# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	tion 2022	0228			Repor Filed I		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST		
	Committee, Candida	ate or Lo	bbyist:			-	FOR STAT	E SEN	ATE			-				
Street Address																
City:	ALLENTOWN						State:	PA			Zip Co	<b>de:</b> 18	104-2	938		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		2ND FRIDA PRIMARY	Y PRE	- 2.	30 D. PRIM		POST-	3. <b>X</b>		AMENDMENT REPORT?		Yes	N	0	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION		2ND FRIDA ELECTION	Y PRI	E- 5.	30 D. ELEC	AY I TION	POST- 6.			TERMIN REPORT		Yes	N	0	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG METHO CHECK O				PAPER		$\checkmark$	DISK	ETTE	
Name of Office	Sought by Candidat	te:					DATE O	FELE	СТІС	N	District Number		Par	ty Code	e Coun Code	
SENATOR IN T	THE GENERAL ASSE	EMBLY					мо	DAY	YI	EAR	14	STS	REP	)	39	
SENATOR IN							11		8	2022		(SEE INS	STRUCTI	ONS FOR	CODES	)
	Receipts and	мо	DAY	YEAF			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditure	s from:		5 3	2	022 <b>T</b>		6		6	2022						
A. Amount Brought Forward From Last Report						\$			,	585.07						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$	5		43,0	050.00	_					
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)					\$	5		55,	735.07						
D. Total Expe	nditures (From Sche	edule III	)			\$	5		30,7	712.60						
E. Ending Cas	h Balance (Subtract	t Line D F	From Line	C)		\$	5		25,0	)22.47						
	-Kind Contributions		•		le II)	\$										
G. Unpaid Deb	ots And Obligations	(From S	chedule I\	/)		\$	\$ 50,000.00									
							CTION									
I swear (or affirn	is a Committee repond n) that this report, incl		_								-		vledge	and bel	ief , tri	ue
correct and comp	lete. scribed before me this									<u> </u>		<u> </u>				_
	day of		20			_			5	signatur	e of Perso	on Submitt	ing Rep	port		
	Signatu	re				_					Prir	nted Name				-
My Commission I	Expires					_					Ema	ail				_
	МО	DA	Y	YR				Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		
	s a report of a cand ) that to the best of m ded.							-		ıy provis	ions of th	e act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subs	cribed before me this									s	ignature	of Candida	ite			-
	day of		20			_					Printe	ed Name				-
My Commission Ex	Signature					_					Ema	ail				-
						_										-
	MO DAY YR							Area	code		D	aytime Te	elephon	ie Num	ber	

#### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period BROWNING FOR STATE SENATE** From: <u>5/3/2022</u> **To:** 6/6/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 50.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 50.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 2,500.00 40,500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 43,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 43,050.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

## 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 Candidat	e		Reporting Period					
			Fro	om:		То	1	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
			_					
Enter Grand Total of Part A on Sche	dule I, Detailed Sun	nmary Page, Se	ectio	n 2.			\$	0.00

Use this Part to it \$	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 Candida	ite		Rep	porting P	eriod				
BROWNING FOR STATE SENATE 5/3/2022 To				o: <u>6/6/2022</u>					
					DATE			AMOUNT	
Full Name of Contributor Paul J. Cmil				мо	DAY	YEAR			
Mailing Address							\$	50.00	
City Catasauqua	State	Zip Code (Plus 4	)	5	16	2022			
	PA	18032							
								PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I, Detai	iled Summary Pag	je, S	ection 2	•		\$	50.00	

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# 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			
BROV	VNING FOR STATE SENATE			From:	<u>5</u> /	<u>/3/2022</u>	То:	<u>6/6/2022</u>
					DA	TE		AMOUNT
Full N	ame of Contributing Committee				мо	DAY	YEAR	
ARGA	LL, DAVID VOLUNTEERS FOR							\$ 2,500.00
Maili	ng Address				5	25	2022	,
City	TAMAQUA	State	Zip Cod	e (Plus 4)		25	2022	
		РА	18252-	-0000				
		_			PAGE TOTAL			
Enter	er Grand Total of Part C on Schedule I, Detailed Summary Page, Secti							\$ 2,500.00

## 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				Repo	orting Pe	riod			
BROWNING FOR STATE SENATE				From	n:	<u>5/3/2</u>	022 To	:	<u>6/6/2022</u>
					DA	TE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		750.00
Sandy Hinkle					МО	DAT	ILAK	\$	750.00
Mailing Address					5	30	2022		
City Macungie	State	Zip	Code (Plus	4)	-				
	PA	180	062						
Employer Name Retired					Occupat	ion	Retired		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	ode (Plus 4)
			Macungie					18062	2
Full Name of Contributor						DAY	VEAD		
John Hinkle					мо	DAY	YEAR	\$	750.00
Mailing Address					5	30	2022		
City Macungie	State	Zip	Code (Plus	4)	5	50	2022		
	PA	180	062						
Employer Name retired					Occupat	ion	Retired		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	ode (Plus 4)
			Macungie			PA		18062	2
Full Name of Contributor									
Scott Armstrong					мо	DAY	YEAR	\$	500.00
Scott Armstrong Mailing Address								-	500.00
	State	Zip	Code (Plus	4)	<b>мо</b> 5	<b>DAY</b> 30	<b>YEAR</b> 2022	-	500.00
Mailing Address	<b>State</b> PA	<b>Zip</b>	-	4)				-	500.00
Mailing Address		-	-	4)		30			
Mailing Address City Allentown	PA	-	-	4)	5	30	2022	ployed	
Mailing Address City Allentown Employer Name Self-Employed	PA	-	102	4)	5	30 ion	2022	ployed	ode (Plus 4)
Mailing Address         City       Allentown         Employer Name       Self-Employed	PA	-	LO2 City	4)	5 Occupat	ion State PA	2022 Self-Em	ployed Zip Co	ode (Plus 4) 2
Mailing Address City Allentown Employer Name Self-Employed Employer Mailing Address/Principal Place	PA	-	LO2 City	4)	5	ion State	2022	ployed Zip Co	ode (Plus 4)
Mailing Address         City       Allentown         Employer Name       Self-Employed         Employer Mailing Address/Principal Place         Full Name of Contributor	PA	-	LO2 City	4)	5 Occupat	ion State PA DAY	2022 Self-Em YEAR	ployed Zip Cc 18102	ode (Plus 4) 2
Mailing Address         City       Allentown         Employer Name       Self-Employed         Employer Mailing Address/Principal Place         Full Name of Contributor         Nat L. Hyman	PA		LO2 City		5 Occupat	ion State PA	2022 Self-Em	ployed Zip Cc 18102	ode (Plus 4) 2
Mailing Address         City       Allentown         Employer Name       Self-Employed         Employer Mailing Address/Principal Place         Full Name of Contributor         Nat L. Hyman         Mailing Address	PA		City Allentown		5 Occupat	ion State PA DAY	2022 Self-Em YEAR	ployed Zip Cc 18102	ode (Plus 4) 2
Mailing Address         City       Allentown         Employer Name       Self-Employed         Employer Mailing Address/Principal Place         Full Name of Contributor         Nat L. Hyman         Mailing Address	PA e of Business State	181 <b>Zip</b>	City Allentown		5 Occupat	ion State PA DAY 27	2022 Self-Em YEAR	ployed Zip Cc 18102	ode (Plus 4) 2
Mailing Address         City       Allentown         Employer Name       Self-Employed         Employer Mailing Address/Principal Place         Full Name of Contributor         Nat L. Hyman         Mailing Address         City       Allentown	PA e of Business State PA	181 <b>Zip</b> 181	City Allentown		Occupat MO 5	ion State PA DAY 27	2022 Self-Em YEAR 2022	ployed Zip Cc 18102	ode (Plus 4) 2

Full Name of Contributor			мо	DAY	YEAR		27 500 00
Dean N. Browning			110	DAT	TEAR	\$	37,500.00
Mailing Address			- 5	19	2022		
City Allentown	State	Zip Code (Plus 4)	5	19	2022		
	PA	18104					
Employer Name Retired			Occupat	tion	Retired		
Employer Mailing Address/Principal Plac	e of Business	City		State		Zip Coo	le (Plus 4)
		Allentown		PA		18104	
Enter Grand Total of Part C on Sched	on 3.		5	F	<b>PAGE TOTAL</b> 40,500.00		

## 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	2		Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description					•		•		
		_	a .:					PAGE TOT	AL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sum	mary Page,	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		
BROWNING FOR STATE SENATE	From:	<u>5/3/2022</u> <b>To:</b>	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,		PAGE TOTA	L
						\$		0.00

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

Name of Filing Committee or Candidate			Re	porting l	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							<b>\$</b> 0.00
City	State	Zip Code(Plus 4)	)				
Employer of Contributor				Occupa	ation		•
Employer Mailing Address/Principal Plac	e of Business	City	Stat	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
BROWNING FOR STATE SENATE			From	<u>5/</u>	3/2022	То:	<u>6/6/2022</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
U. S. Post Office									
Mailing Address			5	4	2022	\$	2,750.00		
City Bethlehem	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	РА	18017	Postage	2					
To Whom Paid			мо	DAY	YEAR				
U. S. Post Office							2,350.00		
Mailing Address	1	•	5	9	2022	\$	2,330.00		
City Bethlehem	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	18017	Postage	Postage					
To Whom Paid Allegra Printing			мо	DAY	YEAR				
Mailing Address			5	26	2022	\$	375.69		
City Allentown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1			
	PA	18109	Letterhead						
To Whom Paid			мо	DAY	YEAR				
Allegra Printing									
Mailing Address			5	26	2022	\$	99.64		
City Allentown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	РА	18109	Busines	s Cards					
To Whom Paid			мо	DAY	YEAR				
Campaign Sidekick									
Mailing Address			6	4	2022	\$	217.82		
City Aledo	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	ТХ	76008	VoIP Ph	one Minut	es				
To Whom Paid			мо	DAY	YEAR				
Checkmate Strategies									
Mailing Address			5	10	2022	\$	3,000.00		
City Jackson	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	ŊJ	08527	Digital Ads						

To Whom Paid			мо	DAY	YEAR				
Checkmate Strategies					I LAN				
Mailing Address			5	14	2022	\$	1,127.50		
City Jackson	State	Zip Code (Plus 4)	Description of Expenditure						
	NJ	08527	Text Me	ssaging					
To Whom Paid			мо	DAY	YEAR				
Checkmate Strategies			MO	DAT	TEAK				
Mailing Address			5	16	2022	\$	270.05		
City Jackson	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
NJ 08527				I					
To Whom Paid				DAY	YEAR				
Checkmate Strategies			мо	DAT	TEAR				
Mailing Address			5	20	2022	\$	19,201.90		
City Jackson	State	Zip Code (Plus 4)	Description of Expenditure						
	ŊJ	08527	Direct Mail						
To Whom Paid			мо	DAY	YEAR				
Checkmate Strategies			MO		ILAK				
Mailing Address			5	13	2022	\$	1,320.00		
City         Jackson         State         Zip Code (Plus 4)				tion of Exp	enditure				
	NJ	08527	Poll Har	douts					
							PAGE TOTAL		
Enter Grand Total of Expenditures	on Page 1, Re	port Cover Page, Item D	•			\$	30,712.60		

## 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			Reporting Period						
BROWNING FOR STATE SENATE			From:		<u>5/3/2022</u>	То:		<u>6/6/2022</u>	
				DATE				Outstanding Balance of Debt	
Name of Creditor				мо	DAY	YEAR			
Dean N Browning									
Mailing Address			5	19	2022	<u>2</u> \$	37,500.00		
City Allentown	State	Zip Code (P	lus 4) Description of Debt						
PA 18104				Loan to Campaign Committee					
Name of Creditor				мо	DAY	YEAR			
Dean N Browning				MO		TLAK			
Mailing Address				5	19	2022	2 \$	12,500.00	
City Allentown	State	Zip Code (P	lus 4)	) Description of Debt					
PA 18104				Loan to Campaign Committee					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL	
							\$	50,000.00	