### **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 2022	2C0237			Rep File			CAI	NDI	DATE	<b>*</b>	C	OMMITTE	E	LOB	BYIS <sup>-</sup>	Г	
Name of Filing C	Committee, Candid	date or L	obbyist:		JOHI	N B	ROWI	١										
Street Address:																		
City:								State	e:				Zip Cod	e: 18	3013			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	] [	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u> 5	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes		No	<b>/</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022					IG ME					PAPER		<b>\</b>	DIS	KETTE	
Name of Office S	Sought by Candida	ate:						DAT	ΕO	F ELE	CTI	ION	District Number	Office Code	Pai	rty Co	de Cou Cod	
								МО		DAY	,	YEAR	-1	LTG	REI	)		
LIEUTENANT G	OVERNOR								11		8	2022		(SEE IN	STRUCTI	ONS FO	R CODE	S)
	Receipts and	МО	DAY	YEAR	1			МО		DAY		YEAR	FO	R OFFI	CE USE	ONL	Y	
Expenditures	s from:		1 1	2	022	Т	0		3	:	28	2022						
A. Amount Bro	ught Forward Fro	m Last R	leport				\$	-				0.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$					0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From Sch	iedule II	I)				\$				3	3,874.84	]					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				(3,	874.84)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	)	\$					0.00	_					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			•			
				AFF	IDA	VI	T SE	CTIC	N									
	s a Committee rep	-	_										_					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sc	hedules	s filed	l on	paper	or by e	electr	onic m	ediu	ım, are to	the best of	my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me the	is	20						,			Signatur	e of Persor	Submit	ting Re	port		
	Signate	ure					- -		,				Print	ed Nam	e			_
My Commission Ex	_								•				Emai	ı				_
	мо	D	AY	YR						Arc	ea C	ode	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andid	ate sh	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and beli	ief this	polit	ical	comm	ittee h	as no	ot viola	ted	any provi	sions of the	act of J	une 3,1	937 (I	P.L. 133	33,
Sworn to and subsc	ribed before me this	1											Signature o	f Candid	ate			-
	day of						-						Printe	d Name				-
	Signature						-						E	1				_
My Commission Exp	pires												Emai	•				
	МО	D	AY	YR			•			Area	Cod	le	Da	ytime T	elephoi	ne Nur	nber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
JOHN BROWN	From:	1/1/202	<u>2</u> To:	3/28/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	J 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	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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

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	1	Reporting	Period			
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Com	mittee		мо	DAY	YEAR		
Mailing Address						<b>\$</b>	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 Committe	ee or Candidate		Rep	oorting P	eriod			
			Fro	m:		To	<b>)</b> :	
					DATE			AMOUNT
Full Name of Contributor				МО	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 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			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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			
			Fror	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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	or Candidate		Report	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>	1					<u> </u>	
	- C		<b>.</b> .:	_				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 Period		
JOHN BROWN	From:	<u>1/1/2022</u> <b>To:</b>	<u>3/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Candidate			Reporting	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b> </b>		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(	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

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
JOHN BROWN	From	1/1/2022	То:	3/28/2022

					DATE			AMOUNT
To Whom Paid				МО	DAY	YEAR		
NORTHAMPTON (	COUNTY REPUBLICAN	COMMITTEE		М		i Zaux		
Mailing Address				1	18	2022	\$	75.00
City BETHLEH	IEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	18020	LINCON	DAY BREA	KFAST		
To Whom Paid				мо	DAY	YEAR		
PA STATE REPUB	BLICAN COMMITTEE			МО		ILAK		
Mailing Address				1	24	2022	\$	1,250.00
City HARRISB	BURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	17101	LINCOL	N DAY DIN	NER		
To Whom Paid				мо	DAY	YEAR		
COUNTRY INN A	ND SUITES			МО		ILAK		
Mailing Address				2	4	2022	\$	167.03
City LANSCAS	STER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	17602	HOTEL	FOR STATE	СОММІТ	TTEE DINN	ER
To Whom Paid				МО	DAY	YEAR		
CENTRE COUNTY	REPUBLICAN COMMI	TTEE		MO	DAT	TEAR		
Mailing Address				2	10	2022	\$	150.00
City STATE CO	OLLEGE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	·	
		PA		1				
		PA	16801	LINCOL	N DAY DIN	NER		
To Whom Paid		PA	16801					
	HOTEL AND SUITES	PA	16801	MO	DAY DIN	YEAR		
	HOTEL AND SUITES	PA	16801				\$	119.87
COBBLESTONE H		State	Zip Code (Plus 4)	<b>MO</b> 1	DAY	<b>YEAR</b> 2022	\$	119.87
COBBLESTONE H				MO 1 Descrip	<b>DAY</b> 29	YEAR 2022 enditure	\$	119.87
COBBLESTONE H		State	Zip Code (Plus 4)	MO 1 Descrip	29 tion of Exp	YEAR 2022 enditure	\$	119.87
COBBLESTONE H Mailing Address City PUNXSUT		State PA	Zip Code (Plus 4)	MO 1 Descrip	DAY 29 tion of Exp	YEAR 2022 enditure	\$	119.87
COBBLESTONE H Mailing Address City PUNXSUT	ΓAWNEY	State PA	Zip Code (Plus 4)	MO 1 Descrip	29 tion of Exp	YEAR 2022 enditure	\$	
COBBLESTONE H Mailing Address City PUNXSUT To Whom Paid SUSQUEHANNA I	ΓAWNEY	State PA	Zip Code (Plus 4)	MO  1  Descrip  HOTEL  MO  2	DAY  29  tion of Exp FOR NW Co	YEAR 2022 enditure AUCUS YEAR 2022		60.00

To Wi	nom Paid	мо	DAY	YEAR					
STAPI	LES OFFICE SUPPLIES	MO	DAT	TEAR					
Mailin	ng Address	2	25	2022	\$	405.36			
City	EASTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	18045	OFFICE SUPPLIES					
To Wi	nom Paid	мо	DAY	YEAR					
REPU	BLICAN CITY COMMITTEE	MO	DAI	ILAK					
Mailing Address					3	2022	\$	100.00	
City	PHILADELPHIA	Zip Code (Plus 4)	Description of Expenditure						
		PA	19135	DINNER	l.				
To W	nom Paid				DAY	VEAD			
US. P	OSTAL SERVICE			МО	DAY	YEAR			
Mailin	ng Address			3	7	2022	\$	0.58	
City	BANGOR	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	18013	POSTAGE					
To W	nom Paid	·	•		DAY	YEAR			
місн	ELLE HUTCHESON			МО	DAT	TEAR			
Mailing Address					26	2022	\$	26.95	
City	MILTON	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	17847	POSTAGE-OVERNIGHT MAIL					
To W	nom Paid			мо	DAY	YEAR			
јім к	NAPP	MO		ILAK					
Mailin	ng Address			2	4	2022	\$	167.03	
City	HAVERFORD	State	Zip Code (Plus 4)	s 4) Description of Expenditure					
		PA	19083	POSTAGE-OVERNIGHT MAIL					
To Wi	nom Paid			МО	DAY	YEAR			
лног	YURCONIC AGENCY	MO	DAT	TEAR					
Mailing Address				3	10	2022	\$	15.00	
City	WESCOSVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	18106	NOTARY FEE					
To W	nom Paid			Mo	DAY	YEAR			
СОММ	ONWEALTH OF PA	МО	DAT	TEAR					
Mailin	ng Address	3	11	2022	\$	200.00			
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
		PA	17120	FILING	FEE				
To W	nom Paid	MO	DAY	YEAR					
СОММ	ONWEALTH OF PA	МО	DAT	TEAR					
Mailing Address					18	2022	\$	25.00	
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	17120	FILING	FILING FEE				
				<del>- 1</del>					

To Whom Paid								
PARK HARRISBURG	МО	DAY	YEAR					
Mailing Address	3	15	2022	\$	23.00			
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17120	PARKING					
To Whom Paid	МО	DAY	YEAR					
VARIOUS-GAS STATION	140		ILAK					
Mailing Address	3	3	2022	\$	1,230.13			
City	State	Zip Code (Plus 4)	Description of Expenditure					
	FOR C	AUCUS						
	PAGE TOTAL							
Enter Grand Total of Expenditures of	\$	4,014.95						