# **Campaign Finance Report**

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

														-
Filer Identificat Number :	ion 940	0028			Report Filed B		CANDI	DATE	СОМІ	MITTEE	$\checkmark$	LOBI	BYIST	
Name of Filing	Committee, Candi	date or L	obbyist:		BROWN	E, PA	T CITIZE	NS FOR						
Street Address:	1111 N 11TI	H ST												
City:	WHITEHALL						State:	PA		Zip Co	<b>de:</b> 18	052		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE	- 2.	30 DA PRIM					MENT ?	Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		E- 5.	30 DA ELEC		POST- 6		TERMIN REPORT		Yes	No	$\checkmark$
report type)	ANNUAL REPOR	T 7. X	<b>Year</b> 200	0			NG METHO			PAPER		$\checkmark$	DISKE	TTE
Name of Office	L Sought by Candid	ate:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY									YEAR	Humber	STH	REP		39
REPRESENTAT			11	7	2000	<b> </b>	(SEE INS	STRUCTI	ONS FOR C	ODES)				
Summary of	Receipts and	мо	DAY	YEAR	R		мо	DAY	YEAR	FC	DR OFFIC	E USE	ONLY	
Expenditure	s from:		1	1	1 <b>T</b>	0	12	31	. 2000					
A. Amount Bro	ought Forward Fro	om Last R	Report			\$	4		39,828.74					
B. Total Monet	tary Contributions	s And Rec	eipts (Fro	m Sche	dule I)	\$		216.82						
C. Total Funds	Available (Sum (	Of Lines A	and B)			\$		2	10,045.56					
D. Total Exper	nditures (From Sc	hedule II	1)			\$		1	4,190.34					
E. Ending Cast	n Balance (Subtra	ct Line D	From Line	e C)		\$		2	5,855.22					
F. Value Of In-	-Kind Contributio	ns Receiv	ed (From	Schedu	le II)	\$			0.00					
G. Unpaid Deb	ts And Obligation	s (From	Schedule 1	(V)		\$			0.00					
				AFF	IDAVI	T SE	CTION							
	is a Committee re	• •						• •						
I swear (or affirm correct and comp	ı) that this report, in lete.	cluding th	e attached s	chedule	s filed on	paper	or by elect	ronic med	ium, are to	the best o	of my knov	vledge	and belie	ef , true
Sworn to and sub	scribed before me th day of	nis	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
						-				Prir	nted Name	1		
My Commission E	Signat xpires	ure								Ema	ail			
	мо	D	AY	YR		-		Area	Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorize	d Comn	nittee, C	andid	ate shall	sign her	e.					
I swear (or affirm No 320) as amend	) that to the best of led.	my knowl	edge and be	elief this	political	comm	ittee has n	ot violate	d any provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subs	cribed before me thi day of	S	20						S	ignature	of Candida	ate		
						-				Printe	ed Name			
	Signature	2				-				F				
My Commission Ex	pires					_				Ema	311			
	мо	D	ΑΥ	YR	2	-		Area Co	ode	D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BROWNE, PAT CITIZENS FOR From: To: 12/31/2000 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 216.82 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 216.82 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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				Period			
			From:	i cirioù	То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing	) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

PART B 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 Candidat	e			orting P	eriod				
	From: To:								
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
PAGE TOTAL									
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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	g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

### 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 of	Name of Filing Committee or Candidate Re							
BROWNE, PAT CITIZENS FO	DR		From:			То:		<u>12/31/2000</u>
				D	ATE			AMOUNT
<b>Full Name</b> FIRST UNION BANK				мо	DAY	YEAR		
Mailing Address 943 UNI	ION BLVD.						\$	94.60
City ALLENTOWN	<b>State</b> PA	Zip Code (1 18103	Plus 4)	11	30	2000	)	
Receipt Description IN	TEREST NOV 2000	·						
Full Name FIRST UNION BANK				мо	DAY	YEAR		
Mailing Address 943 UNI	ION BLVD.						\$	122.22
City ALLENTOWN	<b>State</b> PA	<b>Zip Code (</b> 1 18103	Plus 4)	12	29	2000	)	
Receipt Description IN	TEREST DEC 2000	·					•	
Entor Crand Total of Dart E	an Sahadula I. Dataila		Section	4				PAGE TOTAL
Enter Grand Total of Part E	on Schedule 1, Detaile	u summary Page,	Section	4.			\$	216.82

## 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	<b>Reporting Period</b>		
BROWNE, PAT CITIZENS FOR	From:	То:	<u>12/31/2000</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

# VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting	g Period				
Fr				From: To:				
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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

Name of Filing Committee or Candidate					Rej	porting P	eriod			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion	_		
Employer Mailing Address/Principal Place of Business City State			State		Zip 4)	Code(Plus	Descri	otion of	f Contribution	

		I		
Enter Grand Total of Part G on Schedule II, In	-Kind Contribut	ions Detailed		PAGE TOTAL
Summary Page, Section 3.				0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate							
BROWNE, PAT CITIZENS FOR			From			То:	<u>12/31/2000</u>	
				DATE			AMOUNT	
<b>To Whom Paid</b> FIRST UNION BANK			мо	DAY	YEAR			
Mailing Address 943 UNION BLVD.			12	12 1 2000 <b>\$</b> 20				
City ALLENTOWN State Zip Code (Plus 4)   PA 18103				tion of Exp CE CHARGE		1		
To Whom Paid INC. DAVID MILLNER GROUP			мо	DAY	YEAR			
Mailing Address 701 ROSEDALE ROA	D		12	6	2000	\$	9,400.00	
CityPRINCETONStateZip Code (Plus 4)NJ08540				<b>ition of Ex</b> TV ADS	penditure	1		
To Whom Paid OMNIPOINT			мо	DAY	YEAR			
Mailing Address PO BOX 29570			12	6	2000	\$	118.23	
City NEW YORK	State NY	<b>Zip Code (Plus 4)</b> 10087	<b>Descrip</b> PHONE	btion of Exp BILL	penditure			
To Whom Paid INC. PRECISION MARKETING			мо	DAY	YEAR			
Mailing Address 2906 WILLIAM PEN	N HIGHWAY		12	6	2000	\$	3,693.15	
City EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045		<b>otion of Exp</b> IGN PHON				
To Whom Paid MINUTEMAN PRESS			мо	DAY	YEAR			
Mailing Address 927 HAMILTON STR	EET		12	6	2000	\$	374.71	
City ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103	<b>Descrip</b> POLL C	otion of Exp ARDS	benditure	-		

To Whom Paid CPA MICHAEL ELLWOOD Mailing Address 1111 N. 11TH STREET			мо	DAY	YEAR		
			12	8	2000	\$	584.25
City WHITEHALL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18052	Description of Expenditure PREPARATION OF CAMPAIGN REPORTS				
Enter Grand Total of Expe	ıditures on Page 1, Re	eport Cover Page, Item D				\$	PAGE TOTAL 14,190.34