

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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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
						MO	DAY	YEAR	10		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			
		11	26	2024		12	31	2024				
A. Amount Brought Forward From Last Report						\$ 1,133.32						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 0.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 1,133.32						
D. Total Expenditures (From Schedule III)						\$ 1,316.09						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ (182.77)						
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>11/26/2024</u> To: <u>12/31/2024</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)	\$ 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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------

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	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 C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 0.00

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	Reporting Period From: To:
----------------------------------------------	--------------------------------------------------------

			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE TOTAL	
\$	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 Period	
CITIZENS FOR AMEN BROWN		From: <u>11/26/2024</u> To: <u>12/31/2024</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:
---------------------------------------	----------------------------------------------------------------------

			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 II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

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 of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR AMEN BROWN	From <u>11/26/2024</u> To: <u>12/31/2024</u>

				DATE		AMOUNT	
To Whom Paid				MO	DAY	YEAR	
Five Below							
Mailing Address 24 W Dekalb Pike Suite #180				12	2	2024	\$ 92.99
City King of Prussia		State PA	Zip Code (Plus 4) 19406	Description of Expenditure supplies for event			
To Whom Paid				MO	DAY	YEAR	
Round 1 Bowling + Arcade							
Mailing Address 1001 Market Street				11	30	2024	\$ 72.95
City Philadelphia		State PA	Zip Code (Plus 4) 19107	Description of Expenditure volunteer appreciation			
To Whom Paid				MO	DAY	YEAR	
Sunoco							
Mailing Address 2201 Walnut Street				12	2	2024	\$ 63.45
City Philadelphia		State PA	Zip Code (Plus 4) 19103	Description of Expenditure travel expense			
To Whom Paid				MO	DAY	YEAR	
Wawa							
Mailing Address 635 Chews Landing Rd				12	2	2024	\$ 50.00
City Lindenwold		State NJ	Zip Code (Plus 4) 08021	Description of Expenditure travel expense			
To Whom Paid				MO	DAY	YEAR	
Google GSuite							
Mailing Address 1600 Amphitheatre Pkwy				12	2	2024	\$ 46.65
City Mountain View		State CA	Zip Code (Plus 4) 94043	Description of Expenditure google suite			
To Whom Paid				MO	DAY	YEAR	
Hotel Tonight Merit New							
Mailing Address 342 W 40th Street				12	3	2024	\$ 357.00
City New York		State NY	Zip Code (Plus 4) 10018	Description of Expenditure travel expense			

To Whom Paid Sunoco			MO	DAY	YEAR	\$ 72.01
Mailing Address 200 S New Middletown Rd			12	4	2024	
City Elwyn	State PA	Zip Code (Plus 4) 19063	Description of Expenditure travel expense			

To Whom Paid Hotel Tonight - Candlewood			MO	DAY	YEAR	\$ 363.00
Mailing Address 339 W 39th Street			12	6	2024	
City New York	State NY	Zip Code (Plus 4) 10018	Description of Expenditure travel expense			

To Whom Paid Moxy Marriott			MO	DAY	YEAR	\$ 34.42
Mailing Address 485 7th Ave			12	6	2024	
City New York	State NY	Zip Code (Plus 4) 10018	Description of Expenditure meeting			

To Whom Paid Sunoco			MO	DAY	YEAR	\$ 65.00
Mailing Address NJ TPK MILEPOST 111.6E			12	8	2024	
City SECAUCUS	State NJ	Zip Code (Plus 4) 07094	Description of Expenditure travel expense			

To Whom Paid Mailchimp			MO	DAY	YEAR	\$ 28.62
Mailing Address 675 Ponce De Leon Ave NE, Suite 5000			12	10	2024	
City Atlanta	State GA	Zip Code (Plus 4) 30308	Description of Expenditure email platform			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 70.00
Mailing Address 3735 Walnut Street			12	11	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
						\$ 1,316.09

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>11/26/2024</u> To: <u>12/31/2024</u>
-----------------------------------------------------------------------------	--------------------------------------------------------------------------------------------

				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 14,220.00
Pennsylvania House Democratic Campaign Committee							
Mailing Address				12	2	2024	
P.O. Box 35							
City	State		Zip Code (Plus 4)	Description of Debt			
Harrisburg	PA		17101	campaign services			

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 14,220.00
--------------------------------------------------------------------------------	---------------------------------------