

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 : | | 20120115 | | Report Filed By : | | CANDIDATE | | COMMITTEE <input checked="" type="checkbox"/> | | LOBBYIST | | |
| Name of Filing Committee, Candidate or Lobbyist: SCHLOSSBERG, MIKE FRIENDS OF | | | | | | | | | | | | |
| Street Address: 1620 POND RD, STE 200 | | | | | | | | | | | | |
| City: ALLENTOWN | | | | | | State: PA | | | Zip Code: 18104-2255 | | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE-PRIMARY | 2. | 30 DAY POST-PRIMARY | 3. | AMENDMENT REPORT? | Yes | <input checked="" type="checkbox"/> | No | | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5. | 30 DAY POST-ELECTION | 6. | TERMINATION REPORT? | Yes | | No | <input checked="" type="checkbox"/> | |
| | ANNUAL REPORT | 7. | Year 2019 | FILING METHOD () CHECK ONE | | | PAPER | <input checked="" type="checkbox"/> | DISKETTE | | | |
| Name of Office Sought by Candidate: | | | | | | DATE OF ELECTION | | | District Number | Office Code | Party Code | County Code |
| REPRESENTATIVE IN THE GENERAL ASSEMBLY | | | | | | MO | DAY | YEAR | STH | DEM | 39 | |
| | | | | | | 3 | 12 | 2019 | (SEE INSTRUCTIONS FOR CODES) | | | |
| Summary of Receipts and Expenditures from: | | MO | DAY | YEAR | TO | MO | DAY | YEAR | FOR OFFICE USE ONLY | | | |
| | | 2 | 26 | 2019 | | 3 | 22 | 2019 | | | | |
| A. Amount Brought Forward From Last Report | | | | | | \$ 26,743.28 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | | \$ 5,675.00 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | \$ 32,418.28 | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ 1,629.05 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | \$ 30,789.23 | | | | | | |
| 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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period |
| SCHLOSSBERG, MIKE FRIENDS OF | From: <u>2/26/2019</u> To: <u>3/22/2019</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) | \$ 3,375.00 |
| All Other Contributions (Part B) | \$ 0.00 |
| TOTAL for the Reporting Period (2) | \$ 3,375.00 |

| | |
|---|-------------|
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | |
| Contributions Received From Political Committees (Part C) | \$ 2,300.00 |
| All Other Contributions (Part D) | \$ 0.00 |
| TOTAL for the Reporting Period (3) | \$ 2,300.00 |

| | |
|--|---------|
| 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.) | \$ 5,675.00 |
|---|-------------|

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 Candidate | | | | Reporting Period | | | |
| SCHLOSSBERG, MIKE FRIENDS OF | | | | From: <u>2/26/2019</u> To: <u>3/22/2019</u> | | | |
| | | | | DATE | | AMOUNT | |

| | | | | | | |
|--|------------------------------|--------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 125.00 |
| PAFPAC | | | 3 | 13 | 2019 | |
| Mailing Address | 2704 Commerce Drive, Suite A | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Harrisburg | PA | 17110 | | | | |

| | | | | | | |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| JM Uliana & Associates, LLC | | | 3 | 13 | 2019 | |
| Mailing Address | | | | | | |
| 2571 Baglyos Circle B20 | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Bethlehem | PA | 18020 | | | | |

| | | | | | | |
|---|--------------|--------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| Pennsylvania Bankers Public Affairs Committee | | | 3 | 14 | 2019 | |
| Mailing Address | | | | | | |
| 3897 North Front Street | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Harrisburg | PA | 17110 | | | | |

| | | | | | | |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| PA MEDICAL PAC (PAM PAC) | | | 3 | 13 | 2019 | |
| Mailing Address | | | | | | |
| P.O. BOX 8820 | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| HARRISBURG | PA | 17105 | | | | |

| | | | | | | |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| Bricklayers & Allied Craftsman Local 5 PAC | | | 3 | 15 | 2019 | |
| Mailing Address | | | | | | |
| 2163 Berryhill Street | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Harrisburg | PA | 17104 | | | | |

| | | | | | | |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| Pennsylvania Psychological PAC | | | 3 | 12 | 2019 | |
| Mailing Address | | | | | | |
| 5925 Stevenson Avenue, Suite H | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Harrisburg | PA | 17112 | | | | |

| | | | | | | |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| RCPA-PAC | | | 3 | 8 | 2019 | |
| Mailing Address | | | | | | |
| 777 E PARK DR, STE 300 | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| HARRISBURG | PA | 17111-2754 | | | | |

| | | | | | | |
|--|--------------------|--|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee AT&T PAC Pennsylvania | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address Information Requested | | | 3 | 11 | 2019 | |
| City Information Requested | State PA | Zip Code (Plus 4) 17101 | | | | |
| Full Name of Contributing Committee PHARMPAC (PA PHARMACY PAC) | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 508 NORTH THIRD STREET | | | 3 | 11 | 2019 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011199 | | | | |
| Full Name of Contributing Committee MCNEES PAC | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 100 PINE ST PO BOX 1166 | | | 3 | 6 | 2019 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17108-1166 | | | | |
| Full Name of Contributing Committee Pennsylvania AAA Federation | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 600 North 3rd Street | | | 3 | 7 | 2019 | |
| City Harrisburg | State PA | Zip Code (Plus 4) 17101 | | | | |
| Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC) | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 762 W LANCASTER AVE | | | 3 | 7 | 2019 | |
| City BRYN MAWR | State PA | Zip Code (Plus 4) 19010-3489 | | | | |
| Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL) | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 319 N FRONT ST | | | 3 | 5 | 2019 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17101 | | | | |
| Full Name of Contributing Committee BIKERS PAC (BIKEPAC) | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address P O BOX 564 | | | 3 | 5 | 2019 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17055-0000 | | | | |

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

PAGE TOTAL

\$ 3,375.00

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 SCHLOSSBERG, MIKE FRIENDS OF | Reporting Period From: <u>2/26/2019</u> To: <u>3/22/2019</u> |
|--|--|

| | | | | DATE | AMOUNT | |
|---|----------|------------------------------|--|------|--------|-------------|
| Full Name of Contributing Committee | | | | MO | DAY | YEAR |
| LOCAL 0690 PLUMBERS UNION POL ACTION FUND | | | | 3 | 7 | 2019 |
| Mailing Address 2791 SOUTHAMPTON ROAD | | | | | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191540000 | | | | |
| | | | | | | \$ 500.00 |
| Full Name of Contributing Committee | | | | MO | DAY | YEAR |
| PPL PEOPLE FOR GOOD GOVT (PPLPGG) | | | | 3 | 11 | 2019 |
| Mailing Address 2 N 9TH STREET | | | | | | |
| City ALLENTOWN | State PA | Zip Code (Plus 4) 18101-0000 | | | | |
| | | | | | | \$ 1,000.00 |
| Full Name of Contributing Committee | | | | MO | DAY | YEAR |
| LOCAL 0449 STEAMFITTERS UNION PAC | | | | 3 | 12 | 2019 |
| Mailing Address 1517 WOODRUFF ST | | | | | | |
| City PITTSBURGH | State PA | Zip Code (Plus 4) 15220-0000 | | | | |
| | | | | | | \$ 500.00 |
| Full Name of Contributing Committee | | | | MO | DAY | YEAR |
| B&B PAC | | | | 3 | 11 | 2019 |
| Mailing Address Information Requested | | | | | | |
| City Information Requested | State PA | Zip Code (Plus 4) 17112 | | | | |
| | | | | | | \$ 300.00 |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

| |
|-------------------|
| PAGE TOTAL |
| \$ 2,300.00 |

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 | \$ 0.00 | |
| Mailing Address | | | | | | | |
| 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 | \$ 0.00 |
| Mailing Address | | | | | | | | |
| 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 | | Reporting Period | |
| SCHLOSSBERG, MIKE FRIENDS OF | | From: <u>2/26/2019</u> To: <u>3/22/2019</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 | \$ 0.00 |
| Mailing Address | | | | | | | |
| 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 |
| SCHLOSSBERG, MIKE FRIENDS OF | From <u>2/26/2019</u> To: <u>3/22/2019</u> |

| DATE | | | | AMOUNT |
|---|-----------------|--------------------------------|--|-----------|
| To Whom Paid | MO | DAY | YEAR | |
| AT&T | | | | |
| Mailing Address 214 Lehigh Valley Mall | 2 | 26 | 2019 | \$ 205.81 |
| City Whitehall | State PA | Zip Code (Plus 4) 18052 | Description of Expenditure Cell Phone | |
| To Whom Paid | MO | DAY | YEAR | |
| AT&T | | | | |
| Mailing Address 214 Lehigh Valley Mall | 2 | 26 | 2019 | \$ 53.24 |
| City Whitehall | State PA | Zip Code (Plus 4) 18052 | Description of Expenditure Cell Phone Data | |
| To Whom Paid | MO | DAY | YEAR | |
| Friends of Courtney Robinson | | | | |
| Mailing Address PO Box 9232 | 2 | 26 | 2019 | \$ 500.00 |
| City Allentown | State PA | Zip Code (Plus 4) 18105 | Description of Expenditure Contribution | |
| To Whom Paid | MO | DAY | YEAR | |
| Allentown Public Library | | | | |
| Mailing Address 1210 Hamilton Avenue | 3 | 1 | 2019 | \$ 250.00 |
| City Allentown | State PA | Zip Code (Plus 4) 18102 | Description of Expenditure Sponsorship | |
| To Whom Paid | MO | DAY | YEAR | |
| East Side Memorial Little League | | | | |
| Mailing Address 80 East Walnut Street | 3 | 8 | 2019 | \$ 100.00 |
| City Allentown | State PA | Zip Code (Plus 4) 18102 | Description of Expenditure Sponsorship | |
| To Whom Paid | MO | DAY | YEAR | |
| Allentown School District Foundation | | | | |
| Mailing Address 31 South Penn Street | 3 | 11 | 2019 | \$ 250.00 |
| City Allentown | State PA | Zip Code (Plus 4) 18101 | Description of Expenditure Scholarship | |

| | | | | | | |
|--|--------------------|-----------------------------------|--|------------|-------------|-----------------|
| To Whom Paid Upper Lehigh Democratic Committee | | | MO | DAY | YEAR | \$ 50.00 |
| Mailing Address 6115 Vista Terrace | | | 3 | 19 | 2019 | |
| City Orefield | State PA | Zip Code (Plus 4) 18069 | Description of Expenditure Sponsorship | | | |

| | | | | | | |
|--|--------------------|-----------------------------------|---|------------|-------------|------------------|
| To Whom Paid Syrian Arab-American Charitable Association | | | MO | DAY | YEAR | \$ 220.00 |
| Mailing Address 606 1/2 North 2nd Street | | | 3 | 20 | 2019 | |
| City Allentown | State PA | Zip Code (Plus 4) 18102 | Description of Expenditure Contribution | | | |

| | | | | | | |
|--|--|--|--|--|--|--------------------|
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL |
| | | | | | | \$ 1,629.05 |

