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 9400	028			Rep File			CANDI	DATE		соми	ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		BRO	WN	E, PA	TRICK C	ITIZEN	S FO	R						
Street Address:	PO BOX 9030	7															
City:	ALLENTOWN							State:	PA	PA		Zip Code: 18109					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	- 5	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7. X	Year 2022					NG METHO						/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	ty
								МО	DAY	YE	AR		10000	-			
								11		8	2022		(SEE IN	STRUCTI	ONS FOR C	ODES)	
	ummary of Receipts and xpenditures from: MO DAY YEAR MO DAY YEAR TO 12 21 21 21 21 21 21 21 21 21 21 21 21							EAR	FO	R OFFI	CE USE	ONLY					
Expenditures	irom:		11 29	2	022	Т	0	12	:	31	2022						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			355,8	314.99						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 355,814							314.99										
D. Total Expen	ditures (From Sch	edule II	I)				\$			7,9	76.63						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (2)			\$		3	347,8	38.36						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II))	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	IDA	VI	ΓSE	CTION									
	s a Committee rep	•							•								
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	e attached sch	nedules	filed	on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ie,
Sworn to and subs	cribed before me this day of	i	20							S	ignature	of Perso	n Submit	ting Rep	oort		_
	Signatu	ra					- -					Prin	ted Name	.			-
My Commission Ex	_											Ema	il				-
	мо	D	AY	YR			_		Arc	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee	e, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	ef this	politi	ical	comm	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	1333	,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephor	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BROWNE, PATRICK CITIZENS FOR	From:	11/29/202	<u>2</u> To:	12/31/2022
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)			\$	0.00
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
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 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

	his Part to itemize on with an aggregate val							
Name of Filing Comm	ittee or Candidate		Re					
			From: To) :		
					DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•					-	Г	PAGE TOTAL

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 Filling Committee of Candidate			Reporting Period From: To:					
			l		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 Candi	ame of Filing Committee or Candidate Re		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

me of Filing Committee or Candidate		Rep	orting Pe	riod					
			Fron	n:		To	То:		
				D	ATE		АМС	OUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupa	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PA(GE 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		Reporting Period						
			From:			To:			
				D	ATE		AM	OUNT	
Full Name				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)						
Receipt Description	•	•		•	•	•	_		
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	E TOTAL	
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Peri	od						
BROWNE, PATRICK CITIZENS FOR	From:	<u>11/29/2022</u> To:	12/31/2022					
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 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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia Contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Comm	nittee or Candidate			Reporti	ng Period					
BROWNE, PATRICK	CITIZENS FOR			From	11/29	9/2022	То:	12/31/2022		
					DATE AMOU					
To Whom Paid Adam Meyer Moving	& Storage			мо	DAY	YEAR				
Mailing Address 8.	24 Jennings Street			12	19	2022	\$	1,292.39		
City Bethlehem		State	Zip Code (Plus 4)	Description of Expenditure						
PA 18017				Mover						
o Whom Paid T&T Mobility				мо	DAY	YEAR				
Mailing Address PO Box 537104					19	2022	\$	122.45		
City Atlanta State Zip Code (Plus 4) GA 30353				Descrip Cell Ph	otion of Exp	enditure				
To Whom Paid Budget Store & Lock				мо	DAY	YEAR				
Mailing Address 1	700 So. 4th Street			12	19	2022	\$	135.68		
City Allentown		State PA	Zip Code (Plus 4) 18103	Description of Expenditure Storage Unit						
To Whom Paid Gio's II Pizza Shop				МО	DAY	YEAR				
Mailing Address 1	192 N. Keim Street	:		12	19	2022	\$	33.01		
CityPottstownStateZip Code (Plus 4)PA19464				ı	otion of Exp eer Meal	enditure				
To Whom Paid Matt Szuchyt				МО	DAY	YEAR				
Mailing Address	ailing Address 1435 Mohr Circle				19	2022	\$	106.32		

Zip Code (Plus 4)

18062

Description of Expenditure

Mileage

State

PΑ

City

Macungie

To Whom Paid Senate Republican Campaign C	omm.		МО	DAY	YEAR			
Mailing Address PO Box 792			12	19	2022	\$	6,102.15	
City Harrisburg	State PA	Zip Code (Plus 4) 17101		otion of Exp				
To Whom Paid Staples			МО	DAY	YEAR			
Mailing Address 4628 Broads	12	19	2022	\$	21.19			
City Allentown State Zip Code (Plus 4) PA 18104				otion of Exp	penditure			
To Whom Paid Staples Credit Plan			МО	DAY	YEAR			
Mailing Address PO Box 706:	12		12	19	2022	\$	151.44	
City Philadelphia	State PA	Zip Code (Plus 4) 19176	1 -	otion of Exp supplies	penditure			
To Whom Paid US Postal Service			МО	DAY	YEAR			
Mailing Address 442 Hamilto	n St		12	19	2022	\$	12.00	
City Allentown State Zip Code (Plus 4) PA 18101				Description of Expenditure Postage				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						\$	PAGE TOTAL 7,976.63	
				'	7,370.03			