Campaign Finance Report

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

| Filer Identificati Number : | on 2016 | 50290 | | | | port ed B | | CANDI | DATE | | СОМ | 4ITTEE | ✓ | LOBE | YIST | |
|--|---------------------------------|-------------|------------------------|--------|----------|--------------|----------------|-------------|----------|--------|------------|--------------------|----------------|--------------|-----------|----------------|
| Name of Filing C | Committee, Candid | late or L | obbyist: | | ME | DIA I | DEMO | CRATIC | COMM | TTEE | | | | | | |
| Street Address: | | | | | | | | | | | | | | | | |
| City: | MEDIA | | | | | | | State: | PA | | | Zip Coo | le: 19 | 063-0 | 284 | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | PRE- | - | 2. | 30 DA PRIMA | | POST- 3. | | | AMENDM REPORT? | | Yes | No | ~ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE | <u>-</u> | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT? | | Yes | No | ~ |
| report type) | ANNUAL REPORT | 7. X | Year 2017 | | | | | IG METHO | | | | PAPER | | \checkmark | DISKE | ГТЕ |
| Name of Office S | Sought by Candida | rte: | | | - | | | DATE 0 | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | County Code |
| | | | | | | | | МО | DAY | YE | AR | rumber | Touc | DEM | ! | 23 |
| | | | | | | | | 11 | | 7 | 2017 | | (SEE IN | STRUCTIO | ONS FOR C | ODES) |
| | Receipts and | МО | DAY Y | 'EAR | 1 | | | МО | DAY | YE | AR | FO | R OFFIC | CE USE | ONLY | |
| Expenditures | s trom: | | 11 28 | 20 | 017 | ' T | 0 | 12 | | 31 | 2017 | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | 7 | 42.44 | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From S | Sche | dule | e I) | \$ | | | 4 | 00.00 | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 1,1 | .42.44 | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | | 13.18 | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) | | | | \$ | | | 1,1 | 29.26 | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sch | edu | le II | I) | \$ | | | | 0.00 | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | | | |
| | | | , | AFF | IDA | AVI | T SE | CTION | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign he | ere. 1 | If th | nis is | a Can | didate re | eport, o | andi | date sig | ın here. | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | e attached sche | dules | s file | ed on | paper o | or by elect | ronic m | edium | , are to t | he best o | f my knov | wledge a | and belie | ef , true |
| Sworn to and subs | cribed before me thi day of | s | 20 | | | | | | | s | ignature | of Perso | n Submitt | ting Rep | ort | |
| | Signati | ıre | | | | | - | | | | | Prin | ted Name | . | | |
| My Commission Ex | cpires | | | | | | _ | | | | | Ema | il | | | |
| | мо | D | AY | YR | | | | | Arc | ea Cod | e | Daytim | e Teleph | one Nu | nber | |
| Part II- If this is | a report of a can | didate's | authorized Co | omn | nitte | ee, C | andida | ate shall | sign he | ere. | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of ed. | my knowl | edge and belief | this | poli | itical | commi | ittee has n | ot viola | ted an | y provis | ions of the | e act of J | une 3,19 | 937 (P.L. | 1333, |
| Sworn to and subsc | ribed before me this | | | | | | | | | | s | ignature o | of Candida | ate | | |
| - | day of | | | | | | - | | | | | Printe | d Name | | | |
| | Signature | | | | | | - | | | | | | | | | |
| My Commission Exp | pires | | | | | | | | | | | Ema | 11 | | | |
| | МО | D | AY | YR | | | • | | Area | Code | | Da | ytime T | elephon | e Numbe | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | | | | | |
|--|-----------|-----------|--------------|------------|--|--|--|--|
| MEDIA DEMOCRATIC COMMITTEE | From: | 11/28/201 | <u>7</u> To: | 12/31/2017 | | | | |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 0.00 | | | | |
| 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) | | | \$ | 400.00 | | | | |
| TOTAL for the Reporting | Period | (3) | \$ | 400.00 | | | | |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | | | | | |
| TOTAL for the Reporting | J 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 | | | \$ | 400.00 | | | | |

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 | R | eporting | Period | | | |
|-------------------------------|-----------|-------------------|----------|--------|------|----|--------|
| | | F | rom: | | То | : | |
| | | · | | DATE | | | AMOUNT |
| Full Name of Contributing Com | mittee | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |

PAGE TOTAL
0.00

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

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.

| (EXCI | lude contributions ti | rom political comi | писе | ees re _l | portea | ın Part | A) | |
|--------------------------|-----------------------|--------------------|------|---------------------|--------|---------|------------|--------|
| Name of Filing Commit | ttee or Candidate | | Rep | oorting P | Period | | | |
| | | | Fro | m: | | To |) : | |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4 | 1) | | | | | |
| | | | | | | | | |

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

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 Candidate | | | Reporting | Period | | | | | |
|---------------------------------------|----------------------|---------|-------------|--------|-----|------|---------------|-----------|------|
| | | | From: | | | То: | | | |
| | | | | DA | TE | | P | AMOUNT | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | 0.00 |
| Mailing Address | | | | | | | - \$ | | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | | |
| | | | | | | | | PAGE TOTA | AL |
| Enter Grand Total of Part C on Sche | dule I, Detailed Sun | nmary P | 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.)

| Name of Filing Committee or Candidate | | | | Repo | orting Pe | riod | | | |
|--|----------------------|------|-------------|--------|-----------|------------|----------------|------------|---------------|
| MEDIA DEMOCRATIC COMMITTEE | | | | Fron | n: | 11/28/2 | 017 T o | o : | 12/31/2017 |
| | | | | | D/ | ATE | | | AMOUNT |
| Full Name of Contributor | | | | | МО | DAY | YEAR | \$ | 400.00 |
| Brian Hall | | | | | | | | * | 400.00 |
| Mailing Address | | | | | 12 | 1 | 2017 | , | |
| City Media | State | Zip | Code (Plus | 4) | 12 | 1 | 2017 | | |
| | PA | 190 | 063 | | | | | | |
| Employer Name Eisenberg & Rothwei | er | | | | Occupat | ion | Laywer | | |
| Employer Mailing Address/Principal Pla | ce of Business | | City | | | State | | Zip | Code (Plus 4) |
| | | | Philadelphi | a | | PA | | 191 | 103 |
| Enter Grand Total of Part C on Sche | edule I. Detailed Si | umma | arv Page. S | Sectio | on 3. | | | | PAGE TOTAL |
| | 1, Detailed 50 | • | ary rage, | | 0. | | | \$ | 400.00 |

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 Candidate | | Report | ing Peri | od | | | |
|----------------------------|---------------------------|-------------------|--------|----------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | • | | D | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | 7 | |
| City | State | Zip Code (Plu | ıs 4) | | | | | |
| Receipt Description | <u>'</u> | <u>'</u> | | | • | | | |
| Futor Curred Total of Bout | For Cabadula I Batailad | I Comment Page Co | | 4 | | | | PAGE TOTAL |
| Enter Grand Total of Part | E on Schedule 1, Detailed | Summary Page, Se | ection | 4. | | | \$ | 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 Per | iod | | | | | | | |
|--|---------------|------------------------------|------------|--|--|--|--|--|--|
| MEDIA DEMOCRATIC COMMITTEE | From: | <u>11/28/2017</u> To: | 12/31/2017 | | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | | | | | | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 | | | | | | |
| . 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 Candi | idate | | Reportin | | | | |
|-----------------------------------|--------------------|------------------------|----------|----------|------|-------------|------------|
| | | | From: | | | To: | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | 7 \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| Description of Contribution: | • | | • | • | • | | |
| | | | | | | | |
| Enter Grand Total of Part F on | Schedule II, In-Ki | nd Contributions Detai | led Sum | mary Pag | ge, | | PAGE TOTAL |
| Section 2. | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Re | porting | Period | | | | |
|--|----------------|-----|------------------|--------|---------|----------------|-------|------|-----------------|------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | DATE | | | AMOUN | т |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | 1 | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | | |
| Employer of Contributor | | | | | Occup | oation | | | | |
| Employer Mailing Address/Principal Pla | ce of Business | Cit | ty | Stat | e Zi | p Code(Plus 4) | Descr | ipti | ion of Contribu | tion |
| Enter Grand Total of Part G on Sch | edule II, In-K | ind | Contributions D | etaile | ed | | | | PAGE T | OTAL |
| Summary Page, Section 3. | | | | | | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting | | | |
|---------------------------------------|-----------|------------|-----|------------|
| MEDIA DEMOCRATIC COMMITTEE | From | 11/28/2017 | То: | 12/31/2017 |
| | | DATE | | AMOUNT |

| | | | | DATE | | | AMOUNT | |
|--|-------|-------------------|---------|-------------|----------|----|--------|--|
| To Whom Paid | | | мо | DAY | YEAR | | | |
| James A. Ziegelhoffer | | | М | | ILAK | | | |
| Mailing Address | | | 12 | 28 | 2017 | \$ | 13.18 | |
| City Media | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | PA | 19063 | Postage | for Certifi | ed Mail | | | |
| | | | | | | | | |
| nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | | 13.18 | |