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 2017 | 70269 | | | Repo Filed | | : | CAN | ADI | DATE | | COM | AITTEE | V | LOBE | 1131 | |
|--------------------------------|--------------------------------|-----------|-----------------------|----------|---------------|--------|--------------------------------|----------|------|----------|-------------|----------|--------------------|----------------|---------------|-----------|----------------|
| Name of Filing C | ommittee, Candid | late or L | obbyist: | , | Cozzo | ne fo | or P | A (Lt | Go | v) | | | | | | | |
| Street Address: | | | | | | | | | | | | | | | | | |
| City: | Exton | | | | | | | State | : | PA | | | Zip Co | de: 19 | 9341 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE- | - 2. | | DA RIMA | | P | POST- | 3. X | | AMENDN REPORT | | Yes | No | ~ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | - 5. | | DA ECT | Y ION | P | POST- | 6. | | TERMIN. REPORT | | Yes | No | \ |
| report type) | ANNUAL REPORT | 7. | Year 2018 | | | | FILING METHOD () CHECK ONE | | | | | | PAPER | | $\overline{}$ | DISKE | ГТЕ |
| Name of Office S | - Sought by Candida | ite: | | | | | | DATE | E O | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | County Code |
| LIEUTENANT G | OVEDNOD | | | | | | | МО | | DAY | YE | AR | -1 | LTG | DEM | | 15 |
| LILOTLINAINT G | OVERNOR | | | | | | | | 11 | | 6 | 2018 | | (SEE IN | STRUCTIO | ONS FOR C | ODES) |
| | Receipts and | МО | DAY | YEAR | | | | МО | | DAY | ΥI | EAR | FC | OR OFFI | CE USE | ONLY | |
| Expenditures | from: | | 5 1 | 20 | 018 | то | | | 6 | | 4 | 2018 | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | | 29,3 | 304.19 | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (Fron | n Sche | dule I | :) | \$ | | | | 4,4 | 150.00 | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | | 33,7 | 754.19 | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | | 30,7 | '88.00 | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line | C) | | | \$ | | | | 2,9 | 66.19 | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From S | chedul | le II) | | \$ | | | | | 0.00 | | | | | |
| G. Unpaid Debt | s And Obligations | (From | Schedule IV | /) | | | \$ | | | | | 0.00 | | | 1 | | |
| | | | | | | | | CTIO | | | | | | | | | |
| | that this report, inc | - | _ | | | | | | | | | _ | | of my kno | wledge a | and belie | ef , true |
| • | cribed before me thi | s | | | | | | | | | | ianatur | of Dorso | n Submit | ting Don | art | |
| - | day of | | _ 20 | | | | | | | | | ngnature | or Perso | iii Subiiiii | ину кер | ort | |
| | Signatu | ıre | | | | | | | | | | | Prin | ited Name | • | | |
| My Commission Ex | · | | | | | | | | • | | | | Ema | il | | | |
| | МО | | AY | YR | | | | | | | ea Coc | le | Daytin | ne Teleph | one Nu | nber | |
| | a report of a can | | | | | | | | | _ | | | | | 5.44 | | 4000 |
| No 320) as amende | | • | eage and bei | ier tnis | politic | ai coi | mmı | ittee na | as n | ot viola | ed an | y provis | ions or th | e act or J | une 3,15 | 937 (P.L. | 1333, |
| Sworn to and subsc | ribed before me this day of | | 20 | | | | | | | | | s | ignature | of Candid | ate | | |
| | | | | | | | | | | | | | Printe | ed Name | | | |
| My Commission Exp | Signature ires | | | | | | | | | | | | Ema | nil | | | — |
| | МО | D | AY | YR | | | | | | Area | Code | | D | aytime T | elephon | e Numbe | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | Period | | |
|--|-----------|---------|--------------|----------|
| Cozzone for PA (Lt Gov) | From: | 5/1/201 | <u>8</u> To: | 6/4/2018 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | Period | (1) | \$ | 200.00 |
| 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) | | | \$ | 1,250.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 1,250.00 |
| 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) | | | \$ | 3,000.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 3,000.00 |
| 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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | unt | \$ | 4,450.00 |

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 Candidat | Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|--------------------------------------|---------------------------------------|-------------------|-------|------|------------------|----|--------|--|--|--|--|
| | | | From: | | То | : | | | | | |
| | | • | | DATE | | | AMOUNT | | | | |
| Full Name of Contributing Committee | | | 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 Candida | te | | Reportin | g P | eriod | | | |
|-------------------------------------|-------|------------------|----------|-----|-------|-----------------|----|----------|
| Cozzone for PA (Lt Gov) | | | From: | | 5/1/2 | 2 <u>018</u> To |): | 6/4/2018 |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | мо | | DAY | YEAR | | |
| David Garrsion | | | 140 | | DAI | ILAK | | |
| Mailing Address | | | | | | | \$ | 250.00 |
| City Malvern | State | Zip Code (Plus 4 |) | 5 | 2 | 2018 | | |
| | PA | 193551762 | | | | | | |
| Full Name of Contributor | | | мо | | DAY | YEAR | | |
| Maura Gustafson | | | 140 | | DAI | ILAK | | |
| Mailing Address | | | | | | | \$ | 100.00 |
| City Bethlehem | State | Zip Code (Plus 4 |) | 5 | 1 | 2018 | | |
| | PA | 180155053 | | | | | | |
| Full Name of Contributor | | | мо | | DAY | YEAR | | |
| Peter Hausmann | | | 1.0 | | | 12/11 | | |
| Mailing Address | | | | | | | \$ | 200.00 |
| City Newtown Square | State | Zip Code (Plus 4 |) | 5 | 9 | 2018 | | |
| | PA | 190731113 | | | | | | |
| Full Name of Contributor | | | мо | | DAY | YEAR | | |
| Jane E Murray | | | 140 | | DAI | ILAK | | |
| Mailing Address | | | | | | | \$ | 100.00 |
| City Exton | State | Zip Code (Plus 4 |) | 5 | 1 | 2018 | | |
| | PA | 193411243 | | | | | | |
| Full Name of Contributor | | | мо | | DAY | YEAR | | |
| MaryLouise L Sterge | | | 140 | | DAI | ILAK | | |
| Mailing Address | | | | | | | \$ | 150.00 |
| City Wayne | State | Zip Code (Plus 4 |) | 5 | 3 | 2018 | | |
| | PA | 190874305 | | | | | | |
| Full Name of Contributor | | | мо | | DAY | YEAR | | |
| Maureen Tomoschuk | | | 140 | | DAI | ILAK | | |
| Mailing Address | | | | | | | \$ | 100.00 |
| City Glen Mills | State | Zip Code (Plus 4 |) | 5 | 1 | 2018 | | |
| | PA | 193429522 | | | | | | |
| Full Name of Contributor | | | МО | | DAY | YEAR | | |
| Donna Urian | | | MO | | DAT | TEAR | | |
| Mailing Address | | | | | | | \$ | 250.00 |
| City Glen Mills | State | Zip Code (Plus 4 |) | 5 | 11 | 2018 | | |
| | PA | 193421712 | | | | | | |

| Full N | Full Name of Contributor | | | | | YEAR | |
|--------|--------------------------|-------|-------------------|---|---|------|-----------|
| Tom \ | Tom Walsh | | | | | | |
| Mailin | Mailing Address | | | | | | \$ 100.00 |
| City | West Chester | State | Zip Code (Plus 4) | 5 | 9 | 2018 | |
| | | PA | 193822833 | | | | |

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

| PAGE TOTAL |
|----------------|
| \$ 1,250.00 |

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: | | | То: | | | |
| | | | | DA | TE | | А | MOUNT | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | 0.00 |
| Mailing Address | | | | | | | - \$ | | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | | |
| | | | | | | | | PAGE TO | TAL |
| Enter Grand Total of Part C on Scheo | 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 | f Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|---|---------------------------------|-------------------|-------------|---------|------------------|----------|-------------|------------|--|--|--|
| Cozzone for PA (Lt Gov) | | | Fron | n: | <u>5/1/2</u> | 018 To |): | 6/4/2018 | | | |
| | | | | DA | ATE | | А | MOUNT | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | 1 000 00 | | | |
| Cohen Milstein Sellers & Toll PLLC | | | | 1-10 | DAI | ILAK | _ \$ | 1,000.00 | | | |
| Mailing Address | | | | 5 | 7 | 2018 | 1 | | | | |
| City Washington | State | Zip Code (Plus | 4) | | | -010 | | | | | |
| | l _{DC} | 200053934 | | | | | 1 | | | | |
| Employer Name | | | | Occupat | ion | | | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | Zip Co | | e (Plus 4) | | | |
| Full Name of Contributor | | | | МО | DAY | YEAR | \$ | 500.00 | | | |
| Kenneth Dee | | | | | | | * | 300.00 | | | |
| illing Address State Zin Code (Plus 4) | | | | 5 | 11 | 2018 | | | | | |
| City Exton | State | Zip Code (Plus 4) | | | | | | | | | |
| | l _{PA} | | | | | | | | | | |
| Employer Name | | | | Occupat | ion | | | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Cod | e (Plus 4) | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 500.00 | | | |
| Marian Moskowitz | | | | | | | 4 | 555.55 | | | |
| Mailing Address | I | | | 5 | 9 | 2018 | | | | | |
| City Malvern | State | Zip Code (Plus | 34) | | | | | | | | |
| | l pa | 193559770 | | | | | ı | | | | |
| Employer Name Self Employed | | | | Occupat | ion | Real Est | ate Dev | eloper | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Cod | e (Plus 4) | | | |
| Full Name of Contributor James C. Sargent Jr. | | | | мо | DAY | YEAR | \$ | 1,000.00 | | | |
| Mailing Address | | | | | | | 7 | | | | |
| City West Chester | State | Zip Code (Plus | ; 4) | 5 | 4 | 2018 | | | | | |
| , | PA | 193823774 | • | | | | | | | | |
| Employer Name Lamb McErlane PC | | | | Occupat | ion | Partner | | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | | State | | Zip Cod | e (Plus 4) | | | |
| Enter Grand Total of Part C on Schedule I, Detailed Summary Page, S | | | | on 3. | 1 | | P | AGE TOTAL | | | |

3,000.00

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: | | | To: | |
| | | | | D | ATE | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | | |
| City | State | Zip Code (I | Plus 4) | | | | |
| Receipt Description | • | • | | | • | | |
| Futor Count Total of Boot | Fan Cabadula I Batailad | Commence Dance | Castian | 4 | | | PAGE TOTAL |
| Enter Grand Total of Part | c on schedule 1, Detailed | Summary Page, | Section | 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 Period | | |
|--|------------------|----------------------------|----------|
| Cozzone for PA (Lt Gov) | From: | <u>5/1/2018</u> To: | 6/4/2018 |
| 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 Candidate | | | Reporting Period | | | | | |
|---------------------------------------|------------------|----------------------|------------------|----------|------|-------------|-----------|------|
| | | | From: | | | То: | | |
| | | | | 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 Sche | dule II, In-Kind | d Contributions Deta | iled Sum | mary Pag | ge, | | PAGE TOTA | L |
| Section 2. | | | | | | \$ | | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Rep | orting | Period | | | | |
|---|------------------|------|------------------|--------|--------|--------------|-------|------|---------------------|------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | 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 | V | State | e Zip | Code(Plus 4) | Descr | ript | ion of Contribution | on |
| Enter Grand Total of Part G on Scho | edule II, In-Kir | nd C | Contributions De | etaile | ed | | | | PAGE TO | ΓAL |
| Summary Page, Section 3. | , | | | | | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Period | | | |
|---------------------------------------|------------------|----------|-----|----------|
| Cozzone for PA (Lt Gov) | From | 5/1/2018 | То: | 6/4/2018 |

| | | | | DATE | | AMOUNT | | | |
|---------------------------------------|--------------|-------------------|----------------------------|--------------|----------|--------|----------|--|--|
| To Whom Paid | | | МО | DAY | YEAR | | | | |
| Armstrong County Democrat | ic Committee | | 1-10 | | 7 = 7 \ | | | | |
| Mailing Address | | | 5 | 4 | 2018 | \$ | 15.00 | | |
| City | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | | | Event Ticket | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| Berks County Democratic Committee | | | | DAI | ILAK | | | | |
| Mailing Address | | | | 11 | 2018 | \$ | 120.00 | | |
| City Reading State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | | | | |
| | PA | 196013930 | Event T | ïcket | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | |
| Capitol Promotions | | | MO | DAT | TEAR | | | | |
| Mailing Address | | | 5 | 14 | 2018 | \$ | 2,314.60 | | |
| City Glenside State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | |
| | PA | 190380231 | Yard Signs | | | | | | |
| To Whom Paid | · | | l wo | DAY | YEAR | | | | |
| Citizens Bank | | | МО | DAY | TEAK | | | | |
| Mailing Address | | | 5 | 4 | 2018 | \$ | 30.00 | | |
| City Paoli | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | PA | 193011503 | Wire Fee | | | | | | |
| To Whom Paid | | | NO. | DAY | VEAD | | | | |
| Comcast Spotlight Media Buy | 1 | | МО | DAY | YEAR | | | | |
| Mailing Address | | | 5 | 2 | 2018 | \$ | 7,200.00 | | |
| City | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | | Media Buy | | | | | | |
| To Whom Paid | • | · | l uc | DAY | VEAD | | | | |
| Kathi Cozzone | | | МО | DAY | YEAR | | | | |
| Mailing Address | | | 5 | 2 | 2018 | \$ | 208.00 | | |
| City Exton | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | | | rsement | | | | | |
| | | 177 13311302 | | | | | | | |

| | | | | | | | //GE 13 | | |
|---|-----------------|-------------------|----------------------------|----------------------|----------|----|----------|--|--|
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Kathi Cozzone | М | | ILAK | | | | | | |
| Mailing Address | | | 5 | 17 | 2018 | \$ | 1,060.29 | | |
| City Exton | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| PA 193411502 | | | | Travel Reimbursement | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| Facebook | | | МО | | ILAK | | | | |
| Mailing Address | | | 5 | 10 | 2018 | \$ | 1.75 | | |
| City | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | | Ads | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Facebook | | | МО | DAI | ILAK | | | | |
| Mailing Address | | | 5 | 10 | 2018 | \$ | 23.25 | | |
| City | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | | Ads | | | | | | |
| To Whom Paid | | | | DAY | VEAD | | | | |
| Facebook | | | МО | DAY | YEAR | | | | |
| Mailing Address | | | 5 | 14 | 2018 | \$ | 3.96 | | |
| City | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | | Ads | | | | | | |
| To Whom Paid | | - | МО | DAY | YEAR | | | | |
| Facebook | | | MO | DAT | TEAR | | | | |
| Mailing Address | | | 5 | 14 | 2018 | \$ | 46.04 | | |
| City | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | | Ads | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Facebook | | | М | | ILAK | | | | |
| Mailing Address | | | 5 | 15 | 2018 | \$ | 7.13 | | |
| City | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | | Ads | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Facebook | | | 1-10 | | 1 Z/IIX | | | | |
| Mailing Address | Mailing Address | | | 15 | 2018 | \$ | 145.49 | | |
| City State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | | | | |
| | | | Ads | | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| Federation of Democratic Women Indiana County | | | | DAT | ILAK | | | | |
| Mailing Address | | | | 1 | 2018 | \$ | 60.00 | | |
| City | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | I | | | |
| | | | Event T | icket | | | | | |
| | | | | | | | | | |

| | | | | | | | NOL 14 | | | |
|---|---------------|-------------------|------------------------------|----------------------------|----------|----|----------|--|--|--|
| To Whom Paid | | | | | | | | | | |
| First Data Merchant Services | | | | | | | | | | |
| Mailing Address | | | 5 | 2 | 2018 | \$ | 316.77 | | | |
| City Atlanta | State | Zip Code (Plus 4) |) Description of Expenditure | | | | | | | |
| | GA | 303421651 | Merchar | nt Bank Fe | es | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| First Data Merchant Services | | | | | | | | | | |
| Mailing Address | | | 6 | 4 | 2018 | \$ | 193.16 | | | |
| City Atlanta State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | |
| | GA | 303421651 | Merchar | nt Bank Fe | es | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Ashley M Fox | | | MO | DAI | ILAK | | | | | |
| Mailing Address | | | 5 | 1 | 2018 | \$ | 2,470.66 | | | |
| City West Chester | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | PA | 193804357 | Travel R | Reimburser | ment | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | |
| Ashley M Fox | | | MO | | ILAK | | | | | |
| Mailing Address | 5 | 17 | 2018 | \$ | 615.81 | | | | | |
| City West Chester State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | |
| | PA | 193804357 | Travel Reimbursement | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Ashley M Fox | | | 110 | | 1 Z/IIX | | | | | |
| Mailing Address | | | 5 | 17 | 2018 | \$ | 6,600.00 | | | |
| City West Chester | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | PA | 193804357 | Consulting Fee | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Google Ads | | | 110 | | 1 Z/ux | | | | | |
| Mailing Address | | | 5 | 14 | 2018 | \$ | 350.00 | | | |
| City | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | | Ads | | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | |
| Lebanon County Democratic Committee | | | MO | | TEAK | | | | | |
| Mailing Address | | | 5 | 2 | 2018 | \$ | 100.00 | | | |
| City State Zip Code (Plus 4) | | | Descript | tion of Exp | enditure | | | | | |
| | | | | icket | | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | | |
| Montgomery County Democratic Committee | | | | | ILAK | | | | | |
| Mailing Address | | | | 1 | 2018 | \$ | 200.00 | | | |
| City Norristown | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | | | icket | | | | | | |
| Mailing Address | 5 Descript | | | \$ | 200.0 | | | | | |
| PA 194014815 E | | | | icket | | | | | | |

| To WI | nom Paid | | МО | DAY | YEAR | | | | | | |
|--|-----------------|-------|-------------------|----------------------------|-------------|-------------------|----|----------|--|--|--|
| NGP \ | NGP Van | | | | | | | | | | |
| Mailir | ng Address | | | 5 | 29 | 2018 | \$ | 300.00 | | | |
| City | Washington | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | DC 200055006 | | | | | Database Software | | | | | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | | | |
| Diane O'Dwyer | | | | | | ILAK | | | | | |
| Mailing Address | | | | 5 | 1 | 2018 | \$ | 750.00 | | | |
| City Chester Springs State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | | |
| | | PA | 194258767 | Consulti | ing Fee | | | | | | |
| To WI | nom Paid | | | МО | DAY | YEAR | | | | | |
| Diane | e O'Dwyer | | | МО | DAT | TEAR | | | | | |
| Mailir | ng Address | | | 5 | 2 | 2018 | \$ | 1,131.79 | | | |
| City | Chester Springs | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | PA | 194258767 | Travel R | Reimburser | ment | | | | | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | | | |
| Diane | e O'Dwyer | | | 1-10 | | 1 = July | | | | | |
| Mailing Address | | | | | 15 | 2018 | \$ | 391.85 | | | |
| City | Chester Springs | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | PA | 194258767 | Travel Reimbursement | | | | | | | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | | | |
| Diane | e O'Dwyer | | | М | | ILAK | | | | | |
| Mailir | ng Address | | | 5 | 15 | 2018 | \$ | 750.00 | | | |
| City | Chester Springs | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | PA | 194258767 | Consulting Fee | | | | | | | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | | | |
| Palma | a LP | | | PIO | | ILAK | | | | | |
| Mailir | ng Address | | | 5 | 1 | 2018 | \$ | 375.00 | | | |
| City | Blue Bell | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | PA | 194222322 | Rent | | | | | | | |
| To WI | nom Paid | | | МО | DAY | YEAR | | | | | |
| Palma | a LP | | | МО | DAT | TEAR | | | | | |
| Mailir | ng Address | | | 5 | 31 | 2018 | \$ | 375.00 | | | |
| City Blue Bell State Zip Code (Plus 4) | | | | Descript | tion of Exp | enditure | | | | | |
| PA 194222322 | | | | Rent | | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | |
| Paper Crane Press | | | | 1-10 | | LAK | | | | | |
| Mailir | ng Address | | | 5 | 8 | 2018 | \$ | 963.37 | | | |
| City | Aston | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | PA | 190141038 | Palm ca | rds | | | | | | |
| | 177 1501 11050 | | | | | | | | | | |

| To Wh | nom Paid | | | МО | DAY | YEAR | | | | |
|---|-----------------------------|-------|-------------------|----------------------------|-------------|----------|----|----------|--|--|
| Paper | Paper Crane Press | | | | | ILAK | | | | |
| Mailin | g Address | | | 5 | 11 | 2018 | \$ | 963.57 | | |
| City | Aston | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| PA 190141038 | | | | Palm cards | | | | | | |
| To W | nom Paid | | | мо | DAY | YEAR | | | | |
| Savvy LLP | | | | | DAT | TEAR | | | | |
| Mailin | Mailing Address | | | | 2 | 2018 | \$ | 1,275.00 | | |
| City West Chester State Zip Code (Plus 4) | | | | Descrip | tion of Exp | enditure | | | | |
| | | PA | 193824984 | Video P | roduction | | | | | |
| To W | nom Paid | | | | DAY | VEAD | | | | |
| The P | our House | | | МО | DAY | YEAR | | | | |
| Mailin | g Address | | | 5 | 14 | 2018 | \$ | 130.92 | | |
| City | Exton | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | ı | | | |
| | | PA | 193412243 | Meeting | Expense | | | | | |
| To W | nom Paid | · | · | | DAY | VEAD | | | | |
| Verve | Hosting | | | МО | DAY | YEAR | | | | |
| Mailing Address | | | | 5 | 23 | 2018 | \$ | 5.95 | | |
| City | Rochester Hills | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | MI | 483071837 | Hosting | | | | | | |
| To Wi | nom Paid | | | МО | DAY | YEAR | | | | |
| Voter' | Web | | | MO | DAT | TEAR | | | | |
| Mailin | g Address | | | 5 | 1 | 2018 | \$ | 390.00 | | |
| City | Newtown Square | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | PA | 190734049 | Database Software | | | | | | |
| To W | nom Paid | | | МО | DAY | YEAR | | | | |
| West | Chester Democratic Committe | ee | | MO | DAT | TEAR | | | | |
| Mailin | g Address | | | 5 | 1 | 2018 | \$ | 60.00 | | |
| City | West Chester | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | ı | | | |
| | | PA | 193805212 | Event T | icket | | | | | |
| To W | nom Paid | • | • | | DAY | VEAD | | | | |
| Sean | West | | | МО | DAY | YEAR | | | | |
| Mailin | g Address | | | 5 | 1 | 2018 | \$ | 43.44 | | |
| City Downingtown State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | l . | | | | |
| PA 193351535 | | | | Travel F | Reimbursei | ment | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | |
| Sean West | | | | MO | DAT | TEAR | | | | |
| Mailin | Mailing Address | | | | 1 | 2018 | \$ | 375.00 | | |
| City | Downingtown | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | ı | | | |
| | | PA | 193351535 | Consult | ing Fee | | | | | |
| 1 1 | | | | | | | | | | |

| To Whom Paid | | | | DAY | YEAR | | | |
|---|----|-----------|----------------------------|-------------|----------|----|------------|--|
| Sean West | | | МО | DAT | ILAK | | | |
| Mailing Address | | | 5 | 15 | 2018 | \$ | 375.00 | |
| City Downingtown State Zip Code (Plus 4) | | | Description of Expenditure | | | | | |
| | PA | 193351535 | Consulti | ng Fee | | | | |
| To Whom Paid | | | | DAY | YEAR | | | |
| Sean West | | | МО | | ILAK | | | |
| Mailing Address | | | 5 | 15 | 2018 | \$ | 50.20 | |
| City Downingtown State Zip Code (Plus 4) | | | | tion of Exp | enditure | | | |
| PA 193351535 Travel Reimbursement | | | | | | | | |
| | | | | | | | PAGE TOTAL | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | \$ | 30,788.00 | |