### **Campaign Finance Report**

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

Filer Identification 20160170 Number:  Name of Filing Committee, Candidate or Lobbyist:					Rep File			CANDI				4ITTEE	✓	LOBE	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:	,	FRIE	ND:	S OF	CAROLYN	I COM	TTA						
Street Address:																
City:	WEST CHEST	ER						State:	PA			Zip Cod	<b>ie:</b> 19	382		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	' PRE	- 5	5.	30 DA ELECT		POST- 6.			TERMINA REPORT		Yes	No	<b>~</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018					IG METHO				PAPER		/	DISKE	ГТЕ
Name of Office S	Sought by Candida	ite:	-					DATE O	F ELE	CTIO	N	District Number	Par	ty Code	County Code	
								МО	DAY	YE	AR		Code	DEM	1	
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR				МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	5 Trom:		11 27	20	018	T	0	12	:	31	2018					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			28,2	215.27					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				10.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			28,2	225.27					
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,4	179.79					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	:)			\$			26,7	45.48					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II)	)	\$			8,7	69.26					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)	)			\$				0.00					
				AFF	IDA	VI	ΓSE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	[f thi	is is	a Can	ididate re	eport, o	andi	date sig	ın here.				
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sch	edules	filed	l on	paper (	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me th day of	s	20							S	Signature	of Perso	n Submit	ting Rep	ort	
	Signate	ıre					-					Prin	ted Name	•		
My Commission Ex	cpires						_					Ema	il			
	мо	D	AY	YR					Arc	ea Coc	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized (	Comm	nittee	e, Ca	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belie	f this	politi	ical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										S	ignature o	of Candid	ate		
	day of		_ 20				-					Printe	d Name			
	Signature						•					F	i			
My Commission Exp	oires											Ema				
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	e of Filing Committee or Candidate Reporting						
FRIENDS OF CAROLYN COMITTA	From:	11/27/20	<u>18</u> To:	12/31/2018			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	) Period	(1)	\$	10.00			
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	(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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	10.00			

#### **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 C	Candidate	R	eporting	Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Comm	nittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

**PAGE TOTAL \$**0.00

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)

(EXCID	ue contributions noi	in pontical comm	iiiie	es re	por teu	III Pait	Α)	
Name of Filing Committe	e or Candidate		Rep	oorting P	Period			
			Fro	m:		To	):	
		'			DATE			AMOUNT
Full Name of Contributor				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.

#### **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	me of Filing Committee or Candidate			Reporting Period							
			From:			То:					
				DA	TE		P	AMOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR		0.0			
Mailing Address							<b>-</b>   \$	0.0			
City	State	Zip Cod	e (Plus 4)								
								PAGE TOTAL			
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary 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	ame of Filing Committee or Candidate					riod			
				Fron	n:		To	<b>)</b> :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE TOTAL
								\$	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	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<b>'</b>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	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 Per	iod	
FRIENDS OF CAROLYN COMITTA	From:	<u>11/27/2018</u> <b>To:</b>	<u>12/31/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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)	\$	8,769.26
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,		\$	8,769.26

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate	Reporting Period							
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	<b>-</b>	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Can	ndidate			Rer	orting P	eriod		
FRIENDS OF CAROLYN COMITTA				Fro	_	11/27/201	<u>.8</u> To:	12/31/2018
						DATE		AMOUNT
Full Name of Contributor					мо	DAY	YEAR	
HOUSE DEMOCRATIC CAMPAIG	N COMMITTEE				110	DAI	ILAK	
Mailing Address					11	29	2018	\$ 923.08
City HARRISBURG	State		Zip Code(Plus 4)					
	PA		171011130					
Employer of Contributor N/A	ļ.		Į.		Occupa	tion N		
Employer Mailing Address/Principal Place of Business City				State	e Zip	Code(Plus 4)	<b>Descrip</b> STAFF	otion of Contribution
Full Name of Contributor HOUSE DEMOCRATIC CAMPAIG	N COMMITTEE				МО	DAY	YEAR	
Mailing Address					11	29	2018	<b>\$</b> 923.08
City HARRISBURG	State		Zip Code(Plus 4)					
	PA		171011130					
			ļ					
Employer of Contributor N/A  Employer Mailing Address/Principal Place of Business City					Occupa	tion N	/A	
Employer of Contributor N/A Employer Mailing Address/Princi		Cit	ty	State		tion N, Code(Plus 4)	1	otion of Contribution
		Cit	ty	State			1	otion of Contribution
,		Cit	ty	State	zip (	Code(Plus 4)	<b>Descrip</b> STAFF	otion of Contribution
Employer Mailing Address/Princi	pal Place of Business	Cit	ty	State			Descrip	
Employer Mailing Address/Princi	pal Place of Business	Cit	ty	State	zip (	Code(Plus 4)	<b>Descrip</b> STAFF	stion of Contribution
Employer Mailing Address/Princi  Full Name of Contributor  HOUSE DEMOCRATIC CAMPAIG	pal Place of Business	Cit	Zip Code(Plus 4)		Zip	Code(Plus 4)	Descrip STAFF YEAR	
Employer Mailing Address/Princi Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN Mailing Address	pal Place of Business  N COMMITTEE	Cit			Zip	Code(Plus 4)	Descrip STAFF YEAR	
Employer Mailing Address/Princi Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN Mailing Address	N COMMITTEE  State PA	Cit	Zip Code(Plus 4)		Zip	DAY 29	Descrip STAFF YEAR 2018	
Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGE Mailing Address City HARRISBURG	N COMMITTEE  State PA	Cirl	<b>Zip Code(Plus 4)</b> 171011130		MO 11	DAY 29	Descrip STAFF YEAR 2018	
Employer Mailing Address/Princi  Full Name of Contributor  HOUSE DEMOCRATIC CAMPAIGN  Mailing Address  City HARRISBURG  Employer of Contributor N/A	N COMMITTEE  State PA		<b>Zip Code(Plus 4)</b> 171011130		MO 11	DAY 29 tion N,	Descrip STAFF YEAR 2018	<b>\$</b> 1,384.62
Employer Mailing Address/Princi  Full Name of Contributor  HOUSE DEMOCRATIC CAMPAIGN  Mailing Address  City HARRISBURG  Employer of Contributor N/A	N COMMITTEE  State PA		<b>Zip Code(Plus 4)</b> 171011130		MO 11 Occupa	DAY 29 tion N,	YEAR 2018  A Description of the control of the cont	<b>\$</b> 1,384.62
Employer Mailing Address/Princi  Full Name of Contributor  HOUSE DEMOCRATIC CAMPAIGI  Mailing Address  City HARRISBURG  Employer of Contributor N/A  Employer Mailing Address/Princi	N COMMITTEE  State PA  pal Place of Business		<b>Zip Code(Plus 4)</b> 171011130		MO 11	DAY 29 tion N,	Descrip STAFF  YEAR  2018  (A)  Descrip	\$ 1,384.62
Employer Mailing Address/Princi  Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN Mailing Address  City HARRISBURG  Employer of Contributor N/A  Employer Mailing Address/Princi	N COMMITTEE  State PA  pal Place of Business		<b>Zip Code(Plus 4)</b> 171011130		MO 11 Occupa	DAY 29 tion N,	YEAR 2018  A Description of the control of the cont	<b>\$</b> 1,384.62
Employer Mailing Address/Princi  Full Name of Contributor  HOUSE DEMOCRATIC CAMPAIGN  Mailing Address  City HARRISBURG  Employer of Contributor N/A  Employer Mailing Address/Princi  Full Name of Contributor  HOUSE DEMOCRATIC CAMPAIGN	N COMMITTEE  State PA  pal Place of Business		<b>Zip Code(Plus 4)</b> 171011130	State	MO III	DAY  29  tion N, Code(Plus 4)	YEAR 2018  A Descrip STAFF  YEAR	\$ 1,384.62
Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN Mailing Address City HARRISBURG  Employer of Contributor N/A Employer Mailing Address/Princi Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN Mailing Address	Pal Place of Business  N COMMITTEE  State PA  Pal Place of Business  N COMMITTEE		<b>Zip Code(Plus 4)</b> 171011130	State	MO III	DAY  29  tion N, Code(Plus 4)	YEAR 2018  A Descrip STAFF  YEAR	\$ 1,384.62
Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN Mailing Address City HARRISBURG  Employer of Contributor N/A Employer Mailing Address/Princi Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN Mailing Address	Pal Place of Business  N COMMITTEE  State PA  Pal Place of Business  N COMMITTEE  State PA		Zip Code(Plus 4) 171011130  ty  Zip Code(Plus 4)	State	MO III	DAY  29  tion N, Code(Plus 4)  DAY  29	YEAR 2018  /A Description STAFF  YEAR 2018	\$ 1,384.62
Employer Mailing Address/Princi  Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN  Mailing Address  City HARRISBURG  Employer of Contributor N/A  Employer Mailing Address/Princi  Full Name of Contributor HOUSE DEMOCRATIC CAMPAIGN  Mailing Address  City HARRISBURG	Pal Place of Business  N COMMITTEE  State PA  Pal Place of Business  N COMMITTEE  State PA		Zip Code(Plus 4) 171011130  Zip Code(Plus 4) 171011130	State	MO 11  Occupa  MO 11	DAY  29  tion N, Code(Plus 4)  DAY  29	YEAR 2018  A Description STAFF  YEAR 2018	\$ 1,384.62

								TAGE	11
Full Name of Contributor					мо	DAY	YEAR		
HOUSE DEMOCRATIC CAMPAIGN	COMMITTEE				110	DAI	ILAK	_	
Mailing Address					12	8	2018	\$	1,384.62
City HARRISBURG	State		Zip Code(Plus 4)						
	PA		171011130						
Employer of Contributor N/A	<del>'</del>		•		Occupa	tion N	/A		
Employer Mailing Address/Principa	al Place of Business	Cit	ty	State	e Zip	Code(Plus 4)	<b>Descri</b> STAFF	ption of Con	tribution
Full Name of Contributor					мо	DAY	YEAR		
HOUSE DEMOCRATIC CAMPAIGN	COMMITTEE				1-10	DAI	ILAK		1 201 62
lailing Address					12	20	2018	\$	1,384.62
City HARRISBURG	State	Zip Code(Plus 4)							
	PA		171011130						
Employer of Contributor N/A	<u> </u>		•		Occupa	tion N	/A	•	
Employer Mailing Address/Principa	al Place of Business	Cit	ty	State	e Zip	Code(Plus 4)	<b>Descri</b> STAFF	ption of Con	tribution
Full Name of Contributor		_			мо	DAY	YEAR		
HOUSE DEMOCRATIC CAMPAIGN	COMMITTEE				МО	DAI	ILAK		1 201 62
Mailing Address					12	31	2018	\$	1,384.62
City HARRISBURG	State		Zip Code(Plus 4)						
	PA		171011130						
Employer of Contributor N/A	<del>'</del>		•		Occupa	tion N	/A		
Employer Mailing Address/Principa	al Place of Business	Cit	ty	State	e Zip	Code(Plus 4)	Descri	ption of Con	tribution
							STAFF		
Enter Grand Total of Part G or	n Schedule II. In-Ki	ind	Contributions D	etaile	ed			PA	GE TOTAL
Summary Page, Section 3.	. Joneanie II, III-Ki		Contributions D	Canc	. •				8,769.26
							1		

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
FRIENDS OF CAROLYN COMITTA	From	11/27/2018	То:	12/31/2018

				DATE		AMOUNT	
To Whom Paid			мо	DAY	YEAR		
ACTBLUE			1-10		1 = 7 1		
Mailing Address				11	2018	\$	1.00
City WEST SOMERVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
	MA	021440031	MERCHANT CARD FEES				
To Whom Paid				DAY	YEAR		
CHESTER COUNTY DEMOCRATIC COMITTEE					1 = 1		
Mailing Address				20	2018	\$	125.00
City WEST CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	193823224	CONTRIBUTION				
To Whom Paid			МО	DAY	YEAR		
CRIMSON PLANET MEDIA			1-10		12/110		
Mailing Address			11	29	2018	\$	1,310.26
City WEST CHESTER	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	193802261	WEBSITE MAINTENANCE				
To Whom Paid			мо	DAY	YEAR		
DIRECT CONNECT			1-10				
Mailing Address			12	1	2018	\$	35.91
City CHANTILLY	State	Zip Code (Plus 4)	Description of Expenditure				
	VA	201513229	MERCHANT CARD FEES FOR NOVEMBER				
To Whom Paid				DAY	YEAR		
USPS			МО		ILAK		
Mailing Address			12	6	2018	\$	7.62
City WEST CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	193803110	POSTAGE				
							PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	).			\$	1,479.79
						1	