

Commonwealth of Pennsylvania

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 : 2018C0769		Report Filed By :	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: MARIA COLLETT									
Street Address:									
City:			State:	Zip Code: 19002					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	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 <input type="checkbox"/>	
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code
SENATOR IN THE GENERAL ASSEMBLY				MO	DAY	YEAR	12	STS	DEM
				11	6	2018	(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY
		3	27	2018	TO	4	30	2018	
A. Amount Brought Forward From Last Report				\$		0.00			
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		0.00			
C. Total Funds Available (Sum Of Lines A and B)				\$		0.00			
D. Total Expenditures (From Schedule III)				\$		3,267.62			
E. Ending Cash Balance (Subtract Line D From Line C)				\$		(3,267.62)			
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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
MARIA COLLETT	From: <u>3/27/2018</u> To: <u>4/30/2018</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)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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.)	\$ 0.00
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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:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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
	From: _____ To: _____

	DATE	AMOUNT
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Full Name of Contributor	MO	DAY	YEAR	AMOUNT			
Mailing Address				\$ 0.00			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">Zip Code (Plus 4)</td> </tr> </table>	City	State	Zip Code (Plus 4)				
City	State	Zip Code (Plus 4)					

PAGE TOTAL
\$ 0.00

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

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				
Mailing Address				\$ 0.00			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">City</td> <td style="width: 25%; padding: 5px;">State</td> <td style="width: 50%; padding: 5px;">Zip Code (Plus 4)</td> </tr> </table>	City	State	Zip Code (Plus 4)				
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	Reporting Period
	From: _____ To: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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.

PAGE TOTAL
\$ 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: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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 MARIA COLLETT	Reporting Period From: <u>3/27/2018</u> To: <u>4/30/2018</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: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MARIA COLLETT	From <u>3/27/2018</u> To: <u>4/30/2018</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
MARIA FOR PA	1	4	2018	\$ 25.00
Mailing Address PO BOX 1006				
City SPRING HOUSE				
State PA				
Zip Code (Plus 4) 19477				
Description of Expenditure DONATION				
To Whom Paid STAPLES	1	5	2018	\$ 6.66
Mailing Address 1210 N BETHLEHEM PIKE				
City NORTH WALES				
State PA				
Zip Code (Plus 4) 19545				
Description of Expenditure OFFICE SUPPLIES				
To Whom Paid ABM PARKING	1	26	2018	\$ 24.00
Mailing Address 701 MARKET STREET				
City PHILADELPHIA				
State PA				
Zip Code (Plus 4) 19106				
Description of Expenditure PARKING FEE				
To Whom Paid MINUTEMAN PRESS	1	26	2018	\$ 159.00
Mailing Address 12 E BUTLER AVE				
City AMBLER				
State PA				
Zip Code (Plus 4) 19002				
Description of Expenditure CAMPAIGN LITERATURE				
To Whom Paid USPS	2	21	2018	\$ 35.00
Mailing Address 905 N BETHLEHEM PIKE				
City SPRING HOUSE				
State PA				
Zip Code (Plus 4) 19477				
Description of Expenditure POSTAGE				

To Whom Paid REPRESENT PA			MO	DAY	YEAR	
Mailing Address PO BOX 68432			2	22	2018	\$ 50.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure EVENT ATTENDANCE FEE			
To Whom Paid AMAZON			MO	DAY	YEAR	
Mailing Address 410 TERRY AVE N			2	25	2018	\$ 13.99
City SEATTLE	State WA	Zip Code (Plus 4) 98109	Description of Expenditure CAMPAIGN LITERATURE			
To Whom Paid USPS			MO	DAY	YEAR	
Mailing Address 905 N BETHLEHEM PIKE			2	27	2018	\$ 50.00
City SPRING HOUSE	State PA	Zip Code (Plus 4) 19477	Description of Expenditure POSTAGE			
To Whom Paid DUKE'S RIVERSDIE DINING			MO	DAY	YEAR	
Mailing Address 313 S FRONT STREET			3	5	2018	\$ 49.28
City WORMLEYSBURG	State PA	Zip Code (Plus 4) 17043	Description of Expenditure STAFF LUNCH			
To Whom Paid ON STREET PARKING			MO	DAY	YEAR	
Mailing Address 123 WALNUT STREET #217			3	5	2018	\$ 33.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure PARKING FEE			
To Whom Paid PPA			MO	DAY	YEAR	
Mailing Address 701 MARKET STREET			3	8	2018	\$ 34.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Description of Expenditure PARKING FEE			

To Whom Paid PPA			MO	DAY	YEAR	
Mailing Address 701 MARKET STREET			3	19	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Description of Expenditure PARKING FEE			
To Whom Paid LAI LAI GARDEN			MO	DAY	YEAR	
Mailing Address 1144 DEKALB PIKE			3	22	2018	
City BLUE BELL	State PA	Zip Code (Plus 4) 19422	Description of Expenditure EVENT ATTENDANCE FEE			
To Whom Paid SEPTA			MO	DAY	YEAR	
Mailing Address 1234 MARKET STREET			3	26	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107	Description of Expenditure TRANSPORTATION FEE			
To Whom Paid USPS			MO	DAY	YEAR	
Mailing Address 905 N BETHLEHEM PIKE			3	30	2018	
City SPRING HOUSE	State PA	Zip Code (Plus 4) 19477	Description of Expenditure POSTAGE			
To Whom Paid USPS			MO	DAY	YEAR	
Mailing Address 905 N BETHLEHEM PIKE			4	9	2018	
City SPRING HOUSE	State PA	Zip Code (Plus 4) 19477	Description of Expenditure POSTAGE			
To Whom Paid STAPLES			MO	DAY	YEAR	
Mailing Address 1210 N BETHLEHEM PIKE			4	11	2018	
City NORTH WALES	State PA	Zip Code (Plus 4) 19454	Description of Expenditure OFFICE SUPPLIES			

To Whom Paid MINUTEMAN PRESS			MO	DAY	YEAR	
Mailing Address 12 E BUTLER AVE			4	24	2018	\$ 63.60
City AMBLER	State PA	Zip Code (Plus 4) 19002	Description of Expenditure CAMPAIGN LITERATURE			
To Whom Paid MARIA FOR PA			MO	DAY	YEAR	
Mailing Address PO BOX 1006			4	28	2018	\$ 2,500.00
City SPRING HOUSE	State PA	Zip Code (Plus 4) 19477	Description of Expenditure DONATION			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 3,267.62

