Campaign Finance Report

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

Filer Identification 20200044 Report CAN Number : Filed By :							CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing	Committee, Candid	ate or Lo	obbyist:		FRIEND	S OF	MILOU M	ACKEN	IZIE						
Street Address:															
City:	BETHLEHEM						State:	PA			Zip Co	de: 18	015		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST-	3. X		AMENDN REPORT		Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		POST-	6.		TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7.	Year 2022				NG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County
							мо	DAY	YE	AR			REP		
							11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		5 3	2	022 T	0	6		6	2022					
A. Amount Bro	ought Forward Fror	n Last R	eport			\$			12,3	30.03					
B. Total Monetary Contributions And Receipts (From Schedule I							\$ 0.00								
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)								12,3	30.03					
D. Total Expen	nditures (From Sch	edule II	I)			\$			3,4	05.00					
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)		\$			8,9	25.03	-				
F. Value Of In-	-Kind Contributions	s Receiv	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		\$			25,1	00.00					
				AFF	IDAVI	T SE	CTION								
	is a Committee rep	-	_							-	-				
I swear (or affirm correct and comp	 that this report, incl lete. 	luding the	e attached sc	hedules	s filed on	paper	or by elect	ronic me	edium,	are to 1	the best o	f my know	vledge	and bel	ef, true
Sworn to and sub	scribed before me this day of	5	20						Si	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prin	ted Name			
My Commission E	xpires					_					Ema	il			
	мо	D	AY	YR				Are	ea Cod	e	Daytin	ne Telepho	one Nu	mber	
	a report of a cand							-		v provis	ions of th	e act of Ju	ine 3.1	937 (P.I	. 1333.
No 320) as amend	led.	,	.												
Sworn to and subs	cribed before me this day of		20							s	ignature (of Candida	ite		
						-					Printe	ed Name			
My Commission Ex	Signature pires					-					Ema	il			
	мо	D	AY	YR		-		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF MILOU MACKENZIE 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)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 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		Repo					
			From: To:			1		
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								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									
	From:					Тс	То:		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City	State	Zip Code (Plus 4	us 4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	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			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
						PAGE TOTAL		
Enter Grand Total of Part C on Scheo	age, Sectio	n 3.			\$	0.00		

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			Rep	orting Pe	riod				
			Froi	From:			To:		
				DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							P#	AGE TOTAL 0.00	

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	•				•		•		
		-	o .:					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		
FRIENDS OF MILOU MACKENZIE	From:	<u>5/3/2022</u> то:	<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	Γ 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:			То:	
				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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,	F	PAGE TOTAL
						\$	0.00

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

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate			Reporti	ng Period				
FRIENDS OF MILOU MACKEN	ZIE			From	<u>5/:</u>	<u>3/2022</u>	То:	<u>6/6/2022</u>	
			•		DATE			AMOUNT	
To Whom Paid				мо	DAY	YEAR			
FRIENDS OF ANN FLOOD						•			
Mailing Address				5 9 2022 \$ 70.					
City BATH	State	Zip Code (P	lus 4)	Descrip	tion of Exp	enditure			
	PA 18014				BREAKFAST MEETING				
To Whom Paid			мо	DAY	YEAR				
GARY L. BIRKS									
Mailing Address				5	10	2022	\$	1,335.00	
City N. CATASAUQUA	State	Zip Code (P	lus 4)	Descrip	tion of Exp	enditure		-	
	PA	18032		CAMPAI	GN MILEA	GE			
To Whom Paid				мо	DAY	YEAR			
GARY L. BIRKS			_						
Mailing Address				5	10	2022	\$	2,000.00	
City N. CATASAUQUA	State	Zip Code (P	lus 4)	Descrip	tion of Exp	enditure	-		
	PA	18032		CAMPAI	GN CONSU	JLTING			
								PAGE TOTAL	
Enter Grand Total of Expen	ditures on Page 1	, Report Cover Page, .	Item D).			\$	3,405.00	

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	DS OF MILOU MACKENZIE			From:		<u>5/3/2022</u>	То:		<u>6/6/2022</u>	
						DATE			tstanding ance of Debt	
Name	of Creditor				мо	DAY	YEAR			
VICTO	ORIA MILOU MACKENZIE				мо		TEAR			
Mailin	g Address				6	22	2020	\$	5,000.00	
City	BETHLEHEM	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	18015		LOAN T	O CAMPAI	GN			
	of Creditor DRIA MILOU MACKENZIE				мо	DAY	YEAR			
Mailin	g Address				6	22	2020	\$	5,000.00	
City	BETHLEHEM	State	Zip Code (P	lus 4)	Description of Debt					
,		PA	18015		LOAN TO CAMPAIGN					
	Name of Creditor VICTORIA MILOU MACKENZIE					DAY	YEAR			
Mailing Address			1	23	2020	\$	100.00			
City	BETHLEHEM	State Zip Code (Plus 4)			Descript	l tion of Deb	 +			
,	Demeenen	PA	18015			O CAMPAI				
Name	of Creditor		I							
	DRIA MILOU MACKENZIE				мо	DAY	YEAR			
Mailin	g Address				2	9	2020	\$	5,000.00	
City	BETHLEHEM	State	Zip Code (P	lus 4)	Descrip	l tion of Deb	t			
		PA	18015		LOAN T	O CAMPAI	GN			
	of Creditor DRIA MILOU MACKENZIE				мо	DAY	YEAR			
Mailin	g Address				1	28	2020	\$	5,000.00	
City	BETHLEHEM	State	Zip Code (P	lus 4)	Descrip	l tion of Deb	t			
		PA	18015			O CAMPAI				
	of Creditor I D. BROWN				мо	DAY	YEAR			
Mailin	1ailing Address			4	28	2020	\$	5,000.00		
City	City BETHLEHEM State Zip Code (Plus 4)				Description of Debt					
		PA	18015		LOAN T	O CAMPAI	GN			

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	\$ 25,100.00