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 20	01805	532				Repo Filed			CAI	NDII	DATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	didat	e or Lo	bbyis	st:	F	RIEN	DS C)F E	BRID	GET	MALL	OY K	OSIERO	WSKI					
Street Address:	933 NORT	HERN	BOUL	.EVAR	RD,SU	ITE 10	1													
City:	SOUTH AB	INGT	ON TW	/P						State	e:	PA			Zip Code: 18411					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1		2ND F PRIMA		PRE-	2.		DA IMA		Р	OST-	3.		AMENDMENT REPORT?		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4		2ND F		PRE-	- 5.		30 DAY F ELECTION			OST-	ST- 6.		TERMINATION REPORT?		Yes	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֡֓֡	No	\
report type)	ANNUAL REPO	PRT 7	. X	Year	2023				FILING METHOD () CHECK ONE			PAPER		√	DIS	ETTE				
Name of Office S	ought by Cand	lidate								DAT	E O	F ELE	CTIC	N	District Number	Office Code	Par	ty Coo	le Cou	
REPRESENTATI	VE IN THE GEI	NERA	L ASSI	EMBL`	Y					МО		DAY	Y	EAR	114	STH	DE	1	35	
											11		7	2023		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		1	МО	DA		YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONL	4	
			1	.1	28	20	23	то			12	;	31	2023						
A. Amount Bro	ught Forward F	rom l	Last Re	eport					\$					604.11						
B. Total Moneta	ary Contributio	ns An	d Rece	eipts ((From	Sched	lule I)	\$				6,	600.00						
C. Total Funds	Available (Sum	1 Of Li	ines A	and B	3)				\$				79,	204.11						
D. Total Expenditures (From Schedule III)								12,3	388.92											
E. Ending Cash	Balance (Subt	ract L	ine D I	From	Line C	:)		_	\$				66,8	315.19						
F. Value Of In-							e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ons (F	rom S	chedu	ıle IV)			\$					0.00						
						AFFI	DAV	IT S	SE	CTIC	N									
PART I - If this is		-	•									•								
I swear (or affirm) correct and comple		includ	ling the	attach	ned sch	edules	filed o	n pap	er c	or by e	electr	onic m	edium	i, are to t	he best o	f my knov	vledge	and b	elief , tr	rue
Sworn to and subs	cribed before me day of	this		20										Signature	of Perso	n Submitt	ing Re	ort		_
	Sigr	nature		-				_							Prin	ted Name				
My Commission Ex	pires														Emai	il				
	МО		DA	Y		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of a c	andid	late's a	autho	rized	Commi	ittee,	Cano	dida	ate sh	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my	knowle	dge ar	nd belie	ef this p	politica	al con	nmi	ttee h	as no	ot viola	ted ar	ny provisi	ions of the	e act of Ju	ine 3,1	937 (F	.L. 133	3,
Sworn to and subsc	ribed before me t day of	this		20										Si	ignature o	of Candida	ite			_
				-				_							Printe	d Name				- $ $
My Commission Exp	Signatı ires	ure									-				Ema	il				-
								_					Code		P-	nutime = T	lon's	. N	.hor	-
	МО		DA	Υ		YR						Area	coae		Da	aytime Te	eepnor	ie Nun	ıper	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BRIDGET MALLOY KOSIEROWSKI	From:	11/28/202	2 <u>3</u> To:	12/31/2023
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)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,500.00
All Other Contributions (Part D)			\$	5,000.00
TOTAL for the Reporting	Period	(3)	\$	6,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
			1	
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			\$	6,600.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Filing Committee or Candidate

Reporting Period

FRIENDS OF BRIDGET MALLOY KOSIEROWSKI

From: <u>11/28/2023</u> To:

DATE

12/31/2023

AMOUNT

Full Name of Contributor EILEEN BELL			МО	DAY	YEAR	
Mailing Address 10 WOODRIDGE CIR						\$ 100.00
City CLARKS SUMMIT	State PA	Zip Code (Plus 4) 184112039	12	1	2023	

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

PAGE TOTAL \$ 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	g Period				
FRIENDS OF BRIDGET MALLOY KOSIER	OWSKI		From:	11/2	<u>18/2023</u>	То:	<u>1</u> 2	2/31/2023
				DA	TE		A	AMOUNT
Full Name of Contributing Committee PENN OSTEOPATHIC MED PAC				МО	DAY	YEAR		
Mailing Address 1330 EISENHOWER	BLVD						\$	500.00
City HARRISBURG	State PA	Zip Cod 171112	e (Plus 4) 2319	12	4	2023	3	
Full Name of Contributing Committee FRIENDS OF JOANNA MCCLINTON				МО	DAY	YEAR		
Mailing Address PO BOX 16668							\$	500.00
City PHILADELPHIA	State PA	Zip Cod 191396	e (Plus 4) 6668	12	20	2023	3	
Full Name of Contributing Committee ZENECA INC PAC				мо	DAY	YEAR		
Mailing Address PO BOX 15437							\$	500.00
City WILMINGTON	State DE	Zip Cod	e (Plus 4) 5437	12	27	2023	3	
Enter Grand Total of Bart C on Scho	dula I Dataila	od Commonwe D	ana Castia	- 2			•	PAGE TOTAL

1,500.00

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			Rep	orting Pe	riod		
FRIENDS OF BRIDGET MALLOY KOSIE	ROWSKI		Fror	m:	11/28/2	<u>023</u> To	: <u>12/31/2023</u>
				D	ATE		AMOUNT
Full Name of Contributor LOUIS DENAPLES				мо	DAY	YEAR	
Mailing 400 MILL ST Address					20	2022	\$ 5,000.00
City DUNMORE	State PA	Zip Code (Plus 185122827	5 4)	12	20	2023	
Employer Name KEYSTONE LANDFILL				Occupat	t ion)WNER	
Employer Mailing Address/Principal Plac Business	e of	City		1	State		Zip Code (Plus 4)
400 MILL ST		DUNMOR	lΕ		PA		185122827
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PAGE TOTAL \$ 5,000.00

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		Report	ting Perio	bd			
			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	GE 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 Per	riod	
FRIENDS OF BRIDGET MALLOY KOSIEROWSKI	From:	<u>11/28/2023</u> To:	12/31/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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	g 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	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	eporting Period			
FRIENDS OF BRIDGET MALLOY KOSIEROWSKI	From	11/28/2023	То:	12/31/2023	

				DATE			AMOUNT
To Whom Paid ANTHONY J RINALDI JR FOUNDATION I	FOR CHILDREN W	ITH CANCER	мо	DAY	YEAR		
Mailing Address 538 BIDEN ST STE	600		12	1	2023	\$	750.00
City SCRANTON	State PA	Zip Code (Plus 4) 185031837	1	otion of Exp	penditure		
To Whom Paid JOSEPH KOSIEROWSKI			МО	DAY	YEAR		
Mailing Address 6 STARLIGHT DR			12	1	2023	\$	622.34
City WAVERLY TOWNSHIP	State PA	Zip Code (Plus 4) 184111132	1	JRSEMENT	Expenditure ENT OF EVENT AND OFFICE		
To Whom Paid OSTROWSKI BECKLEY AND THORPE PO	:		МО	DAY	YEAR		
Mailing Address 933 NORTHERN BLV	/D STE 101		12	1	2023	\$	600.00
City SOUTH ABINGTON TOWNSHIP	State PA	Zip Code (Plus 4) 184112270		tion of Exp			
To Whom Paid TAYLOR ULTRA STORAGE			МО	DAY	YEAR		
Mailing Address 600 N MAIN ST			12	2	2023	\$	101.76
City TAYLOR	State PA	Zip Code (Plus 4) 185171112		otion of Exp			
To Whom Paid BANKCARD			мо	DAY	YEAR		
Mailing Address 2625 TOWNSGATE	RD STE 100		12	3	2023	\$	20.00
City THOUSAND OAKS	State CA	Zip Code (Plus 4) 913615737	1	otion of Exp E MERCHAI			

To Whom Paid PARAGON PAYMENT SOLUTIONS	мо	DAY	YEAR			
Mailing Address 2141 E BROADWAY RD STE 202	12	12 3 2023			:	25.00
City TEMPE State Zip Code (Plus 4) AZ 852821895	Description of Expenditure ONLINE MERCHANT FEES					
To Whom Paid NGP VAN	МО	DAY	YEAR			
Mailing Address 1445 NEW YORK AVE NW STE 200	12	4	2023	\$	1	59.00
City WASHINGTON State Zip Code (Plus 4) DC 200052158	Description of Expenditure ONLINE SOFTWARE FEES					
To Whom Paid ABINGTON LITTLE LEAGUE	МО	DAY	YEAR			
Mailing Address 140 ACKERLY RD	12	8	2023	\$	10	00.00
City CLARKS SUMMIT State Zip Code (Plus 4)	Description of Expenditure DONATION					
PA 184119238	DONAT	ION				
To Whom Paid NATE DAVIDSON FOR STATE REPRESENTATIVE	MO	DAY	YEAR			
To Whom Paid			YEAR 2023	\$	2.	50.00
To Whom Paid NATE DAVIDSON FOR STATE REPRESENTATIVE	MO 12 Descrip	DAY	2023		2:	50.00
To Whom Paid NATE DAVIDSON FOR STATE REPRESENTATIVE Mailing Address PO BOX 5447 City HARRISBURG State Zip Code (Plus 4)	MO 12 Descrip	DAY 12 ption of Exp	2023		2:	50.00
To Whom Paid NATE DAVIDSON FOR STATE REPRESENTATIVE Mailing Address PO BOX 5447 City HARRISBURG State PA 171100447 To Whom Paid	MO 12 Description	DAY 12 ption of Exp	2023 penditure			50.00
To Whom Paid NATE DAVIDSON FOR STATE REPRESENTATIVE Mailing Address PO BOX 5447 City HARRISBURG State PA 171100447 To Whom Paid VISITATION OF BLESSED VIRGIN MARY PARISH	MO 12 Description CONTR MO 12	DAY 12 ption of Exp IBUTION DAY 12 ption of Exp	2023 penditure YEAR 2023	\$		
To Whom Paid NATE DAVIDSON FOR STATE REPRESENTATIVE Mailing Address PO BOX 5447 City HARRISBURG State PA 2ip Code (Plus 4) 171100447 To Whom Paid VISITATION OF BLESSED VIRGIN MARY PARISH Mailing Address 196 N TROOPER RD City WEST NORRITON State Zip Code (Plus 4)	MO 12 Descrip CONTR MO 12 Descrip	DAY 12 ption of Exp IBUTION DAY 12 ption of Exp	2023 penditure YEAR 2023	\$		
To Whom Paid NATE DAVIDSON FOR STATE REPRESENTATIVE Mailing Address PO BOX 5447 City HARRISBURG State PA 171100447 To Whom Paid VISITATION OF BLESSED VIRGIN MARY PARISH Mailing Address 196 N TROOPER RD City WEST NORRITON State PA 194032600 To Whom Paid	MO 12 Description MO 12 Description Donat	DAY 12 DAY DAY 12 Dition of Exp	2023 Penditure YEAR 2023 Penditure	\$	1(

State PA 185031501 Contribution of Expenditure Contribut								17.02 13
State Size				мо	DAY	YEAR		
PA	Mailing Address 341 N WASHINGTON AVE			12	21	2023	\$	2,500.00
To Whom Paid CITY FRIE	City SCRANTON	State	Zip Code (Plus 4)	Descrit	tion of Ex	nenditure		
Mailing Address PO BOX 8570 State Zip Code (Plus 4) 12 28 2023 \$ 2,500.	3 SCRAINTOIN	PA	185031501					
State PA		ZARRO		мо	DAY	YEAR		
PA	Mailing Address PO BOX 8570			12	28	2023	\$	2,500.00
To Whom Paid City SCRANTON State PA 165053670 CONTRIBUTION PA	City EDIE	State	Zip Code (Plus 4)	Descrip	tion of Ev) oonditure	<u></u>	
Mailing Address 440 VIEWMONT MALL 12 29 2023 \$ 100.	erie	PA	165050570				ı	
City SCRANTON State PA 18508 EVENT EXPENSE				МО	DAY	YEAR		
PA	Mailing Address 440 VIEWMON	T MALL		12	29	2023	\$	100.00
PA	City CCDANTON	State	Zip Code (Plus 4)	Descrit	tion of Ex	penditure		
Mailing Address 200 ADAMS AVE 210 Code (Plus 4) 185031607 229 2023 \$ 1,000.	- SCIANTON	PA	18508	1		, cirarcar c		
SCRANTON State PA				МО	DAY	YEAR		
To Whom Paid THE 16TH WARD Mailing Address 306 PENN AVE State PA	Mailing Address 200 ADAMS AVE			12	29	2023	\$	100.00
PA	City SCRANTON	State	Zip Code (Plus 4)	Descrip	tion of Ex) Denditure		
Mo	Sciontion	PA	185031607					
City SCRANTON State PA State 185031931 Description of Expenditure EVENT EXPENSE To Whom Paid AMERICAN EXPRESS Mailing Address PO BOX 650448 City DALLAS State Zip Code (Plus 4) Description of Expenditure EVENT EXPENSE To Whom Paid AMERICAN EXPRESS MO DAY YEAR 12 30 2023 \$ 3,108. City DALLAS TX 752650448 Description of Expenditure EVENT EXPENSE PAGE TOTAL PAGE TOTAL				МО	DAY	YEAR		
To Whom Paid AMERICAN EXPRESS Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR Mo DAY Mo DAY	Mailing Address 306 PENN AVE			12	29	2023	\$	1,142.82
To Whom Paid AMERICAN EXPRESS MO DAY YEAR PO BOX 650448 12 30 2023 \$ 3,108. TX Description of Expenditure EVENT EXPENSE PAGE TOTAL PAGE TOTAL	City SCRANTON	State	Zip Code (Plus 4)	Descrip	otion of Ex	penditure	 :	
AMERICAN EXPRESS Mo DAY YEAR Mailing Address PO BOX 650448 12 30 2023 \$ 3,108. City DALLAS TX Zip Code (Plus 4) 752650448 Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. PAGE TOTAL		PA	185031931					
City DALLAS State TX				МО	DAY	YEAR		
TX 752650448 EVENT EXPENSE PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	Mailing Address PO BOX 65044			12	30	2023	\$	3,108.00
TX 752650448 EVENT EXPENSE PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	City DALLAS	State	Zip Code (Plus 4)	Descri	tion of Evi	penditure	<u></u>	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	DALLAG	TX	752650448					
	Enter Grand Total of Evacuality	uros on Dago 1. Da	anart Cover Page Them D					PAGE TOTAL
	Lines Grand Total Of Expenditt	nes on raye 1, Ke	poit cover raye, Item D				\$	12,388.92