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 :		Repo Filed			CAND	DATE		СОМ	ITTEE	✓	LOBE	YIST					
Name of Filing C	Committee, Cand	idate or L	obbyist:		BRAN	CO, k	Œν	/IN FRIE	NDS O	F			_				
Street Address:	6003 VALLE	Y FORGE	DR														
City:	COOPERSBU	JRG						State:	PA			Zip Code: 18036					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	2ND FRIDAY PRE- 2. 3 PRIMARY P					POST- 3.			AMENDM REPORT		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.)			Y ION	POST-	6.		TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPOR	7.	Year 2021					IG METH				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candid	date:	-		•			DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code	
								МО	DAY	ΥI	AR		10000	DEM	<u>_</u>	39	
								11		2	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
Summary of Expenditures	Receipts and	МО	DAY Y	EAR				МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures			9 14	20)21	то		10		18	2021						
A. Amount Bro	ught Forward Fr	om Last R	eport				\$			19,6	550.10						
B. Total Monet	ary Contribution	s And Rec	eipts (From S	che	dule I		\$				0.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			19,6	550.10						
D. Total Expend	ditures (From Se	chedule II	I)				\$			2	175.25						
E. Ending Cash	Balance (Subtra	act Line D	From Line C)				\$			19,1	74.85						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sche	edul	e II)		\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From :	Schedule IV)				\$				0.00			1			
			Д	\FF	IDAV	IT S	SEG	CTION									
PART I - If this is		• /	=						• •		_						
I swear (or affirm) correct and complete		ncluding th	e attached sched	lules	filed o	n pap	er c	or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , true	
Sworn to and subs	cribed before me t day of	his	20							S	Signature	of Perso	n Submit	ting Rep	ort		
	Signa	tura				_						Prin	ted Name	e			
My Commission Ex	_	iture							-			Ema	il				
	мо	D	AY	YR					Ar	ea Coc	le	Daytim	e Telepi	none Nui	nber		
Part II- If this is	a report of a ca	ndidate's	authorized Co	mm	ittee,	Cand	lida	ate shall	all sign here.								
I swear (or affirm) No 320) as amende		f my knowl	edge and belief	this	politica	l con	nmi	ittee has r	not viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc		is							Signature of Candidate								
	day of 					_						D	d Nac				
	Signatur	e				_						Printe	d Name				
My Commission Exp	_	-										Ema	il				
	МО	D	AY	YR		_			Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BRANCO, KEVIN FRIENDS OF	From:	<u>9/14/202</u>	<u>1</u> To:	10/18/2021
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)			\$	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) 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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL\$ 0.00

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 From			oorting P					
					DATE	To		AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
					1			

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

PAGE TOTAL \$0.00

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			Reporting Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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			Rep	orting Pe	riod				
			Fron	n:		То	То:		
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAC	GE 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 or Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	•			\$	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 Perio	d	
BRANCO, KEVIN FRIENDS OF	From:	<u>9/14/2021</u> To:	10/18/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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 Candid	Name of Filing Committee or Candidate Rep				Reporting Period						
	From					From: To:					
				DATE			AMOUNT				
Full Name of Contributor			МО	DAY	YEAR						
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)									
Description of Contribution:											
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL				
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL				
						\$	0.00				

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Re	porting	Period				
						From:			То:		
					•		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•					Occupa	ation				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Desc	cript	ion of	f Contribution
Enter Grand Total of Part G on Sci Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed					PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reporti	ng Period			
BRANCO, KEVIN FRIENDS OF			From	<u>9/1</u> 4	4/2021	То:	10/18/2021
				DATE			AMOUNT
To Whom Paid lehigh valley labor council			мо	DAY	YEAR		
Mailing Address PO BOX 20226				24	2021	\$	32.85
City lehigh valley	Descrip email	otion of Exp	penditure				
To Whom Paid lehigh valley labor council				DAY	YEAR		
Mailing Address PO BOX 202	226		9	27	2021	\$	42.40
City lehigh valley	State PA	Zip Code (Plus 4) 18002	Descrip web ho	otion of Exp	penditure		
To Whom Paid lehigh valley labor council			МО	DAY	YEAR		
Mailing Address PO BOX 20226			10	18	2021	\$	400.00
City lehigh valley State PA Zip Code (Plus 4) 18002				otion of Exp admission	enditure		
	I	L	ı				PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

475.25