Campaign Finance Report

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

Filer Identification	on	20180	C0769				port ed B		CANE	OID	ATE	√	СО	MMITTEE		LOBI	BYIST		
Name of Filing C	ommittee	, Candida	ate or Lo	obbyist:		MAI	RIA	COLLE	TT										
Street Address:																			
City:									State:					Zip Code	: 19	002			
TYPE OF REPORT	6TH TUESI PRE-PRIMA		1.	2ND FRIDAY PRIMARY	Y PRE	-	2. X	30 DA PRIMA		PC	OST-	3.		AMENDME REPORT?	NT	Yes	√ No	1	
	6TH TUESI PRE-ELECT		4.	2ND FRIDAY ELECTION	Y PRE	≣-	5.	30 DA		PC	OST-	6.		TERMINAT REPORT?	ION	Yes	No	,	\
	ANNUAL I	REPORT	7.	Year 2018					IG METI CHECK					PAPER		\	DISKE	TTE	
Name of Office S	ought by	Candidat	te:						DATE	OF	ELEC	CTION		District Number	Office Code	Par	ty Code	Cour	
	-								МО	ı	DAY	YEAR		12	STS	DEM			
SENATOR IN TH	1E GENEK	AL ASSE	:MBLY						1	1		6 20	018		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of I		and	МО	DAY	YEAR	ł			МО	İ	DAY	YEAR	}	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			3 27	2	018	3 T	О		4	3	30 20	018						
A. Amount Brou	ught Forw	ard From	1 Last R	eport				\$				0	.00						ļ
B. Total Moneta	ary Contril	butions A	and Rec	eipts (From	Sche	dule	e I)	\$				0	.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																			
D. Total Expend	ditures (Fr	rom Sche	dule II:	(1				\$				3,267	.62						
E. Ending Cash	Balance (Subtract	Line D	From Line (<u>:)</u>			\$			((3,267.6	52)						
F. Value Of In-I	Kind Contr	ributions	Receive	ed (From Sc	chedu	le I	I)	\$				0.	.00						
G. Unpaid Debt	s And Obli	igations	(From S	schedule IV)			\$				0	.00		'				
					AFF	·ID	AVI	T SE	CTIO	١									
PART I - If this is		•	•	=						-	•								
I swear (or affirm) correct and comple		eport, inclu	uding the	: attached sch	nedules	s file	∌d on	paper o	or by ele	ctro	onic me	edium, are	e to t	the best of i	my know	/ledge	and beli	ef , tr	ue
Sworn to and subs	cribed befor day of	re me this		20						-		Signa	ature	of Person	Submitti	ing Rep	ort		_
		Signatur				_		- -		-				Printe	d Name				-1
My Commission Ex	ιpires	Jigiiata.	•							-				Email					-
		мо	D/	AY	YR						Are	a Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andid	ate sha	II s	ign he	re.							
I swear (or affirm) No 320) as amende		best of m	ıy knowle	edge and belie	ef this	; poli	itical	commi	ittee has	no	t violat	ed any pr	rovisi	ions of the	act of Ju	ne 3,1	937 (P.L	133	3,
Sworn to and subsc		e me this								•			Si	ignature of	Candida	te			- [
	day of —— –			_ 20				_		-				Printed	Name				-
	s	ignature				—		-		_									
My Commission Exp	ires													Email					
	_	мо	D/	AY	YR			-		-	Area (Code		Day	time Te	lephor	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
MARIA COLLETT	From:	<u>3/27/201</u>	<u>8</u> To:	4/30/2018
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng Committee			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	

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	Name of Fining Committee of Candidate			Reporting Period From: To:					
			Fro	m:		10):		
					DATE		AMOUNT		
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.

Name of Filing Committee or Candi	date		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 Candidate			Rep	orting Pe	riod			
			Fror	m:		То	:	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name		•		Occupat	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.			PA	GE TOTAL
		, .5.,				4	•	0.00

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 (Candidate		Report	ting Perio	bd			
			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. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Perio	d	
MARIA COLLETT	From:	3/27/2018 To:	4/30/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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	ate		Reportin	g Period			
			From:			To:	
				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 Sun	nmary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	eporting F	Period			
				Fr	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)					
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ee of Ci	ity	State	•	Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-l	Kind (Contributions [etail	led				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period				
MARIA COLLETT			From	<u>3/2</u>	7/2018	То:	4/30/2018	
				DATE			AMOUNT	
To Whom Paid MARIA FOR PA			МО	DAY	YEAR			
Mailing Address PO BOX 100	6		1	4	2018	\$	25.00	
City SPRING HOUSE				Description of Expenditure DONATION				
To Whom Paid STAPLES			МО	DAY	YEAR			
Mailing Address 1210 N BETH	HLEHEM PIKE	1	5	2018	\$	6.66		
City NORTH WALES	State Zip Code (Plus 4) PA 19545			otion of Exp				
To Whom Paid ABM PARKING			мо	DAY	YEAR			
Mailing Address 701 MARKET	STREET		1	26	2018	\$	24.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Descrip PARKIN	otion of Exp	penditure			
To Whom Paid MINUTEMAN PRESS			МО	DAY	YEAR			
Mailing Address 12 E BUTLER	R AVE		1	26	2018	\$	159.00	
City AMBLER State Zip Code (Plus 4) PA 19002			1	otion of Exp				
To Whom Paid USPS			МО	DAY	YEAR			
						1		

Zip Code (Plus 4)

19477

Mailing Address

SPRING HOUSE

City

905 N BETHLEHEM PIKE

State

PΑ

35.00

21 2018

Description of Expenditure

POSTAGE

To Whom Paid REPRESENT PA				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			МО	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			МО	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			МО	DAY	YEAR		
DUKE'S RIVERSDIE DINING Mailing Address 313 S FROI	NT STREET		мо	DAY 5	YEAR 2018	\$	49.28
Mailing Address	NT STREET State PA	Zip Code (Plus 4) 17043	3	5 otion of Exp	2018	\$	49.28
Mailing Address 313 S FROI	State		3 Descrip	5 otion of Exp	2018	\$	49.28
Mailing Address 313 S FROI City WORMLEYSBURG To Whom Paid ON STREET PARKING	State		3 Descrip	5 Ition of Exp LUNCH	2018 penditure	\$	49.28
Mailing Address 313 S FROI City WORMLEYSBURG To Whom Paid ON STREET PARKING	State PA		3 Descrip STAFF MO	5 LUNCH DAY 5	2018 penditure YEAR 2018		
Mailing Address 313 S FROM City WORMLEYSBURG To Whom Paid ON STREET PARKING Mailing Address 123 WALNU	State PA JT STREET #217 State	17043 Zip Code (Plus 4)	3 Descrip STAFF MO 3 Descrip	5 LUNCH DAY 5	2018 penditure YEAR 2018		
Mailing Address 313 S FROM City WORMLEYSBURG To Whom Paid ON STREET PARKING Mailing Address 123 WALNU City HARRISBURG	State PA JT STREET #217 State PA	17043 Zip Code (Plus 4)	3 Descrip STAFF MO 3 Descrip PARKIN	DAY 5 Stion of Exp LUNCH 5 Stion of Exp IG FEE	2018 Penditure YEAR 2018 Penditure		

To Whom Paid PPA	мо	DAY	YEAR			
Mailing Address 701 MARKET STREET	3	19	2018	\$		35.00
City PHILADELPHIA PA Zip Code (Plus 19106	Descri	Description of Expenditure PARKING FEE				
To Whom Paid LAI LAI GARDEN	МО	DAY	YEAR			
Mailing Address 1144 DEKALB PIKE	3	22	2018	\$		60.00
City BLUE BELL PA 2ip Code (Plus 19422	Descrip	Description of Expenditure EVENT ATTENDANCE FEE				
To Whom Paid SEPTA	МО	DAY	YEAR			
Mailing Address 1234 MARKET STREET	3	3 26 2018 \$			12.00	
City PHILADELPHIA State Zip Code (Plus PA 19107	Descri	Description of Expenditure TRANSPORTATION FEE				
To Whom Paid USPS	мо	DAY	YEAR			
To Whom Paid		DAY 30		\$		35.00
To Whom Paid USPS	MO 3	30 otion of Exp	YEAR 2018	\$		35.00
To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State Zip Code (Plus	MO 3 4) Descri	30 otion of Exp	YEAR 2018	\$		35.00
To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State Zip Code (Plus 19477) To Whom Paid	MO 3 4) Descrip	30 otion of Exp GE	YEAR 2018 Denditure	\$		35.00 70.00
To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State Zip Code (Plus PA 19477 To Whom Paid USPS	MO 3 4) Descrip POSTA MO 4	30 Day Day 9 Dation of Exp	YEAR 2018 Penditure YEAR 2018			
To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State PA 19477 To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State Zip Code (Plus 19477)	MO 3 4) Descrip POSTA MO 4) Descrip	30 Day Day 9 Dation of Exp	YEAR 2018 Penditure YEAR 2018			
To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State PA 19477 To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State Zip Code (Plus 19477) To Whom Paid USPS Mailing Address 905 N BETHLEHEM PIKE City SPRING HOUSE State PA 19477 To Whom Paid	MO 3 4) Description POSTA MO 4) Description POSTA	JAY DAY 9 ption of Exp GE	YEAR 2018 Penditure 2018 2018			

To Whom Paid MINUTEMAN PRESS			мо	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			МО	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 Expenditu	res on Page 1. R	enort Cover Page. Item D)_				PAGE TOTAL
			-			\$	3,267.62