Campaign Finance Report

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

Filer Identification 20160255 Number :						port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		SPIF	RIT	OF 17	76					•				
Street Address:	3031A WALT	ON ROA	D														
City:	PLYMOUTH M	1EETING						State:	PA			Zip Cod	ie: 19	9462			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- 2. PRIMARY				30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~	
(place X to the right of	PRE-ELECTION ELECTION				≣- !	5.		30 DAY POST- 6. X ELECTION					TERMINATION Yes No REPORT?				
report type)	ANNUAL REPORT	7.	Year 2018			FILING METHOD () CHECK ONE					PAPER		\	DISKE	TTE		
Name of Office S	Sought by Candida	ate:	-					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
								МО	DAY	YE	AR		10000				
								11		6	2018		(SEE IN	ISTRUCTI	ONS FOR O	CODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR		_	_	МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY		
			10 23	2	018	I	<u> </u>	11	:	26	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			135,2	240.00						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	· I)	\$	\$ 3,900.00									
C. Total Funds Available (Sum Of Lines A and B)							\$			139,1	140.00						
D. Total Expenditures (From Schedule III)							\$				0.00						
E. Ending Cash Balance (Subtract Line D From Line C)							\$		-	139,1	40.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Se	chedu	le II	:)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00			•			
				AFF	IDA	١٧٢	ΓSE	CTION									
	s a Committee rep		_						-		_						
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached scl	1edule:	s filed	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true	
Sworn to and subs	cribed before me th day of	is	20							S	Signature	of Perso	n Submit	ting Rep	oort		
	Signat						- -					Prin	ted Name	e			
My Commission Ex	-											Ema	il				
	мо	D	AY	YR					Are	ea Coc	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a car	ididate's	authorized	Comn	nitte	e, C	andid	ate shall	sign he	ere.							1
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and beli	ef this	polit	tical	comm	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me this	5									s	ignature o	of Candid	ate			
	day of						_					Printe	d Name				
	Signature						-						.=				
My Commission Exp	_											Ema	il				
	МО	D	AY	YR	l		•		Area	Code		Da	aytime T	elephor	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
SPIRIT OF 1776	From:	10/23/201	<u>8</u> To:	11/26/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	y 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)			\$	3,900.00
TOTAL for the Reporting	y Period	(3)	\$	3,900.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	3,900.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Committee or Candidate				porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

0.00

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			Rep	oorting P	eriod			
Fr						:		
					DATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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.

lame of Filing Committee or Candidate			Reporting Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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 Candidat	Rep	Reporting Period							
SPIRIT OF 1776	SPIRIT OF 1776 From					018 To	To: <u>11/26/2018</u>		
				D	ATE		АМО	UNT	
Full Name of Contributor UFCW Local 1776KS				МО	DAY	YEAR			
Mailing 3031A Walton Road Address							\$	3,900.00	
City Plymouth Meeting State Zip Code (Plus 4) PA 19462				11	22	2018			
Employer Name N/A	•			Occupat	tion	I/A			
Employer Mailing Address/Principal Pla Business	ace of	City		•	State		Zip Code ((Plus 4)	
N/A		N/A			PA		19462		
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Page	, Section	on 3.			PAG \$	3,900.00	

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	Name of Filing Committee or Candidate				od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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 Peri	od	
SPIRIT OF 1776	From:	10/23/2018 To:	11/26/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	₹	
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 Candid	Name of Filing Committee or Candidate Ro				Reporting Period					
	From:									
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:										
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL			
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL			
						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	Period				
					From:			To:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor			•			Occupa	ation		•		
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Des Summary Page, Section 3.				taile	ed				PAGE TOTAL 0.00		
Summary Page, Section 3.										0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Reporting Period						
	From			То:			
				DATE			AMOUNT
To Whom Paid	МО	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL
).			\$	0.00