

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

Friends of Dr. Janis C. Brooks

ADDRESS (number and street)

Check if different than previously reported. (ACC)

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00510917

3. IS THIS REPORT NEW OR AMENDED

STATE DISTRICT PA 18

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY 04/01/2020 through 06/30/2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brooks, Janis, Claire, Dr.,

Signature of Treasurer

Brooks, Janis, Claire, Dr.,

[Electronically Filed]

Date

MM/DD/YYYY 07/15/2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Table with 7 columns and 1 row for Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Friends of Dr. Janis C. Brooks

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	2141.48	3037.48
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2141.48	3037.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2141.48	5119.40
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2141.48	5119.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1869.53	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Friends of Dr. Janis C. Brooks

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	232.00
(ii) Unitemized.....	0.00	174.00
(iii) TOTAL of contributions from individuals ▶	0.00	406.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	2141.48	2631.48
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2141.48	3037.48
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	2141.48	3037.48

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2141.48	5119.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2141.48	5119.40

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1869.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2141.48
25. SUBTOTAL (add Line 23 and Line 24).....	4011.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2141.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1869.53

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 7
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Dr. Janis C. Brooks

A. Full Name (Last, First, Middle Initial)
Brooks, Janis, Claire, Dr.,

Mailing Address 814 Maple Ave

City N. Versailles	State PA	Zip Code 15137
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FEC ID number of contributing federal political committee. **C** H8PA18272

Name of Employer CADAprograms	Occupation CEO & Founer
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
150.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 30 / 2020

Transaction ID : SA11D.4137

Amount of Each Receipt this Period
150.00

Memo Item
In-kind - Media

B. Full Name (Last, First, Middle Initial)
Brooks, Janis, Claire, Dr.,

Mailing Address 814 Maple Ave

City N. Versailles	State PA	Zip Code 15137
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FEC ID number of contributing federal political committee. **C** H8PA18272

Name of Employer CADAprograms	Occupation CEO & Founer
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
741.48

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2020

Transaction ID : SA11D.4131

Amount of Each Receipt this Period
591.48

Memo Item
In-kind - Signs

C. Full Name (Last, First, Middle Initial)
Brooks, Janis, Claire, Dr.,

Mailing Address 814 Maple Ave

City N. Versailles	State PA	Zip Code 15137
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FEC ID number of contributing federal political committee. **C** H8PA18272

Name of Employer CADAprograms	Occupation CEO & Founer
----------------------------------	----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2141.48

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 07 / 2020

Transaction ID : SA11D.4141

Amount of Each Receipt this Period
1400.00

Memo Item
In-kind - Social Media

SUBTOTAL of Receipts This Page (optional).....▶	2141.48
TOTAL This Period (last page this line number only).....▶	2141.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 7	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dr. Janis C. Brooks

Full Name (Last, First, Middle Initial) A. Brooks, Janis, Claire, Dr.,			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2020	
Mailing Address 814 Maple Ave			FEC Identification Number C H8PA18272	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Disbursement this Period 591.48	
Purpose of Disbursement In-kind - Signs		Category/ Type	Transaction ID : SB17.4132	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: PA District: 18				

Full Name (Last, First, Middle Initial) B. Brooks, Janis, Claire, Dr.,			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2020	
Mailing Address 814 Maple Ave			FEC Identification Number C H8PA18272	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Disbursement this Period 1400.00	
Purpose of Disbursement In-kind - Social Media		Category/ Type	Transaction ID : SB17.4142	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: PA District: 18				

Full Name (Last, First, Middle Initial) c. Capitol Promotions			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2020	
Mailing Address POBox 231			FEC Identification Number C H8PA18272	
City Glenside	State PA	Zip Code 19038	Amount of Each Disbursement this Period 591.48	
Purpose of Disbursement In kind signs		Category/ Type	Transaction ID : SB17.4135	
Candidate Name Brooks, Janis, Claire, Dr.,		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: PA District: 18				

SUBTOTAL of Disbursements This Page (optional).....▶	1991.48
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 7	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dr. Janis C. Brooks

Full Name (Last, First, Middle Initial) A. Ken Nixon			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2020	
Mailing Address 814 Maple Ave			FEC Identification Number C	
City Buffalo	State NY	Zip Code 14201	Amount of Each Disbursement this Period 1400.00	
Purpose of Disbursement Social Media		Category/ Type	Transaction ID : SB17.4143	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Soul Pitt Media			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2020	
Mailing Address PO Box 17570			FEC Identification Number C	
City Pittsburgh	State PA	Zip Code 15235	Amount of Each Disbursement this Period 150.00	
Purpose of Disbursement In Kind Media		Category/ Type	Transaction ID : SB17.4139	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	1991.48