

# 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 :		20180420		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: CASA IN ACTION PAC													
Street Address: 8151 15TH AVE													
City: HYATTSVILLE						State: MD				Zip Code: 20783			
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?		Yes	No	✓		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?		Yes	No	✓		
	ANNUAL REPORT	7.	Year 2018	FILING METHOD ( ) CHECK ONE			PAPER		✓	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR					
						11	6	2018					
Summary of Receipts and Expenditures from:						MO	DAY	YEAR	FOR OFFICE USE ONLY				
						6	5	2018					
						9	17	2018					
A. Amount Brought Forward From Last Report						\$ 0.00							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 325,000.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 325,000.00							
D. Total Expenditures (From Schedule III)						\$ 0.00							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 325,000.00							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 17,590.26							

## 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>
CASA IN ACTION PAC	From: <u>6/5/2018</u> To: <u>9/17/2018</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>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 325,000.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 325,000.00

<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>	\$ 325,000.00
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**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.**

<b>Name of Filing Committee or Candidate</b>  CASA IN ACTION PAC	<b>Reporting Period</b>  <b>From:</b> <u>6/5/2018</u> <b>To:</b> <u>9/17/2018</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee State Victory Action				MO	DAY	YEAR	\$ 125,000.00	
Mailing Address Pending				9	17	2018		
City Pending	State DC	Zip Code (Plus 4) 20005						
Full Name of Contributing Committee State Victory Action				MO	DAY	YEAR	\$ 100,000.00	
Mailing Address Pending				9	7	2018		
City Pending	State DC	Zip Code (Plus 4) 20005						
Full Name of Contributing Committee State Victory Action				MO	DAY	YEAR	\$ 25,000.00	
Mailing Address Pending				9	17	2018		
City Pending	State DC	Zip Code (Plus 4) 20005						
Full Name of Contributing Committee State Victory Action				MO	DAY	YEAR	\$ 75,000.00	
Mailing Address Pending				9	7	2018		
City Pending	State DC	Zip Code (Plus 4) 20005						

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

<b>PAGE TOTAL</b>
\$ 325,000.00

**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: <span style="float: right;">To:</span>
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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.

<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>	
CASA IN ACTION PAC		From: <u>6/5/2018</u> To: <u>9/17/2018</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 RECEIVED - 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**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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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 III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
	<div style="display: flex; justify-content: space-between;"> <span>From</span> <span>To:</span> </div>

				DATE	AMOUNT	
To Whom Paid			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)	Description of Expenditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						<b>PAGE TOTAL</b> \$ 0.00

**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> CASA IN ACTION PAC				<b>Reporting Period</b> From: <u>6/5/2018</u> To: <u>9/17/2018</u>			
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DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Budget Car Rental			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 686.78
<b>Mailing Address</b> 100 Spotsylvania Mall			8	30	2018	
<b>City</b> Fredricksburg	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 22407	<b>Description of Debt</b> car rental for canvass manager in PA			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Budget Car Rental			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,862.32
<b>Mailing Address</b> 101 West Fayette Street			8	30	2018	
<b>City</b> Baltimore	<b>State</b> MD	<b>Zip Code (Plus 4)</b> 21201	<b>Description of Debt</b> car rental for canvass manager in PA			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Card Fulfillment by SVM			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 532.40
<b>Mailing Address</b> 3727 Ventura Drive			8	10	2018	
<b>City</b> Arlington Heights	<b>State</b> IL	<b>Zip Code (Plus 4)</b> 60004	<b>Description of Debt</b> gas cards for canvassers			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Candlewood Suites York			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 34.43
<b>Mailing Address</b> 955 N. Hills Road			9	5	2018	
<b>City</b> York	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17402	<b>Description of Debt</b> hotel for canvass manager			

DATE							Outstanding Balance of Debt
Name of Creditor Pivot Group				MO	DAY	YEAR	\$ 1,050.00
Mailing Address 1509 16th Street				8	29	2018	
City Washington	State DC	Zip Code (Plus 4) 20036	Description of Debt Lit				
DATE							Outstanding Balance of Debt
Name of Creditor Pivot Group				MO	DAY	YEAR	\$ 346.50
Mailing Address 1509 16th Street				8	29	2018	
City Washington	State DC	Zip Code (Plus 4) 20036	Description of Debt Lit				
DATE							Outstanding Balance of Debt
Name of Creditor Pivot Group				MO	DAY	YEAR	\$ 1,605.00
Mailing Address 1509 16th Street				9	12	2018	
City Washington	State DC	Zip Code (Plus 4) 20036	Description of Debt Lit				
DATE							Outstanding Balance of Debt
Name of Creditor Doris Lopez				MO	DAY	YEAR	\$ 732.00
Mailing Address 225 E Princess Street				9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing				
DATE							Outstanding Balance of Debt
Name of Creditor Wilson Lopez				MO	DAY	YEAR	\$ 732.00
Mailing Address 225 E Princess Street				9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing				

DATE					Outstanding Balance of Debt	
Name of Creditor Blanca Gonzalez			MO	DAY	YEAR	\$ 570.00
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Miosoti Orantes			MO	DAY	YEAR	\$ 495.00
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Dina Burch			MO	DAY	YEAR	\$ 731.25
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Jesse Buch			MO	DAY	YEAR	\$ 230.25
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Mary Bair			MO	DAY	YEAR	\$ 277.50
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			

DATE					Outstanding Balance of Debt	
Name of Creditor Jose Figueroa Ortiz			MO	DAY	YEAR	\$ 834.00
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Jewels Pilgrim			MO	DAY	YEAR	\$ 243.75
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Johnice Miller			MO	DAY	YEAR	\$ 240.00
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Tyson Dupree			MO	DAY	YEAR	\$ 352.50
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Melissa Rosa			MO	DAY	YEAR	\$ 48.75
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			

DATE							Outstanding Balance of Debt
Name of Creditor Jorman Perez				MO	DAY	YEAR	\$ 116.25
Mailing Address 225 E Princess Street				9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing				
DATE							Outstanding Balance of Debt
Name of Creditor Jimmy Pena				MO	DAY	YEAR	\$ 45.00
Mailing Address 225 E Princess Street				9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing				
DATE							Outstanding Balance of Debt
Name of Creditor Allison Pentrak				MO	DAY	YEAR	\$ 2,371.01
Mailing Address 225 E Princess Street				9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvass Manager				
DATE							Outstanding Balance of Debt
Name of Creditor Miosottis Torres				MO	DAY	YEAR	\$ 248.34
Mailing Address 225 E Princess Street				9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing				
DATE							Outstanding Balance of Debt
Name of Creditor Celani Crist				MO	DAY	YEAR	\$ 48.26
Mailing Address 225 E Princess Street				9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing				



DATE					Outstanding Balance of Debt	
Name of Creditor Rosario Christian			MO	DAY	YEAR	\$ 48.26
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Anny Lara			MO	DAY	YEAR	\$ 102.71
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Maite Torres			MO	DAY	YEAR	\$ 48.26
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Jahlya Moore			MO	DAY	YEAR	\$ 116.33
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Kimani Eliud			MO	DAY	YEAR	\$ 291.06
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			

DATE				Outstanding Balance of Debt		
Name of Creditor Susan Melero Acosta			MO	DAY	YEAR	\$ 265.67
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE				Outstanding Balance of Debt		
Name of Creditor Neura Beriguete			MO	DAY	YEAR	\$ 273.49
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE				Outstanding Balance of Debt		
Name of Creditor Neely Maxwell			MO	DAY	YEAR	\$ 301.95
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE				Outstanding Balance of Debt		
Name of Creditor Beatrice Wairimu			MO	DAY	YEAR	\$ 80.44
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE				Outstanding Balance of Debt		
Name of Creditor Jeremy Beck			MO	DAY	YEAR	\$ 48.26
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			

DATE					Outstanding Balance of Debt	
Name of Creditor Maribel Burgos			MO	DAY	YEAR	\$ 208.74
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Pilar Martinez			MO	DAY	YEAR	\$ 136.13
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Marcus Cotto			MO	DAY	YEAR	\$ 191.81
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Katherine Lugaro			MO	DAY	YEAR	\$ 172.01
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			
DATE					Outstanding Balance of Debt	
Name of Creditor Ana Rodriguez			MO	DAY	YEAR	\$ 105.19
Mailing Address 225 E Princess Street			9	16	2018	
City York	State PA	Zip Code (Plus 4) 17403	Description of Debt Canvassing			

				DATE			Outstanding Balance of Debt	
Name of Creditor Maria Lopez Reyes				MO	DAY	YEAR	\$ 766.66	
Mailing Address 225 E Princess Street				9	16	2018		
City York		State PA	Zip Code (Plus 4) 17403		Description of Debt Canvass Manager			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 17,590.26	