

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

RECEIVED
FEC MAIL CENTER
2016 JAN 28 PM 12:07
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)

P O BOX 1414

Check if different than previously reported. (ACC)

C/O 814 MAPLE AVENUE

NORTH VERSAILLES PA 15137-1346

CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00510917

3. IS THIS REPORT NEW (N) OR AMENDED (A)

STATE ▼ DISTRICT

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 M M / D D / Y Y Y Y in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 10/01/2015 through 12/31/2015

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

01/22/2016

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

FRIENDS OF DR. JANIS C. BROOKS

Report Covering the Period: From: 10 / 01 / 2015 To: 12 / 31 / 2015

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)).....	80.00	340.00
(b) Total Contribution Refunds (from Line 20(d)).....		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....		340.00

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17).....	147.50	6,609.80
(b) Total Offsets to Operating Expenditures (from Line 14).....		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....		6,609.80

8. Cash on Hand at Close of Reporting Period (from Line 27)..... 550.45

9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... 10,045.92

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)

Write or Type Committee Name

FRIENDS OF DR. JANIS C. BROOKS

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 10 01 2015 To: ^{M M / D D / Y Y Y Y} 12 31 2015

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).....	80.00	3,400.00
(ii) Unitemized.....		
(iii) TOTAL of contributions from individuals ▶	80.00	3,400.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(ii), (b), (c), and (d))..	80.00	3,400.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

13. LOANS:

(a) Made or Guaranteed by the Candidate.....	1,475.00	6,609.80
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	1,475.00	6,609.80

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	227.50	6,949.80
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ACCOUNTING AND FINANCE

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	1,475.00	6,609.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans.....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS.....		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1,475.00	6,609.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	550.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1,475.00
25. SUBTOTAL (add Line 23 and Line 24).....	6,979.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1,475.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	550.45

**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) OF)
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input 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

Full Name (Last, First, Middle Initial) A. Bridgeman, Constance		Date of Receipt M M / D D / Y Y Y Y 11 01 2015
Mailing Address 2071 Guinivere Dr.		Amount of Each Receipt this Period 50.00
City N. Huntingdon	State Zip Code PA 15642	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. Bridgeman, Constance		Date of Receipt M M / D D / Y Y Y Y 12 01 2015
Mailing Address 2071 Guinivere Dr.		Amount of Each Receipt this Period 30.00
City N. Huntingdon	State Zip Code PA 15642	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

NON-PROFIT CORPORATION

**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 checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 18a <input type="checkbox"/> 18b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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) Segway

Date of Disbursement 10 15 2015

Mailing Address 2310 S. Sepulveda Blvd.

City Los Angeles State CA Zip Code 90064

Purpose of Disbursement Phone bill payment

Candidate Name Dr. Janis C. Brooks

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: PA District: 14

Amount of Each Disbursement this Period 55.50

Supported by line 17
Paid by Debit Card

B.

Full Name (Last, First, Middle Initial) Reaves, Curtis

Date of Disbursement 11 12 2015

Mailing Address 701 Richford St.

City Duquesne State PA Zip Code 15110

Purpose of Disbursement Photographer

Candidate Name Dr. Janis C. Brooks

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: PA District: 14

Amount of Each Disbursement this Period 50.00

Supported by line 17
Paid by Check

C.

Full Name (Last, First, Middle Initial) North Versailles Post Office

Date of Disbursement 09 10 2015

Mailing Address North Versailles

City North Versailles State PA Zip Code 15137

Purpose of Disbursement

Candidate Name Dr. Janis C. Brooks

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: PA District: 14

Amount of Each Disbursement this Period 42.00

Supported by line 17
Paid by Debit Card

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

20150108 10:00 AM

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) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
FRIENDS OF DR JANIS C. BROOKS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Brooks, Janis C.		Nature of Debt (Purpose): Campaign Expense
Mailing Address 814 Maple Avenue		
City North Versailles, PA	State PA	
Outstanding Balance Beginning This Period		
, 9,898.42		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
, 1,475.50		, 10,045.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	
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	
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)	▶	
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

20100101 10:00:00 AM : 0000000000

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 11/22/16
<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
(3/2015)

11/22/16
DATE PREPARED

NON-PROFIT CORPORATION