

Campaign Finance Report

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

Filer Identification Number :		20170364		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: COLLETT, MARIA												
Street Address:												
City: SPRING HOUSE						State: PA		Zip Code: 19477				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2017	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	DEM			
						11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	28	2017		12	31	2017				
A. Amount Brought Forward From Last Report						\$ 0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 10,613.96						
C. Total Funds Available (Sum Of Lines A and B)						\$ 10,613.96						
D. Total Expenditures (From Schedule III)						\$ 65.00						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 10,548.96						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 564.54						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
COLLETT, MARIA	From: <u>11/28/2017</u> To: <u>12/31/2017</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 565.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 198.96
All Other Contributions (Part B)	\$ 850.00
TOTAL for the Reporting Period (2)	\$ 1,048.96

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)	\$ 9,000.00
TOTAL for the Reporting Period (3)	\$ 9,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 10,613.96
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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 COLLETT, MARIA	Reporting Period From: <u>11/28/2017</u> To: <u>12/31/2017</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee FRIENDS OF LG FORWARD			MO	DAY	YEAR	\$ 198.96
Mailing Address			12	27	2017	
City SPRING HOUSE	State PA	Zip Code (Plus 4) 19477				

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

PAGE TOTAL
\$ 198.96

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 Candidate	Reporting Period
COLLETT, MARIA	From: <u>11/28/2017</u> To: <u>12/31/2017</u>

				DATE			AMOUNT
Full Name of Contributor MICHAEL PIRONTI				MO 12	DAY 11	YEAR 2017	\$ 100.00
Mailing Address							
City	AMBLER	State PA	Zip Code (Plus 4) 19002				
Full Name of Contributor ELLEN TOPLIN				MO 12	DAY 11	YEAR 2017	\$ 100.00
Mailing Address							
City	DRESHER	State PA	Zip Code (Plus 4) 19025				
Full Name of Contributor DEBRA SCHAEFFER				MO 12	DAY 12	YEAR 2017	\$ 100.00
Mailing Address							
City	AMBLER	State PA	Zip Code (Plus 4) 19002				
Full Name of Contributor LESLEY KATZ				MO 12	DAY 13	YEAR 2017	\$ 100.00
Mailing Address							
City	AMBLER	State PA	Zip Code (Plus 4) 19002				
Full Name of Contributor HARRY HELLERMAN				MO 12	DAY 19	YEAR 2017	\$ 100.00
Mailing Address							
City	AMBLER	State PA	Zip Code (Plus 4) 19002				
Full Name of Contributor SHELLY WALDMAN				MO 12	DAY 20	YEAR 2017	\$ 100.00
Mailing Address							
City	BLUE BELL	State PA	Zip Code (Plus 4) 19422				
Full Name of Contributor SUZANNE PARKER				MO 12	DAY 25	YEAR 2017	\$ 150.00
Mailing Address							
City	PHOENIX	State AZ	Zip Code (Plus 4) 85024				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
EILEEN STEPHENSON							
Mailing Address				12	27	2017	
City	BLUE BELL	State	Zip Code (Plus 4)				
		PA	19422				

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

PAGE TOTAL
\$ 850.00

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 Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 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 COLLETT, MARIA	Reporting Period From: <u>11/28/2017</u> To: <u>12/31/2017</u>
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				DATE	AMOUNT		
Full Name of Contributor EMMANUEL TZANAKIS				MO	DAY	YEAR	\$ 5,000.00
Mailing Address City AMBLER State PA Zip Code (Plus 4) 19002				11	21	2017	
Employer Name RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business				City		State	Zip Code (Plus 4)
Full Name of Contributor MARIA COLLETT				MO	DAY	YEAR	\$ 1,000.00
Mailing Address City AMBLER State PA Zip Code (Plus 4) 19002				11	21	2017	
Employer Name AETNA				Occupation NURSE EDUCATOR			
Employer Mailing Address/Principal Place of Business				City BLUE BELL		State PA	Zip Code (Plus 4) 19422
Full Name of Contributor TIFFANY HODGSON				MO	DAY	YEAR	\$ 500.00
Mailing Address City AMBLER State PA Zip Code (Plus 4) 19002				12	11	2017	
Employer Name SELF-EMPLOYED				Occupation CONSULTANT			
Employer Mailing Address/Principal Place of Business				City AMBLER		State PA	Zip Code (Plus 4) 19002
Full Name of Contributor JON CRAWFORD				MO	DAY	YEAR	\$ 2,500.00
Mailing Address City WYNNEWOOD State PA Zip Code (Plus 4) 19096				12	12	2017	
Employer Name CONRAD O'BRIEN				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business				City PHILADELPHIA		State PA	Zip Code (Plus 4) 19102

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 9,000.00

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	Reporting Period From: To:
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
COLLETT, MARIA		From: <u>11/28/2017</u> To: <u>12/31/2017</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 64.40
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 187.64
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 312.50
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 564.54

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate COLLETT, MARIA	Reporting Period From: <u>11/28/2017</u> To: <u>12/31/2017</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 121.64
BEVERLY HAHN							
Mailing Address							
City BLUE BELL	State	Zip Code (Plus 4)		12	21	2017	
	PA	19422					
Description of Contribution: BUSINESS CARDS							
Full Name of Contributor				MO	DAY	YEAR	\$ 66.00
TIFFANY HODGSON							
Mailing Address							
City AMBLER	State	Zip Code (Plus 4)		11	14	2017	
	PA	19002					
Description of Contribution: SECURING PO BOX FOR PAC USE							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 187.64

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

Name of Filing Committee or Candidate COLLETT, MARIA	Reporting Period From: <u>11/28/2017</u> To: <u>12/31/2017</u>
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				DATE	AMOUNT		
Full Name of Contributor LIGAND COMMUNICATIONS & RESEARCH LLC				MO	DAY	YEAR	\$ 312.50
Mailing Address				12	20	2017	
City AMBLER	State PA	Zip Code(Plus 4) 19002					
Employer of Contributor SELF				Occupation CONSULTANT			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution BUSINESS CARD DESIGN	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 312.50	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COLLETT, MARIA	From <u>11/28/2017</u> To: <u>12/31/2017</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
FACEBOOK				
Mailing Address	12	26	2017	\$ 25.00
City MENLO PARK	State CA	Zip Code (Plus 4) 94025	Description of Expenditure BOOST SOCIAL MEDIA AD	
To Whom Paid	MO	DAY	YEAR	
FACEBOOK				
Mailing Address	12	28	2017	\$ 40.00
City MENLO PARK	State CA	Zip Code (Plus 4) 94025	Description of Expenditure BOOST SOCIAL MEDIA AD	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 65.00

