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 2	02201	.44			Rep File			CAN	DII	DIDATE COMMITTEE COMMITTEE					LOB	BYIST		
Name of Filing C	ommittee, Can	ıdidate	e or Lo	bbyist:		FRIE	ND:	S OF	JOHN	BRO	OWN				·				
Street Address:																			
City:	BANGOR								State:		PA			Zip Cod	le: 18	013			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	. X	2ND FRIDAY PRE- PRIMARY				30 DA		POST- 3.			AMENDM REPORT?	Yes	N	0	\		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.						30 DA		Р	OST-	6.		TERMINA REPORT?	Yes	N	0	\	
report type)	ANNUAL REPO)RT 7.		Year 2022	ear 2022 FILING METHO () CHECK O						~ —			PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Cand	lidate:	!						DATE	0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	YE	AR			REF		•	
										11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		d t	мо	DAY	YEAR				МО		DAY	ΥI	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	Trom:			1 1	20	022	Т	0		3	2	28	2022						
A. Amount Bro	ught Forward I	From L	.ast Re	eport				\$				2	295.55						
B. Total Moneta	ary Contributio	ns An	d Rece	eipts (From	Sche	dule	I)	\$			100.00								
C. Total Funds Available (Sum Of Lines A and B)								\$				3	395.55						
D. Total Expenditures (From Schedule III)							\$					0.00							
E. Ending Cash Balance (Subtract Line D From Line C)							\$				3	95.55							
F. Value Of In-	Kind Contribut	ions R	eceive	ed (From Se	chedul	le II))	\$					0.00						
G. Unpaid Debt	s And Obligati	ons (F	rom S	chedule IV)			\$				3,8	374.84						
					AFF	IDA	VI	ΓSE	CTIO	N									
PART I - If this is		-	-	_									_						
I swear (or affirm) correct and comple		includi	ing the	attached scl	nedules	filed	on	paper	or by el	ectr	onic me	edium	, are to t	he best of	my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me day of	this		20						•		S	ignature	of Persoi	n Submitt	ing Re _l	ort		
	Sign	nature						-		•				Print	ed Name				_
My Commission Ex	cpires							_		-				Emai	I				
	МО		DA	Y	YR						Are	a Coc	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candid	ate's a	uthorized	Comm	ittee	e, Ca	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my l	knowle	dge and beli	ef this	politi	cal	comm	ittee ha	s no	ot violat	ed an	y provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc		this		20									Si	ignature o	f Candida	ite			_
-	day of							-						Printe	d Name				-
	Signati	ure						-							_				
My Commission Exp	ires									Email									
	мо		DA	·Υ	YR			•			Area Code Daytime Telephone Number					ber	_		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	J Period							
FRIENDS OF 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) 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)	\$	100.00							
TOTAL for the Reporting Period (2) \$									
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			\$	100.00					

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			Reporting Period					
Fro					•			
				DATE			AMOUNT	
Full Name of Contributing Committee				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

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 JOHN BROWN

From:

DATE

<u>1/1/2022</u> **To:**

3/28/2022

AMOUNT

Full Name of Contributor DEBRA AND TIMOTHY HERRLINGER					DAY	YEAR	
Mailin	Mailing Address						\$ 100.00
City	ALLENTOWN	State	Zip Code (Plus 4)	3	8	2022	
		PA	18104				

PAGE TOTAL

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

100.00

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		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							*	0.00	
City	State	Zip Code	e (Plus 4)						
						PAGE TOTAL			
nter Grand Total of Part C on Schedule I, Detailed Summary Page, S			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			Reporting Period								
			From:			To	То:				
					DATE				AMOUNT		
Full Name of Contributor					мо	DAY	YEAR	\$	0.00		
Mailing Address											
City	State	Zi	p Code (Plus	(4)							
Employer Name	•				Occupation						
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
		•		D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$	0.00		
Mailing Address							7			
City	State	Zip Code (Plu	ıs 4)							
Receipt Description	<u>'</u>	<u>'</u>			•					
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL		
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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								
FRIENDS OF JOHN BROWN	From:	<u>1/1/2022</u> To:	3/28/2022						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Ca	Name of Filing Committee or Candidate				Reporting Period					
	F					To:				
				DATE			AMOUNT			
Full Name of Contributor				DAY	YEAR					
Mailing Address						- \$	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•						
				_	Г					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.			led Sum	nmary Pa	ge,		PAGE TOTAL			
2.						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate			Reporting Period							
						From:			То:		
						DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address									\$	0.00	
City	State		Zip Code(Plus 4)								
Employer of Contributor					Occupation						
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on	
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL	
Summary Page, Section 3.										0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
				From			То:		
		AMOUNT							
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)) Description of Expenditure					
inter Grand Total of Evnenditures on Page 1. Penert Cover Page. Item							PAGE TOTAL		
ter Grand Total of Expenditures on Page 1, Report Cover Page, Item D			, .			\$	0.00		

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			Reporti	ng Period					
FRIEN	OS OF JOHN BROWN			From:		<u>1/1/2022</u>	То:		3/28/20)22
						DATE			Outstandin Salance of	
Name	of Creditor				мо	DAY	YEAR			
JOHN	BROWN (CANDIDATE)				110		12/110			
Mailin	g Address				1	15	2022	2 \$		2,170.00
City	BANGOR	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
PA				TOTAL ACCRUED CANDIDATE MILEAGE, FOOD AND HOTEL EXPENSES (AS YET UNREIMBURSEI FROM JANUARY THROUGH MARCH 28, 2022.						
Name	of Creditor				мо	DAY	YEAR			
JOHN	BROWN (CANDIDATE)				140		ILAK			
Mailing Address				1	15	2022	<u>2</u> \$		294.48	
City	City BANGOR State Zip Code (Plus 4)					tion of Deb	t			
		РА	18013		UN-REIMBURSED EXPENSES FOR FILLING BY CANDIDATE (INCLUDES FILLING FEES, NOTARY COSTS AND HARRISBURG TRIP NUT NO MILEAGE)					
Name	of Creditor					DAY	VEAD			
JOHN	BROWN (CANDIDATE)				МО	DAY	YEAR			
Mailin	g Address				2	25	2022	2 \$		405.36
City	BANGOR	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	18013			MBURSED DIDACY.	OFFICE	SUP	PLIES PE	RTINENT
Name	of Creditor				мо	DAY	YEAR			
JOHN	BROWN (CANDIDATE)				MO		ILAK			
Mailin	g Address				2	2	2022	<u>2</u> \$		1,005.00
City	BANGOR	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
PA 18013			UNREIM	IBURSED (OP EV	ENT S	SPONSOR	SHIP		
								PAGE	TOTAL	
Ent	Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item (G.			\$		3,874.84