Campaign Finance Report

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

Filer Identificati Number :	on 201	60255			Repor		CAND	DATE		СОМ	1ITTEE	✓	LOBE	YIST	
Name of Filing C	Committee, Candi	date or L	obbyist:	S	PIRIT	OF 17	76								
Street Address:	3031A WALT	ON ROA	D												
City:	PLYMOUTH N	IEETING					State: PA					le: 19	9462		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	E-	2.	30 DA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY ΓΙΟΝ	POST-	6.		TERMINA REPORT?		Yes	No	~
report type)	ANNUAL REPORT	7.	Year 2019			FILING METHOD () CHECK ONE					PAPER	PAPER DISKETTE			
Name of Office S	Sought by Candid	ate:	•				DATE C	F ELE	СТІО	N	District Number	Office Code	Part	ty Code	County Code
							МО	DAY	YE	AR	Number	Code			code
							4	1	2	2019		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY YEA	R			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	o ii oiii:		2 26	20:	19 T	0	3	3	18	2019					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			97,2	240.00					
B. Total Monet	ary Contributions	And Rec	eipts (From Sch	edi	ule I)	\$			4,0	00.00					
C. Total Funds Available (Sum Of Lines A and B)						\$			101,2	240.00					
D. Total Expenditures (From Schedule III)						\$				0.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			\$			101,2	40.00					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	ule	ıI)	\$				0.00					
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)			\$				0.00			'		
			AF	FΙ	DAVI	T SE	CTION								
PART I - If this is	s a Committee re	oort, trea	surer sign here	. If	this is	a Car	ndidate r	eport, (candi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached schedul	es f	filed on	paper	or by elect	tronic 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	is	20						s	ignature	of Perso	n Submit	ting Rep	ort	
	Signat	uro				-					Prin	ted Nam	e		
My Commission Ex	•										Emai	i			
	МО	D	AY Y	R				Ar	ea Cod	le	Daytim	e Telep	hone Nui	mber	
Part II- If this is	a report of a car	didate's	authorized Com	mi	ttee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief th	is p	olitical	comm	ittee has r	not viola	ted an	y provis	ions of the	e act of J	lune 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this	i								s	ignature o	f Candid	late		
	day of					_					Dulm#-	d Name			
	Signature					_					Printe	d Name			
My Commission Exp	_										Ema	il			
	МО	D	AY Y	/R		-		Area	Code		Da	ytime 1	Telephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
SPIRIT OF 1776	From:	<u>2/26/201</u>	<u>9</u> To:	3/18/2019
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	(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)			\$	4,000.00
TOTAL for the Reporting	y Period	(3)	\$	4,000.00
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			\$	4,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	nis Part to itemize only with an aggregate valu								
Name of Filing Committee or Candidate Re			Reporting Period						
			Fre	om:		То	:		
					DATE			AMOUNT	
Full Name of Contributin	g 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 Fining Committee of Candidate				Reporting Period From: To:					
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	1						

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 Candidate Repo				Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Scho	edule 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	Name of Filing Committee or Candidate					Reporting Period						
SPIRIT OF 1776			Froi	From: <u>2/26/2019</u>			To: 3/18/2019					
	D/	ATE		АМС	UNT							
Full Name of Contributor UFCW Local 1776KS				МО	DAY	YEAR						
Mailing 3031A Walton Road Address						2010	\$	4,000.00				
City Plymouth Meeting	State	Zip Code (Plu	s 4)	2	27	2019						
	PA	19462										
Employer Name N/A				Occupation N/A								
Employer Mailing Address/Principal Place	ce of	City			State		Zip Code	(Plus 4)				
N/A		N/A			PA		19462					
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page	, Sectio	on 3.		4		GE TOTAL 4,000.00				

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 Car	Name of Filing Committee or Candidate				Reporting Period					
			From:			To:				
				D	ATE		А	MOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)							
Receipt Description	·	·		•			•			
Enter Grand Total of Part E on	Schedule T. Detailed	l Summary Page.	Section	4.			P	AGE TOTAL		
	2, 2000		22300				\$	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	
SPIRIT OF 1776	From:	2/26/2019 To:	<u>3/18/2019</u>
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	Reporting Period						
	From:			То:			
				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	ge,		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	Reporting Period					
From					From: To:					
						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	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Reporting Period						
	From			То:			
				DATE	AMOUN		
To Whom Paid			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
					PAGE TOTAL		
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00