Commonwealth of Pennsylvania

Campaign Finance Statement



File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

NAME OF FILING COMMITTE			KEI OKI	FILED ON BEHALF OF:	Candidate
	E, CANDIDATE OR	LOBBYIST	BROWN,AM	IEN R.	
STREET ADDRESS					
CITY		STATE	E	ZIP CODE	19139
TYPE OF REPORT 30-	-Day Post-Primary			•	
NAME OF OFFICE SOUGH	T BY CANDIDATE	E REPRES	SENTATIVE IN THE	GENERAL	
DISTRICT CODE 10	Oth Legislative Dis	trict	P.A	ARTY CODE DEM	
DATE OF ELECTION	11/5/20	24			
DATES OF REPORTING PE	RIOD	4/9/2024	4 TO	5/13/2024	For Office Use Only
AMENDMENT REPORT?	NO	. 7	TERMINATION RE	EPORT? NO	
CASH BALANCE AT THE PERIOD:	E END OF REPOR	TING	0.00		
TOTAL AMOUNT OF FIL DEBTS OR LIABILITIES REPORTING PERIOD:			0.00		
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