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 200 | 0190 | | | Rep File | | | CANDI | DATE | | СОМ | 4ITTEE | ✓ | LOB | BYIST | | | | |
|---|--------------------------------|-------------|------------------------|---------|-------------|-------------|----------------|-------------|----------|--------|------------|---|----------------------------|----------|-----------|----------|------------|--|--|
| Name of Filing C | Committee, Candi | idate or L | obbyist: | | AFT- | PEN | NSYL | -VANIA | | | | | | | | | | | |
| Street Address: | 3031 WALTO | ON RD, B | UILDING A, | STE | 340 | | | | | | | | | | | | | | |
| City: | PLYMOUTH I | MEETING | | | | | | State: | PA | | | Zip Cod | Zip Code: 19462 | | | | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | Y PRE | - 2 | 2. X | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT? | | Yes | No | • | / | | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | y pre | - 5 | 5. | 30 DA | | POST- | 6. | | | TERMINATION Yes REPORT? | | | | | | |
| report type) | ANNUAL REPOR | T 7. | Year 2018 | | | | | NG METHO | | | | PAPER | | V | DISKE | TTE | | | |
| Name of Office S | Sought by Candid | ate: | • | | | | | DATE O | F ELE | CTIO | N | District Number | Office Code | ty Code | Coun | | | | |
| | , cag 2, caa | | | | | | | МО | DAY | YE | AR | Number | Code | | code | | | | |
| | | | | | | | | 11 | | 6 | 2018 | | (SEE IN | ISTRUCTI | ONS FOR (| CODES) | 1 | | |
| | Receipts and | МО | DAY | YEAR | | | | МО | DAY | YE | AR | FO | R OFFI | CE USE | ONLY | | | | |
| Expenditures | irom: | | 3 27 | 2 | 018 | Т | <u> </u> | 4 | : | 30 | 2018 | | | | | | | | |
| A. Amount Bro | ught Forward Fro | om Last R | eport | | | | \$ | - | | 11,5 | 76.49 | | | | | | | | |
| B. Total Monet | ary Contributions | s And Rec | eipts (From | Sche | dule | I) | \$ | | | 1,3 | 375.50 | | | | | | | | |
| C. Total Funds | Available (Sum (| Of Lines A | and B) | | | | \$ | | | 12,9 | 951.99 | | | | | | | | |
| D. Total Expen | ditures (From Sc | hedule II | I) | | | | \$ | | | 1,8 | 800.00 | | | | | | | | |
| E. Ending Cash | Balance (Subtra | ct Line D | From Line (| C) | | | \$ | | | 11,1 | 51.99 | | | | | | | | |
| F. Value Of In- | Kind Contributio | ns Receiv | ed (From So | chedu | le II) |) | \$ | | | | 0.00 | | | | | | | | |
| G. Unpaid Debt | s And Obligation | s (From S | Schedule IV |) | | | \$ | | | | 0.00 | | | • | | | | | |
| | | | | AFF | IDA | VI | ΓSE | CTION | | | | | | | | | | | |
| PART I - If this is | s a Committee re | port, trea | surer sign l | here. I | [f thi | s is | a Car | ndidate re | eport, o | candi | date sig | ın here. | | | | | | | |
| I swear (or affirm) correct and comple |) that this report, in ete. | cluding the | e attached sch | nedules | filed | on | paper | or by elect | ronic m | edium | , are to t | the best o | f my kno | wledge | and beli | ef , tru | 1 e | | |
| Sworn to and subs | cribed before me the | nis | 20 | | | | | | | S | ignature | of Perso | n Submit | ting Re | oort | | | | |
| | Signat | | | | | | - - | | | | | Prin | ted Name | e | | | - | | |
| My Commission Ex | _ | uie | | | | | | | | | | Ema | il | | | | - | | |
| | мо | D | AY | YR | | | - | | Are | ea Cod | le | Daytim | e Telepi | none Nu | mber | | _ | | |
| Part II- If this is | a report of a ca | ndidate's | authorized | Comn | nittee | e, Ca | andid | ate shall | sign h | ere. | | | | | | | | | |
| I swear (or affirm) No 320) as amende | | my knowl | edge and beli | ef this | politi | ical | comm | ittee has n | ot viola | ted an | y provisi | sions of the act of June 3,1937 (P.L. 1333, | | | | | | | |
| Sworn to and subso | ribed before me thi | s | | | | | | | | | Si | Signature of Candidate | | | | | | | |
| | day of | | _ 20 | | | | _ | | | | | Signature of Candidate | | | | | | | |
| | Cianata | | | | | | - | | | | | Printe | d Name | | | | | | |
| My Commission Exp | Signature ires | = | | | | | | | | | | Ema | il | | | | - | | |
| | мо | D | AY | YR | | | • | | Area | Code | | Da | aytime T | elephor | ne Numb | er | - | | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|-----------------|---------------|-----------|
| AFT-PENNSYLVANIA | From: | <u>3/27/201</u> | <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 Pa | | | \$ | 1,375.50 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | this Part to itemize only with an aggregate valu | | | | | | | |
|-------------------------|--|------------------|-----|---------|--------|------|---------------|------------|
| Name of Filing Comm | nittee or Candidate | | Re | porting | Period | | | |
| | | | Fre | om: | | То | : | |
| | | <u> </u> | | | DATE | | | AMOUNT |
| Full Name of Contributi | ing Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4 |) | | | | | |
| | • | · | | | • | • | $\overline{}$ | DACE TOTAL |

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

PAGE TOTAL\$ 0.00

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 Fining Committee of Candidate | | | | Reporting Period From: To: | | | | |
|---------------------------------------|-------|-------------------|---|----------------------------|------|------|----|--------|
| | | | l | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |

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

PAGE TOTAL \$0.00

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 | date | | Reporting | Period | | | | |
|-----------------------------------|--------------------|---------------|-------------|--------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | Α | MOUNT |
| Full Name of Contributing Commit | tee | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on S | Schedule I, Detail | ed Summary 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 | | | | |
|--|---------------|-----------|--------------|---------|-----------|-------|------|---------|-----------------------|---|
| | | | | Froi | m: | | То |): | | |
| | | | | | D | ATE | | AN | MOUNT | |
| Full Name of Contributor | | | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | | \$ | 0.00 |) |
| City | State | Zi | p Code (Plus | 5 4) | | | | | | |
| Employer Name | • | • | | | Occupa | tion | • | • | | |
| Employer Mailing Address/Principal Pla Business | ce of | | City | | • | State | | Zip Cod | e (Plus 4) | |
| Enter Grand Total of Part C on Scho | edule I, Deta | iled Sumr | mary Page, | Section | on 3. | | | P/ | AGE 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 Co | andidate | | Report | ting Perio | bd | | | |
|--------------------------------|-----------------------|------------------|---------|------------|-----|------|----|----------|
| | | | From: | | | То: | | |
| | | | | D | ATE | | AM | 10UNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | • | | | | | | |
| Enter Grand Total of Part E or | Schedule T. Detailer | d Summary Page | Section | 4 | | | PA | GE TOTAL |
| Lines Grana Fotal of Fair 2 of | r benedule 1/ betanet | z Sammary r age, | Section | • | | | \$ | 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: | 4/30/2018 |
| 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 Candidat | :e | | Reporting | g Period | | | |
|--------------------------------------|--------------------|-----------------------|-------------|-------------|-------|-----------|------------|
| | | | From: | | | То: | |
| | | | | DATE | | | AMOUNT |
| 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 Sch | andula II. In-Kir | nd Contributions Data | ilad Sum | mary Pag | | | DACE TOTAL |
| Section 2. | iedule II, III-KII | ia contributions Deta | iiieu Suiii | iliai y Pag | , je, | | PAGE TOTAL |
| | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidat | e | | | | Re | porting P | Period | | | |
|---|--------------|---------|------------|---------|--------|-----------|-----------|--------|-------|------------------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(F | Plus 4) | | | | | | |
| Employer of Contributor | • | | • | | | Occupa | tion | | | |
| Employer Mailing Address/Principal Pla Business | ace of | City | | State | | Zip 4) | Code(Plus | Descri | ption | of Contribution |
| Enter Grand Total of Part G on Sc Summary Page, Section 3. | hedule II, i | In-Kind | Contributi | ons De | etaile | ed | | | | PAGE TOTAL 0.00 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or C | andidate | | Reporti | ng Period | | | |
|---|-----------------------|-----------------------------------|---------------------------|--------------------|-----------|-----|------------|
| AFT-PENNSYLVANIA | | | From | <u>3/2</u> | 7/2018 | То: | 4/30/2018 |
| | | | | DATE | | | AMOUNT |
| To Whom Paid Tina Davis for Senate | | | мо | DAY | YEAR | | |
| Mailing Address PO Box 233 | 3 | | 3 | 29 | 2018 | \$ | 500.00 |
| City Croydon | State PA | Zip Code (Plus 4) 19021 | Descrip Contrib | otion of Expoution | penditure | | |
| To Whom Paid Chris Rabb for State Represent | tative | | МО | DAY | YEAR | | |
| Mailing Address PO Box 592 | 202 | | 3 | 29 | 2018 | \$ | 300.00 |
| City Philadelphia | State PA | Zip Code (Plus 4) 19102 | Descrip Contrib | otion of Expoution | penditure | | |
| To Whom Paid Friends of Mike Carroll | · | | мо | DAY | YEAR | | |
| Mailing Address 401 Park D | rive | | 3 | 29 | 2018 | \$ | 1,000.00 |
| City Avoca State Zip Code (Plus 4) PA 18641 | | | Descrip Contrib | otion of Expoution | penditure | | |
| Enter Grand Total of Expend | ditures on Page 1. Re | eport Cover Page, Item [|). | | | | PAGE TOTAL |
| | | | | | | ی ا | 1 000 00 |

1,800.00