

# 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 : 20170264		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: RAY SOSA FOR A BETTER PA										
Street Address: P.O. BOX 213										
City: WYNCOTE				State: PA		Zip Code: 19095				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	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.	Year 2018	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	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:	MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
	3	27	2018		4	30	2018			
A. Amount Brought Forward From Last Report				\$ (2,436.51)						
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 350.00						
C. Total Funds Available (Sum Of Lines A and B)				\$ (2,086.51)						
D. Total Expenditures (From Schedule III)				\$ 1,104.82						
E. Ending Cash Balance (Subtract Line D From Line C)				\$ (3,190.82)						
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 2,144.82						

## 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
RAY SOSA FOR A BETTER PA	From: <u>3/27/2018</u> To: <u>4/30/2018</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 350.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 350.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 350.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	0.00

## 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
RAY SOSA FOR A BETTER PA	From: <u>3/27/2018</u> To: <u>4/30/2018</u>

DATE	AMOUNT
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Full Name of Contributor MR. CHRISTOPHER HALL			MO	DAY	YEAR	\$ 100.00
Mailing Address PA			4	25	2018	
City	State	Zip Code (Plus 4)				

Full Name of Contributor MS. SUSAN WATCHEI			MO	DAY	YEAR	\$ 100.00
Mailing Address PA			4	22	2018	
City	State	Zip Code (Plus 4)				

<b>Full Name of Contributor</b> MS. JULIE MERVINE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 9100 HEACOCK LANE				4	15	2018	
<b>City</b> WYNCOTE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19095					

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

<b>PAGE TOTAL</b>
\$ 350.00

## 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.

<b>PAGE TOTAL</b>
\$ 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	Reporting Period
	From: <span style="float: right;">To:</span>

			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 0.00

## 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:

			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.**

<b>PAGE TOTAL</b>	
\$	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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
RAY SOSA FOR A BETTER PA		From: <u>3/27/2018</u> To: <u>4/30/2018</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
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.)		\$	0.00



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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <div style="display: flex; justify-content: space-between;"><span><b>From:</b></span><span><b>To:</b></span></div>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
RAY SOSA FOR A BETTER PA	From <u>3/27/2018</u> To: <u>4/30/2018</u>

DATE				AMOUNT		
To Whom Paid CHELTENHAM PRINTING			MO	DAY	YEAR	\$ 608.44
Mailing Address 518 RYERS AVENUE BUILDING 2, FIRST FLOOR			4	13	2018	
City CHELTENHAM	State PA	Zip Code (Plus 4) 19012	Description of Expenditure PRINTING			
To Whom Paid SUNOCO GAS			MO	DAY	YEAR	\$ 52.34
Mailing Address 328 INDUSTRIAL PARK			4	27	2018	
City SOMERSET	State PA	Zip Code (Plus 4)	Description of Expenditure GAS			
To Whom Paid NANCYS EAST END DINNER			MO	DAY	YEAR	\$ 44.73
Mailing Address 616 SOUTH AVENUE			4	27	2018	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15221	Description of Expenditure MEALS/FOOD			
To Whom Paid USPS			MO	DAY	YEAR	\$ 7.25
Mailing Address 207 GLENSIDE AV			4	26	2018	
City WYNCOTE	State PA	Zip Code (Plus 4) 19095	Description of Expenditure MAIL			
To Whom Paid SPEEDWAY			MO	DAY	YEAR	\$ 47.89
Mailing Address			4	26	2018	
City SWATARA	State PA	Zip Code (Plus 4) 17111	Description of Expenditure GAS			

To Whom Paid SPEEDWAY			MO	DAY	YEAR	\$ 48.19
Mailing Address			4	28	2018	
City HARRISBURG	State PA	Zip Code (Plus 4)	Description of Expenditure GAS			

To Whom Paid CRACKER BARRELL			MO	DAY	YEAR	\$ 35.01
Mailing Address			4	18	2018	
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4)	Description of Expenditure MEALS/FOOD			

To Whom Paid WAWA GAS			MO	DAY	YEAR	\$ 60.00
Mailing Address			4	1	2018	
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure GAS			

To Whom Paid WAWA GAS			MO	DAY	YEAR	\$ 60.38
Mailing Address			4	23	2018	
City JENKINTOWN	State PA	Zip Code (Plus 4)	Description of Expenditure GAS			

To Whom Paid USPS			MO	DAY	YEAR	\$ 8.80
Mailing Address 207 GLENSIDE AVENUE			4	23	2018	
City WYNCOTE	State PA	Zip Code (Plus 4) 19095	Description of Expenditure MAILING			

To Whom Paid CAMPBELLS PLACE			MO	DAY	YEAR	\$ 55.70
Mailing Address 8337 GERMANTOWN AVENUE			4	8	2018	
City CHESTNUT HILL	State PA	Zip Code (Plus 4) 19118	Description of Expenditure MEALS/FOOD			

<b>To Whom Paid</b> STARBUCKS ALLENTOWN TRAVEL PLAZA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	8	2018	
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> MEALS/FOOD			
<b>To Whom Paid</b> SPEEDWAY GAS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	8	2018	
<b>City</b> GLENSIDE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19038	<b>Description of Expenditure</b> GAS			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 1,104.82

## SCHEDULE IV

**STATEMENT OF UNPAID DEBTS**

Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period

<b>Name of Filing Committee or Candidate</b> RAY SOSA FOR A BETTER PA				<b>Reporting Period</b> From: <u>3/27/2018</u> To: <u>4/30/2018</u>			
							<b>Outstanding Balance of Debt</b>
				<b>DATE</b>			
<b>Name of Creditor</b> RAYMOND SOSA				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8123 HEACOCK LANE				4	1	2018	\$ 1,104.82
<b>City</b> WYNCOTE	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19095		<b>Description of Debt</b> CASH		
							<b>Outstanding Balance of Debt</b>
				<b>DATE</b>			
<b>Name of Creditor</b> NICOLE SOSA				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8123 HEACOCK LANE				4	1	2018	\$ 1,040.00
<b>City</b> WYNCOTE	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19095		<b>Description of Debt</b> CASH		
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>							<b>PAGE TOTAL</b> \$ 2,144.82