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 2000)190			Repor Filed I		CAI	NDI	DATE		COM	AITTEE	Y	LOB	БІІЗІ		
Name of Filing C	Committee, Candid	late or L	obbyist:	,	AFT-PE	NNSY	LVANI	ΙA					·				
Street Address:																	
City:	PLYMOUTH M	EETING					State	e:	PA			Zip Co	de: 19	9462			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 DA		P	POST-	3.		AMENDN REPORT		Yes		0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		P	POST-	6.		TERMINA REPORT		Yes	N	0	/
report type)	ANNUAL REPORT	7.	Year 2018				NG ME					PAPER		\	DISK	ETTE	
Name of Office S	Sought by Candida	ite:			•		DAT	ΕO	F ELEC	СТІО	N	District Number	Office Code	Pa	rty Cod	Code	
							МО		DAY	YE	EAR		•	•			
								11		6	2018		(SEE IN	ISTRUCT	IONS FOR	CODES	5)
	Receipts and	МО	DAY	YEAR			МО		DAY	ΥI	EAR	FC	R OFFI	CE US	E ONLY	•	
Expenditures	s from:		3 27	20)18 T	0		4	3	30	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$				11,5	576.49						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule I)	\$				1,3	375.50						
C. Total Funds	Available (Sum O	f Lines A	and B)			\$				12,9	951.99						
D. Total Expend	ditures (From Sch	edule II	1)			\$				1,8	300.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$				11,1	51.99						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	e II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From	Schedule IV	')		\$					0.00						
				AFF:	IDAVI	T SE	CTIC	NC									
	s a Committee rep	-	_						-		_		f my kno	wledge	and be	lief , tr	ue
correct and comple	ete.															,	
Sworn to and subs	cribed before me thi day of	s 	20			_				S	Signature	of Perso	n Submit	ting Re	port		
	Signatu	ıre				_						Prin	ted Nam	e			
My Commission Ex	cpires					_						Ema	il				
	МО	D	AY	YR					Are	a Cod	le	Daytin	ne Telepi	hone N	umber		ᆜ
	a report of a can				•												
No 320) as amende		•	edge and beli	ef this	political	comm	ittee h	as n	ot violat	ed an	y provis	ions of th	e act of J	une 3,1	L937 (P	L. 133	3,
Sworn to and subsc	ribed before me this day of		20								s	ignature	of Candid	late			_
						_						Printe	ed Name				- $ $
My Commission Exp	Signature pires					_		,				Ema	il				-
	мо	D	AY	YR		-			Area	Code		D	aytime T	elepho	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	-			
Name of Filing Committee or Candidate	Reporting	J Period		
AFT-PENNSYLVANIA	From:	3/27/201	. <u>8</u> To:	4/30/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	1,375.50
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 Page			\$	1,375.50

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	1	Reporting	Period			
			From:		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.

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		Rep	oorting P	eriod			
			Fro	m:		To):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
								PAGE TOTAL

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		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary 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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE 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 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 Perio	d	
AFT-PENNSYLVANIA	From:	3/27/2018 To:	<u>4/30/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
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,		\$	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	g Period			
			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				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
AFT-PENNSYLVANIA	From	3/27/2018	То:	4/30/2018		
		DATE		AMOUNT		
To Whom Boild						

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Tina Davis for Senate			1-10				
Mailing Address			3	29	2018	\$	500.00
City Croydon	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19021	Contrib	ution			
To Whom Paid			мо	DAY	YEAR		
Chris Rabb for State Represe	ntative		MO	DAI	ILAK		
Mailing Address			3	29	2018	\$	300.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19102	Contrib	ution			
To Whom Paid			МО	DAY	YEAR		
Friends of Mike Carroll			MO	DAT	TEAR		
Mailing Address			3	29	2018	\$	1,000.00
City Avoca	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18641	Contrib	ution			
							PAGE TOTAL
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D).			\$	1,800.00