

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

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

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)	\$ 1,075.00
TOTAL for the Reporting Period (2)	\$ 1,075.00

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

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 11,645.25
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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
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			4	15	2021
913 CHURCH STREET					
City	State	Zip Code (Plus 4)			
JESSUP	PA	18434			\$ 100.00
Full Name of Contributor			MO	DAY	YEAR
JEFFREY L SMITH					
Mailing Address			4	19	2021
913 CHURCH STREET					
City	State	Zip Code (Plus 4)			
JESSUP	PA	18434			\$ 250.00
Full Name of Contributor			MO	DAY	YEAR
ANTHONY & SHARON WRIGHTSON					
Mailing Address			4	15	2021
215 R GRASSY ISLAND AVENUE					
City	State	Zip Code (Plus 4)			
JESSUP	PA	18434			\$ 75.00
Full Name of Contributor			MO	DAY	YEAR
NORTHEAST ADVISORY GROUP LLC-SUSAN SARITI					
Mailing Address			4	28	2021
1440 NORTH WASHINGTON AVENUE SUITE 200					
City	State	Zip Code (Plus 4)			
SCRANTON	PA	18510			\$ 100.00
Full Name of Contributor			MO	DAY	YEAR
SUSAN E KEEFER					
Mailing Address			4	29	2021
2820 SHAFFER ROAD					
City	State	Zip Code (Plus 4)			
BLOOMSBURG	PA	17815			\$ 200.00

Full Name of Contributor ANN CAPELLINI			MO	DAY	YEAR	\$ 250.00
Mailing Address 220 WOODCREST DRIVE			4	28	2021	
City JESSUP	State PA	Zip Code (Plus 4) 18434				

Full Name of Contributor ROBERT E & SHARON BLAKE CUFF			MO	DAY	YEAR	\$ 100.00
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.

PAGE TOTAL
\$ 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.

Name of Filing Committee or Candidate MARLENE 4 SENATE	Reporting Period From: <u>1/1/2021</u> To: <u>3/29/2021</u>
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			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
LACKAWANNA COUNTY GREEN PARTY	1285 REYNOLDS AVENUE	TAYLOR	4	5	2021	\$ 700.00
	State PA	Zip Code (Plus 4) 18517				
PROGRESSIVE WOMEN OF NEPA	PO BOX 191	DUNMORE	4	22	2021	\$ 500.00
	State PA	Zip Code (Plus 4) 18512				

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

PAGE TOTAL
\$ 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.)**

Name of Filing Committee or Candidate MARLENE 4 SENATE	Reporting Period From: <u>1/1/2021</u> To: <u>3/29/2021</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
HELEN D & SAM R SEBASTIANELLI					
Mailing Address 125 BUTTONWOOD STREET	4	12	2021		\$ 500.00
City JESSUP State PA Zip Code (Plus 4) 18434					
Employer Name N/A	Occupation RETIRED				
Employer Mailing Address/Principal Place of Business N/A	City		State	Zip Code (Plus 4)	

Full Name of Contributor	MO	DAY	YEAR		
THOMAS MARK HOWE					
Mailing Address 1059 ALBRIGHT AVENUE	4	20	2021		\$ 545.00
City SCRANTON State PA Zip Code (Plus 4) 18508					
Employer Name POCONO LAKE PRESERVE INC.	Occupation ACCOUNTANT				
Employer Mailing Address/Principal Place of Business 729 N SHORE DRIVE	City POCONO LAKE		State PA	Zip Code (Plus 4) 183478261	

Full Name of Contributor	MO	DAY	YEAR		
JANET KELLY					
Mailing Address 13 ALPINE DRIVE	4	28	2021		\$ 500.00
City MOOSIC State PA Zip Code (Plus 4) 18507					
Employer Name N/A	Occupation RETIRED				
Employer Mailing Address/Principal Place of Business N/A	City		State	Zip Code (Plus 4)	

Full Name of Contributor LORI A & JOHN M SHOVLIN			MO	DAY	YEAR	\$ 500.00
Mailing Address RR 1 BOX 1236			4	3	2021	
City CARBONDALE	State PA	Zip Code (Plus 4) 18407				
Employer Name N/A			Occupation RETIRED			
Employer Mailing Address/Principal Place of Business N/A		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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
	From: _____ To: _____

			DATE	AMOUNT	
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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 MARLENE 4 SENATE	Reporting Period From: <u>1/1/2021</u> To: <u>3/29/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 146.07
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 573.12
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.)	\$ 719.19

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

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

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
JESSICA MEONI	4	22	2021	\$ 75.00
Mailing Address 324 14TH AVENUE				
City SCRANTON	State PA	Zip Code (Plus 4) 18504		
Description of Contribution: BILLBOARD DEGISN/LAYOUT				
HOLLY PETROCHKO	3	26	2021	\$ 155.52
Mailing Address 4 OLD MILL ROAD				
City JERMYN	State PA	Zip Code (Plus 4) 18433		
Description of Contribution: FOOD/SUPPLIES FOR CAMPAIGN KICKOFF				
HOLLY PETROCHKO	4	3	2021	\$ 230.00
Mailing Address 4 OLD MILL ROAD				
City JERMYN	State PA	Zip Code (Plus 4) 18433		
Description of Contribution: FOOD/SUPPLIES FOR CAMPAIGN KICKOFF				
HOLLY PETROCHKO	4	4	2021	\$ 112.60
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: _____
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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
MARLENE 4 SENATE	From <u>1/1/2021</u> To: <u>3/29/2021</u>

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

To Whom Paid CANGIANO'S			MO	DAY	YEAR	
Mailing Address 235 SCRANTON-CARBONDALE HIGHWAY			4	15	2021	\$ 378.00
City SCRANTON	State PA	Zip Code (Plus 4) 18508	Description of Expenditure RESTAURANT EVENT SPACE RENTAL			
To Whom Paid THE DUNMOREAN			MO	DAY	YEAR	
Mailing Address 1175 MOREL STREET			5	3	2021	\$ 500.00
City SCRANTON	State PA	Zip Code (Plus 4) 18509	Description of Expenditure NEWSPAPER ADS			
To Whom Paid TIMES LEADER			MO	DAY	YEAR	
Mailing Address 90 EAST MARKET STREET			5	3	2021	\$ 712.00
City WILKES-BARRE	State PA	Zip Code (Plus 4) 18701	Description of Expenditure NEWSPAPER ADS			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 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**

Name of Filing Committee or Candidate MARLENE 4 SENATE				Reporting Period 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	
Mailing Address 119 PENN AVENUE				4	19	2021	\$ 37.10
City SCRANTON	State PA	Zip Code (Plus 4) 18503		Description of Debt TICKET PRINTING			
						DATE	Outstanding Balance of Debt
Name of Creditor POSTNET				MO	DAY	YEAR	
Mailing Address 219 NORTH MAIN AVENUE				4	7	2021	\$ 2,563.00
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