

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 : 2010237		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST
Name of Filing Committee, Candidate or Lobbyist: BROWN, ROSEMARY FOR STATE REP							
Street Address: PO BOX 17							
City: TANNERVILLE				State: PA		Zip Code: 18372	
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2010	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO	DAY	YEAR	Party Code
				11	2	2010	45
				(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY
		1	1	2010		5	3
				2010		2010	
A. Amount Brought Forward From Last Report					\$ 150.00		
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 2,965.01		
C. Total Funds Available (Sum Of Lines A and B)					\$ 3,115.01		
D. Total Expenditures (From Schedule III)					\$ 381.00		
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 2,734.01		
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 4,364.17		
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00		

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
BROWN, ROSEMARY FOR STATE REP	From: <u>1/1/2010</u> To: <u>5/3/2010</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 565.00

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)	\$ 1,400.00
TOTAL for the Reporting Period (2)	\$ 1,400.00

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)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.01

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.)	\$ 2,965.01
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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 Candidate BROWN, ROSEMARY FOR STATE REP	Reporting Period From: <u>1/1/2010</u> To: <u>5/3/2010</u>
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				DATE		AMOUNT	
Full Name of Contributor WILLIAM O'CALLAGHAN				MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 506				4	28	2010	
City DUSHORE	State PA	Zip Code (Plus 4) 18614					
Full Name of Contributor M/M KEN SICKLER				MO	DAY	YEAR	\$ 100.00
Mailing Address RR3 BOX 3810				4	24	2010	
City E STBG	State PA	Zip Code (Plus 4) 18360					
Full Name of Contributor JAYNE ELLEN PALADINO				MO	DAY	YEAR	\$ 100.00
Mailing Address 194-33 UNDERHILL AVE				4	29	2010	
City FRESH MEADOWS	State NY	Zip Code (Plus 4)					
Full Name of Contributor M/M NORM CRAMER				MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 53				4	24	2010	
City SCIOTA	State PA	Zip Code (Plus 4) 18354					
Full Name of Contributor MR/MRS DENNIS DUFFY				MO	DAY	YEAR	\$ 100.00
Mailing Address 907 HORIZON DR				4	21	2010	
City STROUDSBURG	State PA	Zip Code (Plus 4) 18360					

Full Name of Contributor MR/MRS ROBERT COSTELLO			MO	DAY	YEAR	\$ 100.00
Mailing Address 457 LAUREL LN			4	19	2010	
City KINNELON	State NY	Zip Code (Plus 4) 07405				

Full Name of Contributor MR/MRS. RICHARD KILGEN JR.			MO	DAY	YEAR	\$ 150.00
Mailing Address 3236 COUNTRY CLUB RD			4	22	2010	
City BRONX	State NY	Zip Code (Plus 4) 10465				

Full Name of Contributor MR./ MRS. ANTHONY TROCCHIO			MO	DAY	YEAR	\$ 100.00
Mailing Address 610 WASHINGTON CROSSINGS			4	19	2010	
City EAST STROUDSBURG	State PA	Zip Code (Plus 4) 18301				

Full Name of Contributor ROBERT HARRISON			MO	DAY	YEAR	\$ 250.00
Mailing Address PO BOX 120			3	20	2010	
City E STROUDSBURG	State PA	Zip Code (Plus 4) 18301				

Full Name of Contributor ARTHUR SMITH			MO	DAY	YEAR	\$ 100.00
Mailing Address 1008 GAPVIEW HOLLOW RD			3	18	2010	
City STROUDSBURG	State PA	Zip Code (Plus 4) 18365				

Full Name of Contributor LORNA O'FARRELL			MO	DAY	YEAR	\$ 100.00
Mailing Address 9685 STONY HOLLOW CIRCLE			3	18	2010	
City TOBYHANNA	State PA	Zip Code (Plus 4) 18466				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
MITCHELL MARCUS						
Mailing Address 26 LAKE OF PINES			3	18	2010	
City E. STROUDSBURG	State PA	Zip Code (Plus 4) 18302				

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

PAGE TOTAL
\$ 1,400.00

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 BROWN, ROSEMARY FOR STATE REP	Reporting Period From: <u>1/1/2010</u> To: <u>5/3/2010</u>
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				DATE	AMOUNT
Full Name of Contributor MARLENE MAULA				MO	DAY
Mailing Address 5 CASTLE HILL				5	4
City HENRYVILLE	State PA	Zip Code (Plus 4) 18332	2010		
Employer Name				Occupation RETIRED	
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
\$ 1,000.00

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 BROWN, ROSEMARY FOR STATE REP	Reporting Period From: <u>1/1/2010</u> To: <u>5/3/2010</u>
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			DATE			AMOUNT
Full Name ESSA BANK			MO	DAY	YEAR	\$ 0.01
Mailing Address 200 PALMER ST						
City STROUDSBURG	State PA	Zip Code (Plus 4) 18360				
Receipt Description						

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

PAGE TOTAL
\$ 0.01

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	
BROWN, ROSEMARY FOR STATE REP		From: <u>1/1/2010</u> To: <u>5/3/2010</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)	\$ 4,364.17
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.)			\$ 4,364.17

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

Name of Filing Committee or Candidate	Reporting Period
BROWN, ROSEMARY FOR STATE REP	From: <u>1/1/2010</u> To: <u>5/3/2010</u>

				DATE		AMOUNT	
Full Name of Contributor HRCC PO BOX 11787				MO	DAY	YEAR	\$ 790.26
Mailing Address PO BOX 11787							
City HARRISBURG		State PA	Zip Code(Plus 4) 17108				
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution DATA & (ILLEGIBLE) MATERIALS	

Full Name of Contributor PETER ANDREWS/ ROSE BENADI				MO	DAY	YEAR	\$ 350.00
Mailing Address 17 MANOR CT				4	24	2010	
City EAST STBG	State PA	Zip Code(Plus 4) 18301					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution SELF EMPLOYED TV INTERVIEW	

Full Name of Contributor ROSEMARY BROWN				MO	DAY	YEAR	\$ 3,223.91
Mailing Address 701 BIG RIDGE ESTATES				5	1	2010	
City E STROUDSBURG	State PA	Zip Code(Plus 4) 18302					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution GENERAL CAMAPIGN START UP	

**Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed
Summary Page, Section 3.**

PAGE TOTAL

4,364.17

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
BROWN, ROSEMARY FOR STATE REP	From <u>1/1/2010</u> To: <u>5/3/2010</u>

DATE				AMOUNT
To Whom Paid JASON TRUMP DESIGNS	MO	DAY	YEAR	
Mailing Address PO BOX 800	4	19	2010	\$ 250.00
City E STB	State PA	Zip Code (Plus 4) 18301	Description of Expenditure DESIGN SERVICES	
To Whom Paid JASON TRUMP DESIGNS	MO	DAY	YEAR	
Mailing Address PO BOX 800	4	27	2010	\$ 90.00
City E STB	State PA	Zip Code (Plus 4) 18301	Description of Expenditure LOGO DESIGN ETC.	
To Whom Paid SHERMAN THEATER	MO	DAY	YEAR	
Mailing Address MAIN ST	4	24	2010	\$ 25.00
City STROUDSBURG	State PA	Zip Code (Plus 4) 18360	Description of Expenditure RENT TABLE FOR EVENT	
To Whom Paid ESSA	MO	DAY	YEAR	
Mailing Address 200 PALMER ST	3	31	2010	\$ 8.00
City STBG	State PA	Zip Code (Plus 4) 18360	Description of Expenditure ACCT ANALYSIS SERV CHG	
To Whom Paid ESSA	MO	DAY	YEAR	
Mailing Address 200 PALMER ST	4	7	2010	\$ 8.00
City STBG	State PA	Zip Code (Plus 4) 18360	Description of Expenditure REFUND SERV CHG	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 381.00

