

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 : 20160290		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: MEDIA DEMOCRATIC COMMITTEE								
Street Address: PO BOX 284								
City: MEDIA				State: PA		Zip Code: 19063-0284		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> 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
				MO	DAY	YEAR	DEM 23	
				11	6	2018	(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR
		6	5	2018		10	22	2018
A. Amount Brought Forward From Last Report				FOR OFFICE USE ONLY				
B. Total Monetary Contributions And Receipts (From Schedule I)								
C. Total Funds Available (Sum Of Lines A and B)								
D. Total Expenditures (From Schedule III)								
E. Ending Cash Balance (Subtract Line D From Line C)								
F. Value Of In-Kind Contributions Received (From Schedule II)								
G. Unpaid Debts And Obligations (From Schedule IV)								

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

Name of Filing Committee or Candidate	Reporting Period
MEDIA DEMOCRATIC COMMITTEE	From: <u>6/5/2018</u> To: <u>10/22/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 332.34

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)	\$ 100.00
TOTAL for the Reporting Period (2)	\$ 100.00

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)	\$ 1,084.00
TOTAL for the Reporting Period (3)	\$ 1,084.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,516.34
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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)**

Name of Filing Committee or Candidate	Reporting Period
MEDIA DEMOCRATIC COMMITTEE	From: <u>6/5/2018</u> To: <u>10/22/2018</u>

DATE				AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Robert Stump				
Mailing Address 500 N Lemon St A8				\$ 100.00
City Media State PA Zip Code (Plus 4) 19063	7	16	2018	

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

PAGE TOTAL
\$ 100.00

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.

PAGE TOTAL
\$ 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 MEDIA DEMOCRATIC COMMITTEE	Reporting Period From: <u>6/5/2018</u> To: <u>10/22/2018</u>
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				DATE			AMOUNT
Full Name of Contributor Brian Hall				MO	DAY	YEAR	\$ 350.00
Mailing Address 117 N Edgment St				6	7	2018	
City Media	State PA	Zip Code (Plus 4) 19063					
Employer Name Eisenberg & Rothweiler				Occupation Lawyer			
Employer Mailing Address/Principal Place of Business 1634 Spruce St			City Philadelphia		State PA	Zip Code (Plus 4) 19103	
Full Name of Contributor Brian Hall				MO	DAY	YEAR	\$ 367.00
Mailing Address 117 N Edgment St				8	1	2018	
City Media	State PA	Zip Code (Plus 4) 19063					
Employer Name Eisenberg & Rothweiler				Occupation Lawyer			
Employer Mailing Address/Principal Place of Business 1634 Spruce St			City Philadelphia		State PA	Zip Code (Plus 4) 19103	
Full Name of Contributor Brian Hall				MO	DAY	YEAR	\$ 367.00
Mailing Address 117 N Edgment St				9	27	2018	
City Media	State PA	Zip Code (Plus 4) 19063					
Employer Name Eisenberg & Rothweiler				Occupation Lawyer			
Employer Mailing Address/Principal Place of Business 1634 Spruce St			City Philadelphia		State PA	Zip Code (Plus 4) 19103	

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

PAGE TOTAL
\$ 1,084.00

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:
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			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.

PAGE TOTAL
\$ 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	
MEDIA DEMOCRATIC COMMITTEE		From: <u>6/5/2018</u> To: <u>10/22/2018</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)			\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)			\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
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

Name of Filing Committee or Candidate	Reporting Period From: To:
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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.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MEDIA DEMOCRATIC COMMITTEE	From <u>6/5/2018</u> To: <u>10/22/2018</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Kennedy Printing Co, Inc				
Mailing Address 5534 Baltimore ave	9	5	2018	\$ 770.00
City Philadelphia	State PA	Zip Code (Plus 4) 19143	Description of Expenditure Printing of 1291 Postcards	
To Whom Paid	MO	DAY	YEAR	
Postmaster Media Post Office				
Mailing Address 101 E Baltimore Ave	9	5	2018	\$ 324.04
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Postage for 1291 Postcards	
To Whom Paid	MO	DAY	YEAR	
James A Ziegelhoffer				
Mailing Address 402 W 3rd St	10	22	2018	\$ 29.99
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Postage & Room Rental	
To Whom Paid	MO	DAY	YEAR	
Paper Crane Press				
Mailing Address 801 Concord Rd	10	22	2018	\$ 559.01
City Glen Mills	State PA	Zip Code (Plus 4) 19342	Description of Expenditure Printing of Newsletters	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 1,683.04

