# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification20170364ReportNumber :Filed By :						CANDI	DATE		СОМ	MITTEE	✓	LOBE	BYIST		
Name of Filing (	Committee, Candida	ate or Lo	obbyist:				RIA FOR	PA							
Street Address:	PO BOX 1006														
City:	SPRING HOUS	SE					State:	PA			Zip Co	<b>de:</b> 19	477		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIM		POST-	3. <b>X</b>		AMENDMENT REPORT?		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA ELEC	•• •	POST-	6.		TERMIN REPORT		Yes	No	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018				NG METHO				PAPER		$\checkmark$	DISKE	TTE
Name of Office S	Sought by Candidat	te:					DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR			DEN	1	
							11		6	2018	<b></b>	(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of Receipts and MO DAY YEAR							мо	DAY	YI	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		5 1	2	018 <b>T</b>	0	6		4	2018					
A. Amount Bro	ught Forward Fron	n Last Ro	eport			\$			31,7	707.27					
B. Total Monet	ary Contributions	And Rece	eipts (Fron	n Sche	dule I)	\$	\$ 7,081.93								
C. Total Funds Available (Sum Of Lines A and B) \$ 38,789.20															
D. Total Expen	ditures (From Sche	edule III	[)			\$			6,2	266.03					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			32,5	23.17	-				
F. Value Of In-	Kind Contributions	s Receive	ed (From S	chedu	le II)	\$			3	42.66					
G. Unpaid Deb	ts And Obligations	(From S	chedule I\	/)		\$	\$ 0.00								
				AFF	IDAVI	Г SE	CTION								
	s a Committee repo		-							-	-				
I swear (or affirm correct and compl	) that this report, incl ete.	uding the	attached sc	hedules	s filed on <sub>l</sub>	oaper	or by elect	ronic m	edium	, are to f	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20						S	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prin	ited Name			
My Commission E	xpires					_					Ema	il			
	мо	DA	NY	YR				Are	ea Cod	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	didate's a	authorized	Comn	nittee, Ca	andid	ate shall	sign he	ere.						
No 320) as amend		ny knowle	dge and beli	ief this	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso	cribed before me this day of		20							s	ignature	of Candida	ite		
						-					Printe	ed Name			
My Commission Exp	Signature bires					-					Ema	iil			
	мо	DA	λY	YR				Area	Code		D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page									
Name of Filing Committee or Candidate		Reporting	Period						
COLLETT, MARIA FOR PA		From:	<u>5/1/20</u>	<u>18</u> To:	<u>6/4/2018</u>				
1. Unitemized Contributions Received - \$ 50.00 or Les	s Per Contributor								
	TOTAL for the Reporting	Period	(1)	\$	2,069.57				
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)				\$	2,227.36				
	TOTAL for the Reporting	Period	(2)	\$	2,227.36				
3. Contributions Received Over \$250.00 (From Part C	and Part D)			•					
Contributions Received From Political Committees (	Part C)			\$	2,460.00				
All Other Contributions (Part D)				\$	325.00				
	TOTAL for the Reporting	Period	(3)	\$	2,785.00				
4. Other Receipts, Refunds, Interest Earned, Returned	I Checks, Etc . (From Part E)								
	TOTAL for the Reporting	Period	(4)	\$	0.00				
Total Monetary Contributions and Receipts During totals from Boxes 1,2,3 and 4; also enter this amou				\$	7,081.93				

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# 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	e		Reporting Period					
			Fro	From: To:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
							Γ	PAGE TOTAL

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

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)								
Name of Filing Committee or Candida	te		Reportin	g P	eriod			
COLLETT, MARIA FOR PA			From:	om: <u>5/1/2018</u> To: <u>6/4/</u>				<u>6/4/2018</u>
			DATE	-		AMOUNT		
Full Name of Contributor ERIKA CARLSON		мо	I	DAY	YEAR			
Mailing Address 4508 MACARTHUR	BLVD NW APT 4						\$	100.00
City WASHINGTON	ity WASHINGTON State Zip Code (Plus 4)							
- WASHINGTON	DC	200074243						
Full Name of Contributor MICHAEL CHOROST	мо	I	DAY	YEAR				
Mailing Address 4701 CONNECTICUT AVE NW							\$	100.00
City WASHINGTON	State DC	<b>Zip Code (Plus 4)</b> 200085630		5	19	2018		
Full Name of Contributor JAMES H CLAIR			мо	1	DAY	YEAR		
Mailing Address 622 MELVINS RD							\$	100.00
City TELFORD	State	Zip Code (Plus 4)		5	16	2018		
	PA	189692120						
Full Name of Contributor JAMES CLAIR			мо	I	DAY	YEAR		
Mailing Address 622 MELVINS RD							\$	100.00
City TELFORD	<b>State</b> PA	Zip Code (Plus 4)		5	31	2018		
Full Name of Contributor JONATHAN CRAWFORD				I	DAY	YEAR		
Mailing Address 200 N WYNNEWOOD AVE APT B314							\$	200.00
City WYNNEWOOD	State PA	<b>Zip Code (Plus 4)</b> 190961438		5	23	2018		

						5
Full Name of Contributor ANN DEMERLIS			мо	DAY	YEAR	
Mailing Address 1204 HUNT	SEAT DR					<b>\$</b> 108.00
City LOWER GWYNEDD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190021316	- 5	20	2018	
Full Name of Contributor LINDA FISHER			мо	DAY	YEAR	
Mailing Address 233 S 6TH S	T APT 309					<b>\$</b> 150.00
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191063750	5 9		2018	
Full Name of Contributor LOU FREIMILLER		мо	DAY	YEAR		
Mailing Address 407 MYRTLE	AVE APT B				<b>\$</b> 100.00	
City CHELTENHAM	<b>State</b> PA	Zip Code (Plus 4) 190122037	- 5	23	2018	
Full Name of Contributor STEPHEN HECHT			мо	DAY	YEAR	
Mailing Address 209 OVERBR	ROOK AVE					<b>\$</b> 250.00
City WILLOW GROVE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19090	- 5	4	2018	
Full Name of Contributor TIFFANY HODGSON			мо	DAY	YEAR	
Mailing Address 817 WARRE	N RD					<b>\$</b> 51.50
City AMBLER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190022206	- 5	10	2018	
Full Name of Contributor MEGAN HULL	мо	DAY	YEAR			
Mailing Address 2226 HALL F	Mailing Address 2226 HALL PL NW					<b>\$</b> 250.00
City WASHINGTON	State	Zip Code (Plus 4)	- 5	19	2018	
	DC	200071848				

							PAGE 6										
Full Name of Contributor			мо	DAY	YEAR												
KEVIN KENT																	
Mailing Address 229 SHAW	/NEE RD					\$	100.00										
City ARDMORE	State	Zip Code (Plus 4)	5	23	2018												
ANDITONE	РА	190031724															
Full Name of Contributor JAMIE PERRAPATO	·		мо	DAY	YEAR												
Mailing Address 1113 GAI	NSBORO RD					\$	100.00										
City BALA CYNWYD	State	Zip Code (Plus 4)	5	10	2018												
DALA CTINWID	PA	190042012															
Full Name of Contributor JENNIE PILKINGTON	мо	DAY	YEAR														
Mailing Address 5246 42N	D ST NW					\$	75.00										
City WASHINGTON	State	Zip Code (Plus 4)	5	13	2018												
	DC	200151957															
Full Name of Contributor CATHERINE PODELL			мо	DAY	YEAR												
Mailing Address 2200 RALS	STON AVE					\$	142.86										
City HILLSBOROUGH	State	Zip Code (Plus 4)	5	3	2018												
	CA	940106462															
Full Name of Contributor			мо	DAY	YEAR												
RUTH SCHEMM																	
Mailing Address 390 FOLLY	( RD			_	2010	\$	100.00										
City CHALFONT	State	Zip Code (Plus 4)		7	7	7	7	7	7	7	5 7	5 7	5 7	5 7	2018		
	PA	189143722															
Full Name of Contributor PATRICIA ZWEIBEL				DAY	YEAR												
Mailing Address 2121 O ST NW						\$	200.00										
	State	Zip Code (Plus 4)	5	18	2018												
CITY WASHINGTON	DC	200371008															
				•		·	PAGE TOTAL										
		Detailed Summary Page				Ι.	2 227 36										

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

2,227.36

\$

# 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	J Period				
COLLETT, MARIA FOR PA			From:	<u>5/</u>	<u>1/2018</u>	То:		<u>6/4/2018</u>
				DA	TE		Α	MOUNT
Full Name of Contributing Committee GANG OF 100				мо	DAY	YEAR		
Mailing Address 4867 SPENCER DR					24	2010	\$	1,960.00
City SCHWENKSVILLE	<b>State</b> PA	<b>Zip Code</b> 1947324	<b>e (Plus 4)</b> 423	5	31	2018	5	
Full Name of Contributing Committee TRANSPORT WORKERS UNION				мо	DAY	YEAR		
Mailing Address 2233 SPRING GARD	EN ST						\$	500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191303511		5	31	2018	3	
								PAGE TOTAL
Enter Grand Total of Part C on Schee	lule I, Detailed Sum	imary Pa	ige, Sectio	n 3.			\$	2,460.00

# 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	ne of Filing Committee or Candidate				riod			
COLLETT, MARIA FOR PA			Fron	n:	<u>5/1/2</u>	<u>018</u> To	: <u>6/4/2018</u>	
				D/	<b>ATE</b>		AMOUNT	
Full Name of Contributor LORI RICHARDS				мо	DAY	YEAR		
Mailing 2327 NEBRASKA AVE	NW						<b>\$</b> 200.00	
City WASHINGTON	State DC	<b>Zip Code (Plus</b> 200163317	5 4)	5	17	2018		
Employer Name NOT EMPLOYED				Occupation NOT EMPLOYED				
Employer Mailing Address/Principal Place of City Business				State		Zip Code (Plus 4)		
Full Name of Contributor LORI RICHARDS				мо	DAY	YEAR		
Mailing 2327 NEBRASKA AVE	NW						<b>\$</b> 125.00	
City WASHINGTON	State DC	<b>Zip Code (Plus</b> 200163317	s 4)	5	19	2018		
Employer Name NOT EMPLOYED				Occupat	ion N	IOT EMP	PLOYED	
Employer Mailing Address/Principal Place of Business		City			State		Zip Code (Plus 4)	
Enter Grand Total of Part C on Sche	nter Grand Total of Part C on Schedule I, Detailed Summary Page, Section						PAGE TOTAL	
	and if betaned St	annary rage,	Jeen				\$ 325.00	

## 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		Report	ting Perio	bd				
			From:			То:	:		
				D	ATE		AMOUNT		
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description									
Enter Grand Total of Part E c	4				PAGE TOT	AL			
	in Schedule I, Detailet	i Summaly Paye,	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	<b>Reporting Period</b>								
COLLETT, MARIA FOR PA	From:	<u>5/1/2018</u> <b>To:</b>	<u>6/4/2018</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	riod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)								
TOTAL for the Reporting Pe	riod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	riod (3)	\$	342.66						
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, 1		\$	342.66						

# 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		A	MOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address	Mailing Address					\$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detai				mary Pag	e,	PA	AGE TOTAL		
Section 2.					5	5	0.00		

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

Name of Filing Committee or Candidate	2				Re	porti	ng P	eriod			
COLLETT, MARIA FOR PA					Fro	om:		<u>5/1/20</u> :	<u>18</u> To:	<u>6/4/2018</u>	
								DATE		AMOUNT	
Full Name of Contributor MARIA COLLETT						мо	•	DAY	YEAR		
Mailing Address 812 WARREN RD										<b>\$</b> 20.03	
City AMBLER	<b>State</b> PA		Zip Code(F				5	3	2018		
Employer of Contributor AETNA	-		•			Occupation NURSE EI			IURSE ED	DUCATOR	
Employer Mailing Address/Principal Pla Business	ice of	City		State			Zip 4)	Code(Plus	Descri	ption of Contribution	
								STAPLES COPYING FEE			
Full Name of Contributor MARIA COLLETT						мо	)	DAY	YEAR		
Mailing Address 812 WARREN RD										<b>\$</b> 42.41	
City AMBLER	State		Zip Code(F	Plus 4)			5	3	2018		
	PA		1900222	07							
Employer of Contributor AETNA						Occupation NURSE EDUCATOR					
Employer Mailing Address/Principal Pla Business	ice of	City		State			Zip 4)	Code(Plus	Description of Contribution		
									USPS F	POSTAGE	
Full Name of Contributor MARIA COLLETT						мо	)	DAY	YEAR		
Mailing Address 812 WARREN RD										<b>\$</b> 9.00	
City AMBLER	State		Zip Code(F	Plus 4)			5	9	2018		
	PA		1900222	07							
Employer of Contributor AETNA				Occupation			tion	IURSE ED	RSE EDUCATOR		
Employer Mailing Address/Principal Pla Business	ice of	City		State			Zip 4)	Code(Plus	Descri	ription of Contribution	
	Business								PPA PA	RKING	

Full Name of Contributor MARIA COLLETT				мо	DAY	YEAR				
Mailing Address 812 WARREN RD						2010	<b>\$</b> 7.79			
City AMBLER	State		Zip Code(Plus 4)		5	16	2018			
	PA		1900222	07						
Employer of Contributor AETNA				Occupation NURSE EDUCATOR						
Employer Mailing Address/Principal Place of			City State		Zip 4)	Code(Plus	Descri	ption of Contribution		
Business					4)		STAPLE	ES COPYING FEE		
Full Name of Contributor MARIA COLLETT			мо	DAY	YEAR					
Mailing Address 812 WARREN RD								<b>\$</b> 213.43		
City AMBLER	State	State		Plus 4)	5	16	2018			
	РА		1900222	07						
Employer of Contributor AETNA			1		Occupation NURSE EDUCATOR					
Employer Mailing Address/Principal Place of		City State		Zip 4)	Code(Plus	Descri	ption of Contribution			
Business				4)		WINE.COM EVENT SUPPLIES				
Full Name of Contributor MARIA COLLETT				мо	DAY	YEAR				
Mailing Address 812 WARREN RD								<b>\$</b> 15.00		
City AMBLER	State Zip Cod		Zip Code(F	Plus 4)	5	25	2018			
	PA		1900222	07						
Employer of Contributor AETNA			I		Occupa	tion	I I NURSE EDUCATOR			
Employer Mailing Address/Principal Place of Business		City State		State	Zip 4)	Code(Plus Descri		ption of Contribution		
								1ARKET STREET NG FEE		
Full Name of Contributor MARIA COLLETT				мо	DAY	YEAR				
Mailing Address 812 WARREN RD							¢ 25.00			
		Zip Code(Plus 4)		5	29 2	2018	<b>\$</b> 35.00			
City AMBLER	<b>State</b> PA									
				Occupation						
AETNA				NURSE EDUCATOR						
Employer Mailing Address/Principal Place of Business		City State		Zip Code(Plus 4)		Description of Contribution				
				USPS POSTAGE						

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
COLLETT, MARIA FOR PA				<u>5/</u>	<u>1/2018</u>	То:	<u>6/4/2018</u>	
				DATE			AMOUNT	
To Whom Paid ACTBLUE				DAY	YEAR			
Mailing Address PO BOX 441146				3	2018	\$	74.96	
City WEST SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	Description of Expenditure FEE					
To Whom Paid ACTBLUE				DAY	YEAR			
Mailing Address PO BOX 441146				4	2018	\$	57.90	
City WEST SOMERVILLE	<b>State</b> MA	Zip Code (Plus 4) 021440031	Description of Expenditure FEE					
To Whom Paid CHELTENHAM PRINTING				DAY	YEAR			
Mailing Address 518 RYERS AVE				10	2018	\$	1,038.80	
City CHELTENHAM	<b>State</b> PA	Zip Code (Plus 4) 190122131	Description of Expenditure CAMPAIGN LITERATURE					
To Whom Paid DARYL BOLING FOR PENNSYLVANIA STATE REPRESENTATIVE				DAY	YEAR			
Mailing Address 1606 TWINING RD			5	1	2018	\$	90.00	
City WILLOW GROVE	<b>State</b> PA	Zip Code (Plus 4) 190904229	Description of Expenditure LITERATURE					
To Whom Paid NGP VAN				DAY	YEAR			
Mailing Address 1445 NEW YORK AVE NW STE 200			5	2	2018	\$	150.00	
City WASHINGTON	<b>State</b> DC	Zip Code (Plus 4) 200052158	Description of Expenditure DATABASE					

To Whom Paid NGP VAN				DAY	YEAR				
Mailing Address 1445 NEW YORK AVE NW STE 200				4	2018	\$	150.00		
City WASHINGTON	State	Zip Code (Plus 4)	Description of Expenditur						
	DC	200052158	DATAB	DATABASE					
To Whom Paid PHILADELPHIA PARKING AUTHORITY				DAY	YEAR				
Mailing Address 701 MARKET ST			5	24	2018	\$	34.00		
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	191061538							
To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE				DAY	YEAR				
Mailing Address 1635 MARKET ST S	TE 1600		5	22	2018	\$	4,432.35		
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	191032202	PAYRO						
To Whom Paid STORE #2932				DAY	YEAR				
Mailing Address 1200 WELSH RD ST	ΓΕ A2		5	23	2018	\$	14.84		
City NORTH WALES	State	State Zip Code (Plus 4)		Description of Expenditure					
	PA	194543771	EVENT SUPPLIES						
<b>To Whom Paid</b> WEGMANS	<u> </u>		мо	DAY	YEAR				
Mailing Address 1405 MAIN ST			5	25	2018	\$	207.18		
City WARRINGTON	State Zip Code (Plus 4)		Description of Expenditure						
	PA	189762492	EVENT	SUPPLIES					
To Whom Paid WELLS FARGO			мо	DAY	YEAR				
Mailing Address 420 MONTGOMERY ST			5	8	2018	\$	16.00		
City SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure FEE						
	CA	941041207							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL			
Enter Grand Total of Expenditures	on Page 1, Re	port Cover Page, Item D.	•			\$	6,266.03		