Campaign Finance Report

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

Filer Identification 2016C1056 Number :						eport led B		CANE	OIC	DATE	√	СО	MMITTEE	MMITTEE LOBBYIST		BYIST			
Name of Filing C	ommittee,	Candida	ate or Lo	obbyist:		STE	EVEN	BURI	DA		•								
Street Address:																			
City:									State:					Zip Code	: 19	403			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	Y PRE	-	2. X	30 DA PRIMA		P	OST-	3.		AMENDME REPORT?	NT	Yes	No	1	/
	6TH TUESDA PRE-ELECTI		4.	2ND FRIDAY ELECTION	Y PRE	E-	5.	30 DA		P	OST-	6.		TERMINATION REPORT?		Yes	No		/
	ANNUAL RI	EPORT	7.	Year 2016					IG METI CHECK					PAPER		\	DISKE	TTE	
Name of Office S	ought by C	andidat	:e:						DATE	OF	F ELEC	CTION		District Number	Office Code	Par	ty Code	Coun	
	- 								МО		DAY	YEAR		150	DEN	1	46		
REPRESENTATI	VE IN THE	GENERA	AL ASS	EMBLY					1	1		8 2	016		(SEE INS	TRUCTI	ONS FOR	CODES	,
Summary of I		and	МО	DAY	YEAR	ł			МО		DAY	YEAR	2	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			3 8	2	016	5 T	0		4	1	.1 2	016						
A. Amount Brou	ught Forwa	rd From	ı Last R	eport				\$				1,200	.00						
B. Total Moneta	ary Contribu	utions A	ind Rec	eipts (From	Sche	dule	e I)	\$				50	.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				1,250	.00						
D. Total Expend	ditures (Fro	om Sche	dule II	I)				\$				1,076	.00						
E. Ending Cash	Balance (S	ubtract	Line D	From Line (C)			\$				174	.00						
F. Value Of In-I	Kind Contri	butions	Receive	ed (From So	chedu	le I	Ί)	\$				0	.00						
G. Unpaid Debt	s And Oblig	jations ((From S	Schedule IV)			\$				50	.00		,				
					AFF	·ID	AVI	T SE	CTION	J									
PART I - If this is		•	•								•		-						
I swear (or affirm) correct and comple		ort, inclu	ıding the	: attached sch	nedules	s file	ed on	paper (or by ele	ctr	onic me	edium, ar	e to t	he best of ı	my know	/ledge	and beli	ef , tr	пе
Sworn to and subs	cribed before day of	e me this		20						-		Sign	ature	of Person	Submitti	ing Rep	ort		_
		Signature				_		<u>-</u>		-				Printe	d Name				-
My Commission Ex		Signatur	e							-				Email					- [
	мс	0	D/	AY	YR					_	Are	a Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of	f a cand	idate's	authorized	Comr	nitte	ee, C	andid	ate sha	ll s	ign he	re.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge and beli	ef this	; poli	itical	comm	ittee has	no	ot violat	ed any pi	rovisi	ions of the	act of Ju	ne 3,1	937 (P.L	1333	3,
Sworn to and subsc		me this											Si	ignature of	Candida	te			-
	day of —— —							_						Printed	Name				-
	Siq	gnature						-						Finica					_
My Commission Exp	_	-								-				Email					
		мо	Di	AY	YR	1		-			Area	Code		Daytime Telephone Number				er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
STEVEN BURDA	From:	<u>3/8/201</u>	<u>6</u> To:	4/11/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	50.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)	\$	0.00		
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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	50.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu								
Name of Filing Comm	Name of Filing Committee or Candidate			porting	Period				
			From: T			То	o:		
		<u> </u>			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)						
	•	·			•	•	$\overline{}$	DACE TOTAL	

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

PAGE TOTAL \$0.00

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 Fining Committee of Candidate			Reporting Period From: To:						
			l		DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							

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

PAGE TOTAL \$ 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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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.)

lame of Filing Committee or Candidate			Reporting Period							
				Fror	n:		To	То:		
					D	ATE		AI	MOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address							\$	0.00		
City	State	Zip Cod	de (Plus	s 4)						
Employer Name	•				Occupa	tion				
Employer Mailing Address/Principal Pla Business	ice of	Ci	ty			State		Zip Cod	e (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P \$	AGE TOTAL 0.00	

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	Section	••			\$	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 Perio	d	
STEVEN BURDA	From:	3/8/2016 To :	4/11/2016
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	40.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,	•	\$	40.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	lame 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 (Plus 4)							
Description of Contribution:									
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL		
Section 2.						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	te				Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	ation				
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee	e or Candidate			Reporti	ng Period			
STEVEN BURDA				From	<u>3/3</u>	8/2016	То:	4/11/2016
					DATE			AMOUNT
To Whom Paid VOTER WEB.ORG / DAVID	D DIANO			мо	DAY	YEAR		
Mailing Address 236 C	ORNERSTONE	DR.					\$	150.00
City NEWTOWN SOLIA	DE	State	Zip Code (Plus 4)	Dogovis	otion of Ex			
NEWTOWN SQUAR	KE	PA	190734049	·	ERVICES R			COMPAING
To Whom Paid THE SIGN GUY				МО	DAY	YEAR		
Mailing Address				3	24	2016	\$	428.15
City OMAHA State Zip Code (Plus 4) NE 68137			1	otion of Exp	'		RDA"	
To Whom Paid GARAGE / YARD SALES &	amp;			мо	DAY	YEAR		
Mailing Address VARIO	OUS						\$	100.00
City VARIOUS		State	Zip Code (Plus 4)	Descri	tion of Ex	nenditure		
, VARIOUS		PA		SUPPLI	ES NEEDE IGNING			o;
To Whom Paid HOME DEPOT				МО	DAY	YEAR		
Mailing Address TROO	PER						\$	50.00
City W. NORRITON		State	Zip Code (Plus 4)	Descri	tion of Ex	nenditure		
- W. NORKITON		PA	19403	1				o; CAMPAIGN
To Whom Paid FACEBOOK ADS				мо	DAY	YEAR		
Mailing Address ONLIN	IE PAYMENT						\$	217.88
ity ONLINE PAYMENT State Zip Code (Plus 4)				1	otion of Exp			

To Whom Paid	o Whom Paid								
DISCOVER CARD (CREDIT CA	ARD)		МО	DAY	YEAR				
Mailing Address ONLINE						\$	80.00		
City State Zip Code (Plus 4)				Description of Expenditure GAS RELATING TO CAMPAIGN					
To Whom Paid DISCOVER CARD (CREDIT CA	МО	DAY	YEAR						
Mailing Address ONLINE						\$	25.00		
City	State	Zip Code (Plus 4)	Description of Expenditure GAS RELATING TO COMPAIGN						
To Whom Paid DISCOVE CARD (CREDIT CAR	RD)		МО	DAY	YEAR				
Mailing Address ONLINE						\$	25.00		
City	Description of Expenditure GAS RELATING TO COMPAIGN								
							PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	1,076.03		

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate				Reporting Period					
STEVEN BURDA				From:		<u>3/8/2016</u>	То:		<u>4/11/2016</u>
						DATE			Outstanding Balance of Debt
Name of Creditor FACEBOOK ADS					мо	DAY	YEAR		
Mailing Address ONLINE					4	11	2016	\$	50.00
City ONLINE		State	Zip Code (Pl	us 4)	Description of Debt FACEBOOK ADS				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.									PAGE TOTAL
								\$	50.00