

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

RECEIVED
2013 JUN 17 AM 7:10
Office Use Only

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

FEC MAIL CENTER
12FE4M5

FRIENDS OF DR JANIS C BROOKS

ADDRESS (number and street) ▼

Check if different than previously reported. (ACC)

PO BOX 414
C/O 814 MAPLE AVENUE
NORTH VERSAILLES PA 15137-1346

2. FEC IDENTIFICATION NUMBER ▼

C00510917

CITY ▲ STATE ▲ ZIP CODE ▲
STATE ▼ DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A)
PA 14

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 _____ in the State of _____

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

- General (30G) Runoff (30R) Special (30S)
- Election on _____ in the State of _____

5. Covering Period 10 01 2012 through 12 31 2012

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 Cheryl L. Allen

Signature of Treasurer *Cheryl L. Allen* Date 05 23 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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FEC FORM 3
(Revised 02/2003)

13031080230

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

FRIENDS OF DR. JANIS C. BROOKS

Report Covering the Period: From: 10 01 2012 To: 12 31 2012

13031080231

	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))	000	000
(b) Total Contribution Refunds (from Line 20(d))	000	000
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	000	000
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5900	423100
(b) Total Offsets to Operating Expenditures (from Line 14)	000	000
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5900	423100
8. Cash on Hand at Close of Reporting Period (from Line 27)	000	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	000	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	000	

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 12/2003)

Page 3

Write or Type Committee Name

Friends of Dr. James C. Brooks

Report Covering the Period: From:

10 01 2012

To:

12 31 2012

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).....

000

285.00

(ii) Unitemized.....

000

1142.00

(iii) TOTAL of contributions from individuals ▶

000

1142.00

(b) Political Party Committees.....

000

000

(c) Other Political Committees (such as PACs).....

0.00

000

(d) The Candidate.....

000

000

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

000

1142.00

12. TRANSFERS FROM OTHER

AUTHORIZED COMMITTEES.....

000

000

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

000

4650.00

(b) All Other Loans.....

000

000

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

000

4650.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

000

000

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

000

000

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

000

5777.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	000	423100
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	000	000
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	000	000
(b) Of All Other Loans	000	000
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	000	000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	000	000
(b) Political Party Committees.....	000	000
(c) Other Political Committees (such as PACs)	000	000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	000	000
21. OTHER DISBURSEMENTS	000	28500
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►		451600

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	96100
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	000
25. SUBTOTAL (add Line 23 and Line 24).....	000
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	000
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	96100

**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 | OF |

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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. James C. Brooks

Full Name (Last, First, Middle Initial)

A. *North Versailles Post Office*

Mailing Address

City *North Versailles* State *PA* Zip Code *15137*

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Amount of Each Disbursement this Period

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Amount of Each Disbursement this Period

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

13031080334

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Friends of Dr. Lewis C. Brooks

LOAN SOURCE Full Name (Last, First, Middle Initial)

Brooks, Lewis C.

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address

814 Maple Ave.

City

State

ZIP Code

North Versailles, PA 15137

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

405000

000

405000

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

01 12 2012

NONE

NONE

% (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ►

TOTALS This Period (last page in this line only)..... ►

405000

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

13031080235

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 1

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Friends of Dr. James C. Brooks

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	▶	000
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	405000
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		405000

13031080236

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER

6/17/13
 DATE PREPARED

13031080237