Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	ion	20012	257			Report Filed B		CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing	Committee	, Candida	ate or Lo	obbyist:		DayPAC	-									
Street Address:	PO Bo	ox 60178	3													
City:	King c	of Prussia	a					State:	PA			Zip Co	de: 19	406		
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIM		POST- 3.		AMENDMENT REPORT?		Yes	No	, 🔨	
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	Y PRE	- 5. X	30 DA		POST- 6.		TERMIN/ REPORT		Yes	No	° √	
report type)	ANNUAL	REPORT	7.	Year 2015			FILING METHOD () CHECK ONE					PAPER		\checkmark	DISKE	TTE
Name of Office	Sought by	Candidat	te:					DATE O	F ELEC	ст10	N	District Number	Office Code	Par	ty Code	County Code
								мо	DAY	YE	AR					
								11		3	2015]	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	R OFFIC	E USE	ONLY	
Expenditure	s from:			9 15	20	015 T	0	10	1	9	2015					
A. Amount Bro	ought Forw	ard From	n Last R	eport			\$			55,6	522.24					
B. Total Monet	tary Contri	butions A	And Rec	eipts (Fron	1 Sche	dule I)	\$				35.00	-				
C. Total Funds	Available	(Sum Of	Lines A	and B)			\$			55,6	557.24					
D. Total Exper	nditures (Fi	rom Sche	edule II	I)			\$			2,1	.31.99					
E. Ending Cash	h Balance (Subtract	Line D	From Line	C)		\$			53,5	25.25					
F. Value Of In-	-Kind Cont	ributions	Receiv	ed (From S	chedu	le II)	\$				0.00	-				
G. Unpaid Deb	ots And Obl	igations	(From S	Schedule IV	()		\$				0.00					
					AFF	IDAVI	Г SE	CTION								
PART I - If this i		-		-								-	e I			
I swear (or affirm correct and comp		ерогт, іпсі	uaing the	attached sc	neaules	filed on	paper	or by elect	ronic me	aium	, are to t	the best o	т ту кпоч	viedge	and bei	er, true
Sworn to and sub	scribed befo day of	re me this		20						s	ignature	e of Perso	n Submitt	ing Rep	oort	
		Signatur	re				-					Prin	ted Name			
My Commission E	xpires	-					_					Ema	il			
	Ν	мо	D	AY	YR		_		Are	a Cod	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comm	nittee, Ca	andid	ate shall	sign he	ere.						
I swear (or affirm No 320) as amend		e best of m	ıy knowle	edge and beli	ef this	political	comm	ittee has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subs	cribed before day of	e me this		20							S	ignature (of Candida	ite		
				-~			-					Printe	ed Name			
My Commission Ex		ignature					-					Ema	il			
	_	мо	D	AY	YR				Area	Code		D	aytime Te	elephon	e Numb	er
			2.										-	-		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>9/15/2015</u> **To:** DayPAC 10/19/2015 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 35.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 35.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				porting I	Period			
			Fre	om:		То	•	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

PAGE 3

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 Candidat	e		Rep Froi	oorting P m:	eriod	тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00	

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 Can	Name of Filing Committee or Candidate			Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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 C	Name of Filing Committee or Candidate			ting Perio	bd				
				From: To:					
			I	D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	I				1				
Enter Grand Total of Part E o	- Schadula I. Datailac	l Summary Page	Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	Section	7.			\$		0.00

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		
DayPAC	From:	<u>9/15/2015</u> то :	<u>10/19/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period					
F						То:		
				DATE		АМС	DUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

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

Name of Filing Committee or Candidate					Reporting Period					
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion		•	
Employer Mailing Address/Principal Place of City Susiness			State		Zip 4)	Code(Plus	Descri	ption of	Contribution	

	1	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed		PAGE TOTAL
Summary Page, Section 3.		0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
DayPAC			From	<u>9/1</u>	<u>5/2015</u>	То:	<u>10/19/2015</u>		
				DATE			AMOUNT		
To Whom Paid AT&T Wireless			мо	DAY	YEAR				
Mailing Address PO Box 537104			9	28	2015	\$	97.81		
City Atlanta	State GA	Zip Code (Plus 4) 303537104		Description of Expenditure Cell phone					
To Whom Paid Extra Space Storage			мо	DAY	YEAR				
Mailing Address 282 S Gulph Rd			9	15	2015	\$	183.83		
CityKing Of PrussiaStateZip Code (Plus 4)PA194063106				Description of Expenditure Storage space					
To Whom Paid Extra Space Storage			мо	DAY	YEAR				
Mailing Address 282 S Gulph Rd			10	13	2015	\$	183.83		
City King Of Prussia	State PA	Zip Code (Plus 4) 194063106	Descrip Storage	ition of Exp	benditure	1			
To Whom Paid Google.com			мо	DAY	YEAR				
Mailing Address 1600 Amphitheatre	Pkwy		10	17	2015	\$	15.00		
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Descrip email	tion of Exp	benditure				
To Whom Paid Zachary Hoover			мо	DAY	YEAR				
Mailing Address 21 Prospect Ave			10	7	2015	\$	150.00		
City Bryn Mawr	State PA	Zip Code (Plus 4) 190102604		otion of Exp Irsements	penditure	1			

To Whom Paid			мо	DAY	YEAR		
Litle & Co./ Vantiv							
Mailing Address			10	1	2015	\$	1.52
City	State	Zip Code (Plus 4)	Description of Expenditure credit card processing fees				
To Whom Paid Madway411.org			мо	DAY	YEAR		
Mailing Address 907 Morris Ave			10	16	2015	\$	150.00
City Bryn Mawr	State PA	Zip Code (Plus 4) 190101821	Description of Expenditure Contribution				
To Whom Paid NGP VAN Inc.			мо	DAY	YEAR		
Mailing Address 1101 15th St NW Ste 500			10	7	2015	\$	600.00
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure Software				
To Whom Paid Shapiro/Arkoosh			мо	DAY	YEAR		
Mailing Address PO Box 348			10	7	2015	\$	500.00
City Norristown	State PA	Zip Code (Plus 4) 194040348	Description of Expenditure Contribution				
To Whom Paid Upper Merion Democratic Committee			мо	DAY	YEAR		
Mailing Address PO Box 60443			10	16	2015	\$	250.00
City King Of Prussia	State PA	Zip Code (Plus 4) 194060443	Description of Expenditure contribution				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	PAGE TOTAL 2,131.99