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 8100	237			Repor Filed			CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST		
Name of Filing (Committee, Candid	ate or Lo	bbyist:	I	PENNS	YLVA	ANI	A APART	MENT	ASS	OCIATI	ON					
Street Address:	ONE BALA PL	AZA STE	515														
City:	BALA CYNWY	C						State:	PA			Zip Co	de: 19	9004-0000			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.		DA) IMA		POST-	3.		AMENDMENT REPORT?		Yes	٩	lo	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					DA\ ECTI		POST- 6. X			TERMIN/ REPORT	Yes	٩	lo	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2017			FILING METH								\checkmark	DISK	ETTE	
Name of Office S	L Sought by Candida	te:						DATE O	F ELEC	TIO	N	District Number	Office Code	Par	ty Cod	e Cou Cod	
	···· · ····							мо	DAY	YE	AR	Number	Code			1000	
								11		7	2017	·	(SEE INS	TRUCTI	ONS FO	R CODE	S)
Summary of	Receipts and	мо	DAY	YEAR			[мо	DAY	Y	EAR	FC	R OFFIC	E USE	ONL	(
Expenditures	s from:	1	0 24	20	017	ГО		11	2	7	2017						
A. Amount Bro	ught Forward From	n Last Re	eport				\$		1	.45,5	543.98	1					
B. Total Monet	ary Contributions	And Rece	eipts (Fron	1 Schee	dule I)		\$			4,0	00.00						
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)						\$		1	.49,5	543.98						
D. Total Expenditures (From Schedule III)							\$			40,1	.93.41						
E. Ending Cash	Balance (Subtrac	t Line D l	From Line	C)			\$		1	09,3	50.57						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	/)			\$		0.00								
				AFF	IDAV	IT S	SEC	CTION									
PART I - If this i	s a Committee rep	ort, treas	surer sign	here. I	f this i	s a C	Cano	didate re	eport, ca	andio	date sig	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedules	filed or	n pape	er o	r by electi	ronic me	dium	, are to t	the best o	f my knov	vledge	and be	lief , t	rue
Sworn to and subs	scribed before me this day of	5	20							s	ignature	e of Perso	n Submitt	ing Rep	oort		_
	Signatu	re				_						Prin	ted Name				-
My Commission E	-											Ema	il				-
	мо	DA	Y	YR					Are	a Cod	le	Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comm	ittee, (Cand	lida	te shall :	sign he	re.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	dge and beli	ef this	political	com	nmit	tee has n	ot violate	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P	.L. 133	33,
Sworn to and subso	ribed before me this day of		20								s	ignature	of Candida	ite			_
			20			_						Printe	d Name				-
My Commission Exp	Signature											Ema	il				_
						_											_
	мо	DA	Y	YR					Area C	Code		D	aytime Te	elephon	e Nun	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** PENNSYLVANIA APARTMENT ASSOCIATION From: <u>10/24/2017</u> **To:** <u>11/27/2017</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **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)** 2,000.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 2,000.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 2,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 2,000.00 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 \$ 4,000.00 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			Reporting Period					
	Fro					:		
					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

\$

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	Part to ite \$5	\$5 mize all ot 0.01 to \$2	0.01 ther c 50.00	PART B ONTRIE TO \$250.00 contribution in the repo litical comm	s wi ortin	ith an g peri	aggrega iod.			from
Name of Filing Committ	ee or Candidat	e			Rep	orting Po	eriod			
PENNSYLVANIA APART	MENT ASSOCI	ATION			Fror	n:	<u>10/24/2</u>	2017 To	:	<u>11/27/2017</u>
							DATE			AMOUNT
Full Name of Contributor Jace Kieffer							DAY	YEAR		
Mailing Address 110 S	Shackamaxon	St							\$	250.00
City Philadelphia		State	z	2 (Plus 4)		10	30	2017		
		PA		19125						
Full Name of Contributor April Slobodrian						мо	DAY	YEAR		
Mailing Address 2520 Cindy Lane									\$	250.00
City Warrington		State PA		2 ip Code (Plus 4) 18976		10	30	2017		
Full Name of Contributor Dave Klosinski						мо	DAY	YEAR		
Mailing Address POB	378								\$	250.00
City West Grove		State	z	(Plus 4)		10	30	2017		
		PA		19390						
Full Name of Contributor Lauren Tench						мо	DAY	YEAR		
Mailing Address 6 Asp	oen Dr								\$	250.00
City New Hope		State PA		2 ip Code (Plus 4) 18938		10	30	2017		
Full Name of Contributor Bill Friend						мо	DAY	YEAR		
Mailing Address 210 (Quartz Court								\$	250.00
City Warrington		State		Zip Code (Plus 4)		10	30	2017		
		PA		18976	1					

Full Name of Contributor Seth Rhodes	h Rhodes					
Mailing Address 4525 S. 8	6th St					\$ 250.00
City Lincoln	State NE	Zip Code (Plus 4) 68526	10	30	2017	
Full Name of Contributor Debra Durso		мо	DAY	YEAR		
Mailing Address 508 W. Ri				\$ 250.00		
City Glenolden	State PA	Zip Code (Plus 4) 19036	- 10	30	2017	
Full Name of Contributor Andy Goldberg			мо	DAY	YEAR	
Mailing Address 2322 North Seventh Street						\$ 250.00
City Harrisburg	State PA	Zip Code (Plus 4) 17110	10	30	2017	
	I	I	1	1		PAGE TOTAL

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

PAGE IUTAL

2,000.00

\$

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

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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 R				Rep	leporting Period						
PENNSYLVANIA APARTMENT ASSOC	ATION			From	n:	<u>10/24/2</u>	<u>017</u> To	: <u>11/27/2017</u>			
					DA	ATE		AM	DUNT		
Full Name of Contributor Timothy Teed					мо	DAY	YEAR				
Mailing Address 146 Woodland Rd								\$	500.00		
City Newark	State DE		p Code (Plus 9702	4)	10	30	2017				
Employer Name Vesta Wash		I I				i on p	ower w	ashing			
Employer Mailing Address/Principal Place of City Business						State		Zip Code	Zip Code (Plus 4)		
146 Woodland Rd Newark					DE		19702				
Full Name of Contributor Brook Mabardy					мо	DAY	YEAR				
Mailing Address 232 Wintercreek Dr	ive							\$	500.00		
City Bluefield	State	Zij	p Code (Plus	4)	10	30	2017				
	VA	24	605								
Employer Name Apartment List					Occupation real estate listing						
Employer Mailing Address/Principal Pl Business	ace of		City		State Zip Code (Plus 4				(Plus 4)		
232 Wintercreek Drive			Bluefield		VA 24605						
Full Name of Contributor Mike Lees					мо	DAY	YEAR				
Mailing 225 Lincoln Highwa	y							\$	500.00		
City Fairless Hills	State PA		p Code (Plus 9030	4)	10	30	2017				
Employer Name Paul Davis Restoration				Occupation property restoration			on				
Employer Mailing Address/Principal Place of City Business				State			Zip Code (Plus 4)				
225 Lincoln Highway Fairless Hills				lills	PA 19030						

Full Name of Contributor Ronni Flex	мо	DAY	YEAR					
Mailing Address POB 6870						\$ 500.00		
City Cleveland	State OH	Zip Code (Plus 4) 44101	10 30 201					
Employer Name Sherwin Willwims				Occupation paint products				
Employer Mailing Address/Principal Plac Business	e of	City	State			Zip Code (Plus 4)		
711 1st Ave		King of Prussia	PA			19406		
Enter Grand Total of Part C on Sche	dule I, Detailed S	on 3.			PAGE TOTAL			
		\$	2,000.00					

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 Candidate	2		Report	ting Perio	od				
			From:	n: To:					
				D	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·					•	•		
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
			20000				\$		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 Peri	od								
PENNSYLVANIA APARTMENT ASSOCIATION	From:	<u>10/24/2017</u> To:	<u>11/27/2017</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR										
TOTAL for the Reporting Pe	eriod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,		\$	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				
			From:			То:	
				DATE		ΑΜΟυΙ	NT
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 Schedule II, In-Kind Contributions Deta Section 2.				mary Pag	je,	PAGE T	OTAL
					4	5	0.00

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

Name of Filing Committee or Candida	lame of Filing Committee or Candidate				Reporting Period						
					Fro	om:		То:	То:		
					I		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	1		1		Occupation						
Employer Mailing Address/Principal Place of City Sta Business			State		Zip Code(Plus 4)		Description of Contribution				
Enter Grand Total of Part G on Schedule II, In-Kin Summary Page, Section 3.			Contributi	ons De	etailed PAGE				PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
PENNSYLVANIA APARTMENT ASSOCIA	TION		From	<u>10/24</u>	<u>4/2017</u>	То:	<u>11/27/2017</u>		
				DATE			AMOUNT		
To Whom Paid Citizens for a Better PA			мо	DAY	YEAR				
Mailing Address POB 33			10	25	2017	\$	25,000.00		
City Youngsville	State PA	Zip Code (Plus 4) 16371		Description of Expenditure contribution					
To Whom Paid Scarpettas restaurant	мо	DAY	YEAR						
Mailing Address Rittenhouse Square	10	25	2017	\$	2,307.04				
City Philadelphia	Zip Code (Plus 4) 19103		ser dinner			Better PA			
To Whom Paid HRCC			мо	DAY	YEAR				
Mailing Address POB 11787			11	1	2017	\$	5,000.00		
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure FUNDRAISER						
To Whom Paid Marriott Business Services			мо	DAY	YEAR				
Mailing Address POB 402642			11	2	2017	\$	7,133.37		
City Atlanta	State GA	Zip Code (Plus 4) 30384		otion of Exp on for PAC					
To Whom Paid Friends of Warren Kampf			мо	DAY	YEAR				
Mailing Address POB 1439			11	3	2017	\$	500.00		
CityPaoliStateZip Code (Plus 4)PA19301				Description of Expenditure fundraiser					

To Whom Paid Friends of Carolyn Comitta			мо	DAY	YEAR		
Mailing Address 117 W. Gay St Box 156			11	3	2017	\$	250.00
City West Chester	State PA	Zip Code (Plus 4) 19380	Description of Expenditure fundraiser				
To Whom Paid Citizens Bank			мо	DAY	YEAR		
Mailing Address pob 7000			10	31	2017	\$	3.00
City Providence	State RI	Zip Code (Plus 4) 02940	Description of Expenditure checking account service charge				
Enter Crond Total of Evnand	itures en Pass 1. De	nort Cover Dage Item D					PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	40,193.41