$			15,0	00.00					
D. Total Expend	ditures (From Sche	edule II	I)			. !	\$			15,0	00.00					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$				0.00					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	!	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)			\$				0.00					
				AFF	IDAV	/IT SI	ECTI	ON								
I swear (or affirm)	that this report, incl		_						-		_		of my kno	wledge	and beli	ef , true
correct and comple	ete. cribed before me this															
	day of		20			_					ignature	of Perso	n Submit	ting Ke	oort	
	Signatur	·e										Prin	ited Nam	e		
My Commission Ex	·											Ema				
	МО		AY	YR	•••	a "				a Cod	le	Daytin	ne Telepi	none Nu	mber	
	a report of a cand that to the best of m				•						y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
,	ribed before me this										s	ignature (of Candid	ate		<u> </u>
	day of		_ 20			_										
	Signature					_						Printe	ed Name			
My Commission Exp	-											Ema	nil			-
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BRETT BURMAN	From:	11/24/20	<u>)20</u> To:	12/31/2020
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)			\$	0.00
All Other Contributions (Part D)			\$	13,050.00
TOTAL for the Reporting	Period	(3)	\$	13,050.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	13,050.00

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 Candidat	e	R	Reporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL\$ 0.00

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		Rep	orting P				
			From: To) :		
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address	<u> </u>						\$	0.00
City	State	Zip Code (Plus 4))					

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			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			
FRIENDS OF BRETT BURMAN			Fron	n:	11/24/2	<u>020</u> T	o:	12/31/2020
				D#	ATE			AMOUNT
Full Name of Contributor BRETT BURMAN				МО	DAY	YEAR	\$	13,050.00
Mailing Address 1064 DYLER DRIVE				12	30	2020	\Box	
City NEWTOWN SQUARE	State	Zip Code (Plus	5 4)	1 12	30	2020	´	
	PA	19073						
Employer Name SELF EMPLOYED				Occupat	ion	CONSU	LTAN	Γ
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip (Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I. Detailed Su	ımmarv Page,	Section	on 3.		Γ		PAGE TOTAL
	,	, , , , , , , , , , , , , , , , , , , ,					\$	13,050.00

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 Candidate		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Pe	riod	
FRIENDS OF BRETT BURMAN	From:	<u>11/24/2020</u> To:	12/31/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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	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)	\$	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 Cand				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 on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	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				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
FRIENDS OF BRETT BURMAN	From	11/24/2020	То:	12/31/2020

					DATE		AMOUNT
To W	nom Paid			мо	DAY	YEAR	
BRET	T BURMAN	1.0					
Mailir	g Address 1064 TYLER DI	12	30	2020	\$ 1,950.00		
City	NEWTOWN SQUARE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	19073	DEBT R	EPAYMENT	·	
							PAGE TOTAL
Ente	r Grand Total of Expenditu	\$ 1,950.00					