

# 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 : 20210164		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: MARLENE 4 SENATE										
Street Address: 1540 MAIN STREET										
City: PECKVILLE				State: PA		Zip Code: 18452				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	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.	Year 2021	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
				MO	DAY	YEAR	GRN			
				11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	2021		3	29	2021		
A. Amount Brought Forward From Last Report				\$ 0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 11,645.25						
C. Total Funds Available (Sum Of Lines A and B)				\$ 11,645.25						
D. Total Expenditures (From Schedule III)				\$ 9,841.84						
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 1,803.41						
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 719.19						
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 2,600.10						

## 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>
MARLENE 4 SENATE	From: <u>1/1/2021</u> To: <u>3/29/2021</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 7,325.25

<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>	\$ 1,075.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,075.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 1,200.00
<b>All Other Contributions (Part D)</b>	\$ 2,045.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 3,245.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<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>	\$ 11,645.25
---	--------------



**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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARLENE 4 SENATE	From: <u>1/1/2021</u> To: <u>3/29/2021</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$
JEFFREY L SMITH							
Mailing Address 913 CHURCH STREET				4	19	2021	
City JESSUP		State PA	Zip Code (Plus 4) 18434				
Full Name of Contributor				MO	DAY	YEAR	\$
JEFFREY L SMITH							
Mailing Address 913 CHURCH STREET				4	15	2021	
City JESSUP		State PA	Zip Code (Plus 4) 18434				
Full Name of Contributor				MO	DAY	YEAR	\$
ANTHONY & SHARON WRIGHTSON							
Mailing Address 215 R GRASSY ISLAND AVENUE				4	15	2021	
City JESSUP		State PA	Zip Code (Plus 4) 18434				
Full Name of Contributor				MO	DAY	YEAR	\$
NORTHEAST ADVISORY GROUP LLC-SUSAN SARITI							
Mailing Address 1440 NORTH WASHINGTON AVENUE SUITE 200				4	28	2021	
City SCRANTON		State PA	Zip Code (Plus 4) 18510				
Full Name of Contributor				MO	DAY	YEAR	\$
SUSAN E KEEFER							
Mailing Address 2820 SHAFFER ROAD				4	29	2021	
City BLOOMSBURG		State PA	Zip Code (Plus 4) 17815				
Full Name of Contributor				MO	DAY	YEAR	\$
ANN CAPELLINI							
Mailing Address 220 WOODCREST DRIVE				4	28	2021	
City JESSUP		State PA	Zip Code (Plus 4) 18434				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
ROBERT E & SHARON BLAKE CUFF							
Mailing Address 315 SPRING STREET				4	29	2021	
City DUNMORE	State PA	Zip Code (Plus 4) 18512					

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

<b>PAGE TOTAL</b>	
\$	1,075.00

**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.**

<b>Name of Filing Committee or Candidate</b>  MARLENE 4 SENATE	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2021</u> <b>To:</b> <u>3/29/2021</u>
--	---

				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	700.00
LACKAWANNA COUNTY GREEN PARTY								
Mailing Address 1285 REYNOLDS AVENUE								
City TAYLOR		State PA	Zip Code (Plus 4) 18517	4	5	2021		
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
PROGRESSIVE WOMEN OF NEPA								
Mailing Address PO BOX 191								
City DUNMORE		State PA	Zip Code (Plus 4) 18512	4	22	2021		

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

<b>PAGE TOTAL</b>
\$ 1,200.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  MARLENE 4 SENATE	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2021</u> <b>To:</b> <u>3/29/2021</u>
--	---

				DATE	AMOUNT	
<b>Full Name of Contributor</b> LORI A & JOHN M SHOVLIN				<b>MO</b>	<b>DAY</b>	
<b>Mailing Address</b> RR 1 BOX 1236				4	3	
<b>City</b> CARBONDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18407		2021	\$ 500.00	
<b>Employer Name</b> N/A				<b>Occupation</b> RETIRED		
<b>Employer Mailing Address/Principal Place of Business</b> N/A		<b>City</b>		<b>State</b>		<b>Zip Code (Plus 4)</b>
<b>Full Name of Contributor</b> JANET KELLY				<b>MO</b>	<b>DAY</b>	
<b>Mailing Address</b> 13 ALPINE DRIVE				4	28	
<b>City</b> MOOSIC	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18507		2021	\$ 500.00	
<b>Employer Name</b> N/A				<b>Occupation</b> RETIRED		
<b>Employer Mailing Address/Principal Place of Business</b> N/A		<b>City</b>		<b>State</b>		<b>Zip Code (Plus 4)</b>
<b>Full Name of Contributor</b> THOMAS MARK HOWE				<b>MO</b>	<b>DAY</b>	
<b>Mailing Address</b> 1059 ALBRIGHT AVENUE				4	20	
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18508		2021	\$ 545.00	
<b>Employer Name</b> POCONO LAKE PRESERVE INC.				<b>Occupation</b> ACCOUNTANT		
<b>Employer Mailing Address/Principal Place of Business</b> 729 N SHORE DRIVE		<b>City</b> POCONO LAKE		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 183478261
<b>Full Name of Contributor</b> HELEN D & SAM R SEBASTIANELLI				<b>MO</b>	<b>DAY</b>	
<b>Mailing Address</b> 125 BUTTONWOOD STREET				4	12	
<b>City</b> JESSUP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18434		2021	\$ 500.00	
<b>Employer Name</b> N/A				<b>Occupation</b> RETIRED		
<b>Employer Mailing Address/Principal Place of Business</b> N/A		<b>City</b>		<b>State</b>		<b>Zip Code (Plus 4)</b>

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

<b>PAGE TOTAL</b>
\$ 2,045.00

## 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
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

			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.

<b>PAGE TOTAL</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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MARLENE 4 SENATE		From: <u>1/1/2021</u> To: <u>3/29/2021</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 146.07
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 573.12
<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.)			\$ 719.19

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARLENE 4 SENATE	<b>From:</b> <u>1/1/2021</u> <b>To:</b> <u>3/29/2021</u>

				DATE	AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 75.00
JESSICA MEONI			4	22	2021	
Mailing Address 324 14TH AVENUE						
City SCRANTON	State PA	Zip Code (Plus 4) 18504				
Description of Contribution: BILLBOARD DEGISN/LAYOUT						
Full Name of Contributor			MO	DAY	YEAR	\$ 155.52
HOLLY PETROCHKO			3	26	2021	
Mailing Address 4 OLD MILL ROAD						
City JERMYN	State PA	Zip Code (Plus 4) 18433				
Description of Contribution: FOOD/SUPPLIES FOR CAMPAIGN KICKOFF						
Full Name of Contributor			MO	DAY	YEAR	\$ 230.00
HOLLY PETROCHKO			4	3	2021	
Mailing Address 4 OLD MILL ROAD						
City JERMYN	State PA	Zip Code (Plus 4) 18433				
Description of Contribution: FOOD/SUPPLIES FOR CAMPAIGN KICKOFF						
Full Name of Contributor			MO	DAY	YEAR	\$ 112.60
HOLLY PETROCHKO			4	4	2021	
Mailing Address 4 OLD MILL ROAD						
City JERMYN	State PA	Zip Code (Plus 4) 18433				
Description of Contribution: FOOD/SUPPLIES FOR CAMPAIGN KICKOFF						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL
						\$ 573.12

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

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 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARLENE 4 SENATE	From <u>1/1/2021</u> To: <u>3/29/2021</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
VILLA MARIA II				
<b>Mailing Address</b> 1610 WASHBURN STREET	4	25	2021	\$ 1,313.34
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18504	<b>Description of Expenditure</b> RESTAURANT EVENT SPACE RENTAL	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
JAWORSKI SIGN COMPANY				
<b>Mailing Address</b> 913 SOUTH MAIN AVENUE	5	3	2021	\$ 2,279.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18504	<b>Description of Expenditure</b> SIGN PRINTING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
KING OUTDOOR ADVERTISING				
<b>Mailing Address</b> PO BOX 912	4	28	2021	\$ 1,250.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18501	<b>Description of Expenditure</b> BILLBOARD ADS	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
JOYCE OUTDOOR ADVERTISING				
<b>Mailing Address</b> 317 POPLAR STREET SUITE 2B	4	28	2021	\$ 2,700.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18509	<b>Description of Expenditure</b> BILLBOARD ADS	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
VIP - VISUAL IMAGE PRODUCTIONS				
<b>Mailing Address</b> 718 SCRANTON-CARBONDALE HIGHWAY	4	7	2021	\$ 709.50
<b>City</b> MAYFIELD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18433	<b>Description of Expenditure</b> SIGNS/CARD/FLYERS PRINTING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
CANGIANO'S				
<b>Mailing Address</b> 235 SCRANTON-CARBONDALE HIGHWAY	4	15	2021	\$ 378.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18508	<b>Description of Expenditure</b> RESTAURANT EVENT SPACE RENTAL	

<b>To Whom Paid</b> THE DUNMOREAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 1175 MOREL STREET			5	3	2021	
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18509	<b>Description of Expenditure</b> NEWSPAPER ADS			

  

<b>To Whom Paid</b> TIMES LEADER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 712.00
<b>Mailing Address</b> 90 EAST MARKET STREET			5	3	2021	
<b>City</b> WILKES-BARRE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18701	<b>Description of Expenditure</b> NEWSPAPER ADS			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 9,841.84

**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**

<b>Name of Filing Committee or Candidate</b>  MARLENE 4 SENATE	<b>Reporting Period</b>  From: <u>1/1/2021</u> To: <u>3/29/2021</u>
--	---

			DATE	Outstanding Balance of Debt		
Name of Creditor CENTER CITY PRINT			MO	DAY	YEAR	\$ 37.10
Mailing Address 119 PENN AVENUE			4	19	2021	
City SCRANTON	State PA	Zip Code (Plus 4) 18503	Description of Debt TICKET PRINTING			
Name of Creditor POSTNET			MO	DAY	YEAR	\$ 2,563.00
Mailing Address 219 NORTH MAIN AVENUE			4	7	2021	
City SCRANTON	State PA	Zip Code (Plus 4) 18504	Description of Debt FLYERS/SIGNS PRINTING			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 2,600.10