

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 : 9000297		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION											
Street Address: 600 THIRD AVE											
City: KINGSTON					State: PA		Zip Code: 18704-5815				
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	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4. X	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	40			
					11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		6	5	2018		9	17	2018			
A. Amount Brought Forward From Last Report					\$ 9,841.23						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 33,000.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 42,841.23						
D. Total Expenditures (From Schedule III)					\$ 12,300.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 30,541.23						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

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
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From: <u>6/5/2018</u> To: <u>9/17/2018</u>

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

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)	\$ 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)	\$ 33,000.00
TOTAL for the Reporting Period (3)	\$ 33,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 33,000.00
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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 Candidate	Reporting Period
	From: To:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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 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 PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	Reporting Period From: <u>6/5/2018</u> To: <u>9/17/2018</u>
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				DATE	AMOUNT			
Full Name of Contributor	MO	DAY	YEAR					
Joseph a Quinn, Jr Mailing Address 10 Fordham Rd <table style="width: 100%;"> <tr> <td style="width: 33%;">City Laflin</td> <td style="width: 33%;">State PA</td> <td style="width: 33%;">Zip Code (Plus 4) 18702</td> </tr> </table>	City Laflin	State PA	Zip Code (Plus 4) 18702	6	11	2018	\$ 20,000.00	
City Laflin	State PA	Zip Code (Plus 4) 18702						
Employer Name Hourigan, Kluger & Quinn PC				Occupation Attorney				
Employer Mailing Address/Principal Place of Business 600 THIRD AVE		City Kingston		State PA	Zip Code (Plus 4) 18704			

Full Name of Contributor	MO	DAY	YEAR					
Joseph A Quinn Jr Mailing Address 10 Fordham Rd <table style="width: 100%;"> <tr> <td style="width: 33%;">City Laflin</td> <td style="width: 33%;">State PA</td> <td style="width: 33%;">Zip Code (Plus 4) 18702</td> </tr> </table>	City Laflin	State PA	Zip Code (Plus 4) 18702	9	10	2018	\$ 13,000.00	
City Laflin	State PA	Zip Code (Plus 4) 18702						
Employer Name Hourigan, Kluger & Quinn PC				Occupation Attorney				
Employer Mailing Address/Principal Place of Business 600 Third Avenue		City Kingston		State PA	Zip Code (Plus 4) 18704			

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

PAGE TOTAL
\$ 33,000.00

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.

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	
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION		From: <u>6/5/2018</u> To: <u>9/17/2018</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 RECIEVED - 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
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From <u>6/5/2018</u> To: <u>9/17/2018</u>

DATE				AMOUNT		
To Whom Paid Tom Wolf For Governor			MO	DAY	YEAR	\$ 10,000.00
Mailing Address PO Box 22454			6	11	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 19110	Description of Expenditure Contribution			
To Whom Paid Powell for DA			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 527 Linden Street			7	3	2018	
City Scranton	State PA	Zip Code (Plus 4) 18503	Description of Expenditure Contribution			
To Whom Paid Committee to Elect Eddie Day Pashinski			MO	DAY	YEAR	\$ 300.00
Mailing Address 43 North Spring Street			8	7	2018	
City Glen Lyon	State PA	Zip Code (Plus 4) 18617	Description of Expenditure Contribution			
To Whom Paid Friends of Mike Carroll			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 401 Park Drive			8	29	2018	
City Avoca	State PA	Zip Code (Plus 4) 18641	Description of Expenditure Contribution			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 12,300.00

