

Campaign Finance Report

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

Filer Identification Number :		20200045		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: CITIZENS FOR AMEN BROWN												
Street Address: PO BOX 42857												
City: PHILADELPHIA						State: PA			Zip Code: 19101			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	10	STH	DEM	51
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		10	22	2024		11	25	2024				
A. Amount Brought Forward From Last Report						\$ 24.13						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 10,735.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 10,759.13						
D. Total Expenditures (From Schedule III)						\$ 9,625.81						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,133.32						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 14,220.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR AMEN BROWN	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

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)	\$ 10,700.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 10,700.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 35.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 10,735.00
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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				Reporting Period			
				From:		To:	
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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 Candidate CITIZENS FOR AMEN BROWN	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,400.00
Democratic Campaign Committee of Philadelphia				11	1	2024	
Mailing Address 219 Spring Garden Street							
City Philaadelphia		State PA	Zip Code (Plus 4) 19123				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
Laborers District Council PAC Fund				11	2	2024	
Mailing Address 655 N. Broad Street, 5th Floor							
City Philadelphia		State PA	Zip Code (Plus 4) 19123				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 300.00
Citizens for Hughes				10	22	2024	
Mailing Address P.O. Box 13031							
City Philadelphia		State PA	Zip Code (Plus 4) 19101				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 10,700.00

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	Reporting Period
	From: To:

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE 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 CITIZENS FOR AMEN BROWN	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name TD Bank				MO 11	DAY 5	YEAR 2024	\$ 35.00
Mailing Address 3735 Market Street							
City Philadelphia		State PA	Zip Code (Plus 4) 19104				
Receipt Description refund of bank fee							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 35.00

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	
CITIZENS FOR AMEN BROWN		From: <u>10/22/2024</u> To: <u>11/25/2024</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR AMEN BROWN	From <u>10/22/2024</u> To: <u>11/25/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Peerly				
Mailing Address 400 N Pine Island Rd., Suite 300	11	1	2024	\$ 102.07
City Plantation	State FL	Zip Code (Plus 4) 33324	Description of Expenditure texting platform	
To Whom Paid	MO	DAY	YEAR	
Google LLC				
Mailing Address 1600 Amphitheatre Pkwy	11	4	2024	\$ 46.65
City Mountain View	State CA	Zip Code (Plus 4) 94043	Description of Expenditure google suite	
To Whom Paid	MO	DAY	YEAR	
TD Bank				
Mailing Address 3735 Walnut Street	11	4	2024	\$ 35.00
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure bank fee	
To Whom Paid	MO	DAY	YEAR	
TD Bank				
Mailing Address 3735 Walnut Street	11	5	2024	\$ 35.00
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure bank fee	
To Whom Paid	MO	DAY	YEAR	
TD Bank				
Mailing Address 3735 Walnut Street	11	25	2024	\$ 3.00
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure bank fee	
To Whom Paid	MO	DAY	YEAR	
Mailchimp				
Mailing Address 675 Ponce De Leon Ave NE, Suite 5000	11	12	2024	\$ 28.62
City Atlanta	State GA	Zip Code (Plus 4) 30308	Description of Expenditure email platform	

To Whom Paid Popeyes			MO	DAY	YEAR	\$ 40.47
Mailing Address 4322 Market Street			11	25	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure meeting			

To Whom Paid ALOFT			MO	DAY	YEAR	\$ 219.00
Mailing Address 558 Fellowship Rd			11	9	2024	
City Mt Laurel Township	State NJ	Zip Code (Plus 4) 08054	Description of Expenditure travel			

To Whom Paid Dennis Johnson			MO	DAY	YEAR	\$ 5,600.00
Mailing Address 137 S 50th Street			11	7	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Description of Expenditure election workers for ward			

To Whom Paid Sameerah Shabazz			MO	DAY	YEAR	\$ 3,500.00
Mailing Address 122 S Ruby Street			11	7	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Description of Expenditure lunches for election day workers			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 16.00
Mailing Address 3735 Walnut Street			11	7	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure bank fee			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 9,625.81

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 CITIZENS FOR AMEN BROWN	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE	Outstanding Balance of Debt		
Name of Creditor				MO	DAY	YEAR	\$ 14,220.00
Pennsylvania House Democratic Campaign Committee							
Mailing Address P.O. Box 35				10	22	2024	
City Harrisburg		State PA	Zip Code (Plus 4) 17101	Description of Debt Campaign services			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 14,220.00