### **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 :		Report CANDID		DATE		COMN	1ITTEE	<b>✓</b>	LOB	BYIST									
Name of Filing C	ommittee, Can	didate o	r Lob	byist:		FRIE	ND:	S OF	MARC	I M	USTEL	LO							
Street Address:																			
City:	BUTLER								State	e:	PA			Zip Cod	l <b>e:</b> 16	001			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ND FRIDAY PRIMARY	PRE-	2		30 DA		Р	OST-	3.		AMENDMENT REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ND FRIDAY	' PRE	- 5			30 DAY POST- 6. ELECTION				TERMINA REPORT?	Yes	N	0	<b>/</b>		
report type)	ANNUAL REPO	<b>RT</b> 7. <b>X</b>	Y	<b>/ear</b> 2020					NG ME		_			PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	ought by Candi	idate:							DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	Y	EAR			REF	1	•	
										11		3	2020		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		МО		DAY	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	trom:		11	24	20	020	T	0		12	,	31	2020						
A. Amount Brought Forward From Last Report								\$				24,	083.03						
B. Total Moneta	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 200.00								200.00										
C. Total Funds	Available (Sum	Of Lines	s A a	nd B)				\$				24,	283.03						
D. Total Expend	ditures (From S	chedule	III)	1				\$				8	368.10						
E. Ending Cash	Balance (Subti	ract Line	D Fr	rom Line C	:)			\$				23,4	114.93						
F. Value Of In-	Kind Contributi	ons Rece	eived	d (From Sc	hedul	e II)	)	\$					0.00						
G. Unpaid Debt	s And Obligation	ns (Fron	n Scl	hedule IV)	)			\$					0.00						
					AFF:	IDA	VI	ΓSE	CTIO	NC									
PART I - If this is				_									_						
I swear (or affirm) correct and comple		including	the a	ittached sch	edules	filed	on	paper	or by e	electr	ronic m	edium	ı, are to t	he best of	my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me day of	this	2	20									Signature	of Persor	Submitt	ing Re <sub>l</sub>	ort		_
	Sign	ature						-						Print	ed Name				_
My Commission Ex	pires							_		•				Emai	I				
	мо		DAY	7	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate	e's au	uthorized (	Comm	ittee	, Ca	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my kno	wledg	ge and belie	f this	politi	cal	comm	ittee h	as no	ot viola	ted ar	ny provisi	ons of the	act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me t day of	his	_	20									Si	gnature o	f Candida	ite			_
	— ——		—	20				-						Printe	d Name				-
	Signatu	re						-						_					
My Commission Exp	ires													Emai	1				
	мо		DAY	,	YR			•			Area	Code		Da	ytime Te	elephor	e Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF MARCI MUSTELLO	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)			\$	200.00
TOTAL for the Reporting	) Period	(2)	\$	200.00
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)	\$	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			\$	200.00

#### **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		Reporting	Period			
		1	From:		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

**Reporting Period** 

FRIENDS OF MARCI MUSTELLO

From: <u>11/24/2020</u> To:

DATE

12/31/2020

AMOUNT

Full N	ame of Contributor			мо	DAY	YEAR	
KENN	IETH M MCDONALD			1-10	אלו	ILAK	
Mailir	ng Address						\$ 200.00
City	BUTLER	State	Zip Code (Plus 4)	12	10	2020	
		PA	160027619				

**PAGE TOTAL** 200.00

\$

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			Reporting	Period				
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	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	2			Rep	orting Pe	riod			
				Fror	n:		To	<b>)</b> :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	p Code (Plus	s <b>4</b> )					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE TOTAL
								\$	0.00

## 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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (	Plus 4)				
Receipt Description	•	•					
Enter Grand Total of Part I	on Schodulo I. Dotailed	Summary Dage	Soction	4			PAGE TOTAL
cincer Granu Total of Part I	on Schedule 1, Detailed	Summary Page,	Section	<b>⊶.</b>			\$ 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 Per	iod	
FRIENDS OF MARCI MUSTELLO	From:	<u>11/24/2020</u> <b>To:</b>	<u>12/31/2020</u>
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 Car	ndidate		Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$	C	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 Sum	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				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.	<b></b>									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	ne of Filing Committee or Candidate						
FRIENDS OF MARCI MUSTELL	0		From	11/24	<u>4/2020</u>	То:	12/31/2020
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
LN CONSULTING-REPLACEMEN CYCLE 4 CF RPT							
ailing Address				2	2020	<b>1</b> \$	693.10
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17101		ATED PHOI		FOR ELE	CTION-
To Whom Paid			мо	DAY	YEAR		
BUTLER RADIO NETWORK			МО	DAT	TEAR		
Mailing Address			12	16	2020	\$	175.00
City BUTLER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16001	HOLID/	AY SEASON	GREETI	NGS RADI	iO ADS
Enter Grand Total of Expen							PAGE TOTAL

868.10