

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))....	3418.25	4314.25
(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)).....	3418.25	4314.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3243.06	6220.98
(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)).....	3243.06	6220.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2044.72	
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.....	60.00	234.00
(iii) TOTAL of contributions from individuals ▶	60.00	466.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	3358.25	3848.25
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3418.25	4314.25
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)..... ▶	3418.25	4314.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3243.06	6220.98
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) ►	3243.06	6220.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1869.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3418.25
25. SUBTOTAL (add Line 23 and Line 24).....	5287.78
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3243.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2044.72

**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 12
	<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	

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

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 07 / 2020		
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4136		
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period 324.85		
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item <input type="checkbox"/> Campaign Materials		
Name of Employer CADAprograms		Occupation CEO & Founer			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 324.85			

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2020		
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4138		
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period 1075.00		
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item <input type="checkbox"/> legal		
Name of Employer CADAprograms		Occupation CEO & Founer			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1399.85			

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 01 / 2020		
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4144		
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period 81.32		
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item Dollar Tree Supplies		
Name of Employer CADAprograms		Occupation CEO & Founer			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1481.17			

SUBTOTAL of Receipts This Page (optional)..... ▶	1481.17
TOTAL This Period (last page this line number only)..... ▶	

**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 6 OF 12	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 03 / 2020	
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4149	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period 115.19	
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item food	
Name of Employer CADAprograms		Occupation CEO & Founer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1596.36		

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 15 / 2020	
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4142	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period 67.41	
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item office max	
Name of Employer CADAprograms		Occupation CEO & Founer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1663.77		

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 16 / 2020	
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4146	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item In-kind -	
Name of Employer CADAprograms		Occupation CEO & Founer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1673.77		

SUBTOTAL of Receipts This Page (optional)..... ▶	192.60
TOTAL This Period (last page this line number only)..... ▶	

**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 7 OF 12	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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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
----------------------------------	----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1823.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2020

Transaction ID : SA11D.4148

Amount of Each Receipt this Period
150.00

Memo Item filing fee

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 ▼
1865.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11D.4132

Amount of Each Receipt this Period
42.13

Memo Item In-kind -

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
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1955.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11D.4151

Amount of Each Receipt this Period
90.00

Memo Item po box

SUBTOTAL of Receipts This Page (optional)..... ▶	282.13
TOTAL This Period (last page this line number only)..... ▶	

**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 8 OF 12	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 02 / 2020	
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4152	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period _____ 193.98	
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item Go Daddy	
Name of Employer CADAprograms		Occupation CEO & Founer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2149.88		

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 08 / 2020	
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4140	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period _____ 1093.00	
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item In-kind -	
Name of Employer CADAprograms		Occupation CEO & Founer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 3242.88		

Full Name (Last, First, Middle Initial) Brooks, Janis, Claire, Dr.,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2020	
Mailing Address 814 Maple Ave			Transaction ID : SA11D.4150	
City N. Versailles	State PA	Zip Code 15137	Amount of Each Receipt this Period _____ 115.37	
FEC ID number of contributing federal political committee. C H8PA18272			<input type="checkbox"/> Memo Item phone	
Name of Employer CADAprograms		Occupation CEO & Founer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 3358.25		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 1402.35
TOTAL This Period (last page this line number only)..... ▶	_____ 3358.25

**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 9 OF 12			
	<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 01 / 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 324.85		
Purpose of Disbursement Campaign Materials		Category/ Type	Transaction ID : SB17.4137		
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 01 / 27 / 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 1075.00		
Purpose of Disbursement legal		Category/ Type	Transaction ID : SB17.4139		
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. Brooks, Janis, Claire, Dr.,			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 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 81.32		
Purpose of Disbursement Dollar Tree Supplies		Category/ Type	Transaction ID : SB17.4145		
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					

SUBTOTAL of Disbursements This Page (optional).....▶	1481.17
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 10 OF 12	
	<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 02 / 15 / 2020
Mailing Address 814 Maple Ave		FEC Identification Number C H8PA18272
City N. Versailles	State PA	Zip Code 15137
Purpose of Disbursement office max		Amount of Each Disbursement this Period 67.41
Candidate Name	Category/ Type	Transaction ID : SB17.4143
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) ▼	<input type="checkbox"/> Memo Item
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 02 / 16 / 2020
Mailing Address 814 Maple Ave		FEC Identification Number C H8PA18272
City N. Versailles	State PA	Zip Code 15137
Purpose of Disbursement In-kind -		Amount of Each Disbursement this Period 10.00
Candidate Name	Category/ Type	Transaction ID : SB17.4147
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) ▼	<input type="checkbox"/> Memo Item
State: PA District: 18		

Full Name (Last, First, Middle Initial) c. Brooks, Janis, Claire, Dr.,		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2020
Mailing Address 814 Maple Ave		FEC Identification Number C H8PA18272
City N. Versailles	State PA	Zip Code 15137
Purpose of Disbursement In-kind -		Amount of Each Disbursement this Period 42.13
Candidate Name	Category/ Type	Transaction ID : SB17.4135
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) ▼	<input type="checkbox"/> Memo Item
State: PA District: 18		

SUBTOTAL of Disbursements This Page (optional).....▶	119.54
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 11 OF 12	
	<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 03 / 02 / 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 193.98	
Purpose of Disbursement Go Daddy		Category/Type	Transaction ID : SB17.4153	
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 03 / 08 / 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 1093.00	
Purpose of Disbursement In-kind -		Category/Type	Transaction ID : SB17.4141	
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. Friends of Dr. Janis C. Brooks			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020	
Mailing Address			FEC Identification Number C C00510917	
City	State	Zip Code	Amount of Each Disbursement this Period 115.37	
Purpose of Disbursement cell phone		Category/Type	Transaction ID : SB17.4177	
Candidate Name Friends of Dr. Janis C. Brooks		<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				

SUBTOTAL of Disbursements This Page (optional).....▶	1402.35
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 12 OF 12	
	<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. Friends of Dr. Janis C. Brooks		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address		FEC Identification Number C C00510917
City	State	
Purpose of Disbursement PO Box	Category/Type	Amount of Each Disbursement this Period 90.00
Candidate Name Friends of Dr. Janis C. Brooks	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4178
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18		<input type="checkbox"/> Memo Item

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

SUBTOTAL of Disbursements This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	3093.06