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 2012	0190			Repor Filed	-	CANDI	DATE	COM	IMITTEE	✓	LOB	BYIST	
	Committee, Candid	ate or L	obbyist:			-	L		OF]
Street Address:	PO BOX 467													
City:	GLENSIDE						State:	PA		Zip Co	de: 19	038		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D/ PRIM		POST-	3.	AMENDI REPORT		Yes	√ Nc)
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	- 5.	30 D/ ELEC		POST-	6.	TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7. X	Year 2017	,			NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number		Pa	rty Code	County Code
							мо	DAY	YEAR			DEI	м	46
							11		7 201	2	(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:		10 24	1 2	017 1	0	12	3	1 201	7				
A. Amount Bro	ought Forward Fror	n Last R	eport			\$			69,404.7	5				
B. Total Monet	ary Contributions	And Rec	eipts (Fror	n Sche	dule I)	\$			2,205.0	D				
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			71,609.7	5				
D. Total Expen	ditures (From Sch	edule II	I)			\$			14.80)				
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)		\$			71,594.96	5				
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	Schedu	le II)	\$			0.00)				
G. Unpaid Deb	ts And Obligations	(From S	Schedule I	V)		\$			0.00)				
				AFF	IDAV	IT SE	CTION							
	s a Committee rep	•	-					• •		-				
I swear (or affirm correct and compl) that this report, incl lete.	luding the	e attached so	chedules	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this day of	5	20						Signatu	re of Perso	on Submitt	ing Re	port	
		re				_				Prii	nted Name			
My Commission E	-					_				Ema	ail			
	мо	D	AY	YR				Are	a Code	Daytir	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	l Comn	nittee, G	Candid	ate shall	sign he	re.					
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and bel	lief this	political	comm	ittee has n	ot violat	ed any prov	isions of th	ne act of Ju	ine 3,1	937 (P.I	. 1333,
Sworn to and subse	cribed before me this day of		20							Signature	of Candida	ite		
						-				Print	ed Name			
My Commission Ex	Signature pires					_				Ema	ail			
	мо	D	AY	YR		-		Area C	Code		Daytime Te	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MCCARTER, STEVE FRIENDS OF From: <u>10/24/2017</u> **To:** <u>12/31/2017</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 530.00 \$ **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)** 1,175.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 1,175.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 500.00 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 \$ 2,205.00 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			Re	porting I				
			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

\$

Use this Part to ite	emize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s with orting	ı an peri	aggrega iod.			rom
Name of Filing Committee or Candidat	e		Reporti	ing Pe	eriod			
MCCARTER, STEVE FRIENDS OF			From:		<u>12/31/2017</u>			
					DATE		-	AMOUNT
Full Name of Contributor Herbert Bass			м	10	DAY	YEAR		
Mailing Address 8302 Old York Rd C	63						\$	100.00
City ELKINS PARK	State	Zip Code (Plus 4)		12	6	2017		
· LLNING FARK	РА	19027						
Full Name of Contributor Stanley Ellenberg					DAY	YEAR		
Mailing Address 1711 Ashbourne Ro	1						\$	200.00
City Elkins Park	State PA	Zip Code (Plus 4) 19027		11	3	2017		
Full Name of Contributor Susan Hanna		·	м	10	DAY	YEAR		
Mailing Address 472 Store Rd							\$	100.00
City Harleysville	State	Zip Code (Plus 4)		11	8	2017		
	PA	19438						
Full Name of Contributor Ann Delcarlino			м	10	DAY	YEAR		
Mailing Address 143 Lismore							\$	100.00
CityGlensideStateZip Code (Plus 4)PA19038					26	2017		
Full Name of Contributor Burton Eisenberg					DAY	YEAR		
Mailing Address Ten South Ave							\$	75.00
City Wyncote	State PA	Zip Code (Plus 4) 19095		10	24	2017		

Full Name of Contributor Marie Baldovsky	larie Baldovsky				YEAR	
Mailing Address 559 Cream	nery Rd					\$ 100.00
State Zip Code (Plus 4) PA 18969				24	2017	
Full Name of Contributor Pradyumna Chauhan			мо	DAY	YEAR	
Mailing Address 240 Berkely Rd						\$ 250.00
City Glenside	State PA	Zip Code (Plus 4) 19038	10	24	2017	
Full Name of Contributor Joseph Bagley			мо	DAY	YEAR	
Mailing Address 890 Wood	ed Pond					\$ 250.00
City Ambler	State PA	Zip Code (Plus 4) 19002	10	24	2017	
						PAGE TOTAL

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

1,175.00

\$

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

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	
MCCARTER, STEVE FRIENDS OF	From	1:	<u>10/24/2017</u> То:	<u>12/31/2017</u>
		DA	ATE	AMOUNT
Full Name of Contributor				

Susan Jewett	1		мо	DAY	YEAR		
Mailing 530 K Address	athmere Rd					\$	500.00
City Havertown		Zip Code (Plus 4) 19083	11	8	2017		
Employer Name Retire	ed .		Occupat	ion R	Retired		
Employer Mailing Addres Business	ss/Principal Place of	City		State		Zip Code (Plu	s 4)
530 Kathmere Rd		Havertown		PA		19083	
Enter Grand Total of I	Part C on Schedule I, Detailed Sum	mary Page, Sectio	on 3.		Γ	PAGE T	OTAL
		, 3-,				\$	500.00

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 Candid	ate		Report	ting Perio	od				
			From:			То:			
				D	ATE			AMOUNT	r
Full Name				мо	DAY	YEAR			
Mailing Address							4	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description		·				•	•		
Enter Grand Total of Part E on Sch	edule T. Detailer	d Summary 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 Perio	d	
MCCARTER, STEVE FRIENDS OF	From:	<u>10/24/2017</u> то:	<u>12/31/2017</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					
			From:			То:		
				DATE		АМО	UNT	
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	6	0.00	

PAGE 11

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

Name of Filing Committee or Candidate			Reporting Period					
			Fror	n:		То:		
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code(Plus 4)						

Employer of Contributor										
Employer Mailing Address/Principal Plac Business	e of City		State	Zip Code(Plus 4) Description of Contribut						
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
MCCARTER, STEVE FRIENDS OF			From	From <u>10/24/2017</u>			<u>12/31/2017</u>
				DATE		AMOUNT	
To Whom Paid Pay Pal			мо	DAY	YEAR		
Mailing Address 2211 North First Street			11	8	2017	\$	14.80
City San Jose	State CA	Zip Code (Plus 4) 95131	Description of Expenditure Fee for contributions				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	14.80