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 202	22C0523				Repoi Filed			CANDI	DATE	\	C	OMMITTE		LOB	BYIS ⁻	Г	
Name of Filing C	ommittee, Cand	date or L	obby	ist:	E	BRAND	ON N	4AF	RKOSEK	(_							
Street Address:																		
City:	_							s	tate:				Zip Cod	e: 15	146			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		FRIDA MARY	/ PRE-	2.	30 E PRI			POST-	3.		AMENDMENT Yes No					\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		FRIDAY	/ PRE-	- 5. X	30 E			POST-	6.		TERMINA REPORT?	TION	Yes		Vo	/
report type)	ANNUAL REPOR	T 7.	Yea	r 2022					METH				PAPER		\	DIS	KETTE	
Name of Office S	ought by Candid	ate:				-		Ī	OATE C	F ELE	СТ	ION	District Number	Office Code	Pa	rty Co	de Cou Cod	
								N	10	DAY		YEAR	25	STH	DEI	М	1	
REPRESENTATI	VE IN THE GENI	ERAL ASS	SEMB	LY					11		8	2022		(SEE IN	STRUCTI	ONS FO	R CODE	S)
Summary of		МО	D	YAY	YEAR			١	10	DAY		YEAR	FO	R OFFI	CE USE	ONL	Y	
Expenditures	from:		9	20	20)22	ГО		10		24	2022	2					
A. Amount Bro	ught Forward Fro	om Last R	epor	t				\$				0.00						
B. Total Moneta	ary Contributions	s And Rec	eipts	(From	Sched	lule I)		\$				0.00						
C. Total Funds	Available (Sum (Of Lines A	and	B)				\$				0.00	<u>)</u>					
D. Total Expend	ditures (From Sc	hedule II	I)					\$				0.00						
E. Ending Cash Balance (Subtract Line D From Line C) \$ 0.00																		
F. Value Of In-	Kind Contributio	ns Receiv	ed (F	rom So	hedul	e II)		\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Sche	dule IV)			\$				0.00						
					AFFI	[DAV	IT S	EC	TION									
PART I - If this is		- /								•			_					
I swear (or affirm) correct and comple		cluding the	e atta	ched sch	nedules	filed or	pape	r or	by elect	ronic m	iedi	um, are to	the best of	my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me tl day of	nis	20									Signatuı	e of Person	Submit	ting Re	port		
	Signa	ture	_				_						Print	ed Name	•			_
My Commission Ex	-												Emai					_
	мо	D	AY		YR					Ar	ea (Code	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	auth	orized	Comm	ittee,	Candi	idat	e shall	sign h	ere							
I swear (or affirm) No 320) as amende		my knowle	edge a	and beli	ef this p	politica	com	mitt	ee has r	ot viola	ated	any provi	sions of the	act of J	une 3,1	937 (I	P.L. 133	33,
Sworn to and subsc		s										:	Signature o	f Candid	ate			-
	day of		_ 20 _				_						Printe	i Name				-
M. C	Signature						_						Emai					_
My Commission Exp							_											_
	МО	D	AY		YR		-			Area	Cod	de	Da	ytime T	elephoi	ne Nur	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
BRANDON MARKOSEK	From:	9/20/202	<u>2</u> To:	10/24/2022				
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	g 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	g 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 ar 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				Period			
		Fi	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		МО	DAY	YEAR		
Mailing Address						\$	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.

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)

(Exclude		m ponticui comi			301 tCu		,,,			
Name of Filing Committee or Candidate Reporting Period										
			Fro	m:		To):			
					DATE			AMOUNT		
Full Name of Contributor				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.

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:	om: To:					
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7		0.00
City	State	Zip Cod	e (Plus 4)						
							-	PAGE TO	TAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary 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				orting Pe	riod				
Fre					From: To:				
	DATE							AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Plus	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 Sche	dule I, Detailed Su	ımmary Page,	Section	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				ing Peri	od			
			From:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Count Total of Dout	Fan Cahadula I Datailad	I Commence Dance C	` !	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	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 Perio	d	
BRANDON MARKOSEK	From:	<u>9/20/2022</u> To:	10/24/2022
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 Ca	Reporting Period						
			From:				
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						- \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•				
					Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	ımary Pa	ge,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period			
F					m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

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