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	30153				port ed B		CAND	NDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	ommittee, Candi	date or L	obbyist:		Wol	If PA	С										
Street Address:	123 S Broad	St,Ste 2	140														
City:	Philadelphia							State:	PA			Zip Cod	le: 19	109			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	-	2. X	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	≣-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	,	\
report type)	ANNUAL REPORT	7.	Year 2019					NG METH CHECK O				PAPER					
Name of Office S	ought by Candida	ite:	•					DATE C)F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR		1				
								11		5	2019		(SEE IN	STRUCTI	ONS FOR C	ODES))
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	rrom:		4 2	2	019	T	0	5	5	6	2019						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			530,4	43.20						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			9,1	61.85						
C. Total Funds Available (Sum Of Lines A and B) \$										539,6	05.05						
D. Total Expenditures (From Schedule III)									54,3	31.71							
E. Ending Cash Balance (Subtract Line D From Line C)							\$		4	485,2	73.34						
F. Value Of In-	Kind Contribution	s Receiv	ed (From So	chedu	le I	I)	\$				0.00						
G. Unpaid Debt	s And Obligation	(From S	Schedule IV)			\$				0.00						
				AFF	·ID/	AVI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here.	If th	nis is	a Car	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, inc ete.	cluding the	e attached sch	nedule	s file	ed on	paper (or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue,
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Re _l	oort		
	Signat	ıre					-					Prin	ted Name	•			
My Commission Ex	rpires						_					Ema	il				_
	МО	D	AY	YR					Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	ee, 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 beli	ef this	poli	itical	comm	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this day of	i	20								s	ignature o	of Candid	ate			-
							-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
,																	₋┃
	МО	D	AY	YR	ł				Area	Code		Da	aytime T	elephor	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
Wolf PAC	From:	4/2/201	<u>9</u> To:	<u>5/6/2019</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	3,997.00
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)			\$	755.00
TOTAL for the Reporting	Period	(2)	\$	755.00
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)			\$	500.00
TOTAL for the Reporting	Period	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	3,909.85
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			\$	9,161.85

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period			
			From:		То	:	
		L		DATE			AMOUNT
Full Name of Contributing	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	te		Rep	orting Po	eriod			
Wolf PAC			Fro	m:	4/2/	2019 T o):	5/6/2019
					DATE			AMOUNT
Full Name of Contributor Valerie B. Burgess				МО	DAY	YEAR		
Mailing Address 9 Frans Way							\$	100.00
City Downingtown	State PA	Zip Code (Plus 4) 193351270		4	18	2019		
Full Name of Contributor Aldona Collani				МО	DAY	YEAR		
Mailing Address 387 Buck River Rd City Gouldsboro	State PA	Zip Code (Plus 4) 184249233		5	6	2019	\$	100.00
Full Name of Contributor Russ Hegi				МО	DAY	YEAR		
Mailing Address 1195 Barrett Rd City Woodland	State PA	Zip Code (Plus 4) 168819311		4	29	2019	\$	25.00
Full Name of Contributor Russ Hegi	<u>'</u>			МО	DAY	YEAR		
Mailing Address 1195 Barrett Rd City Woodland	State PA	Zip Code (Plus 4) 168819311		5	4	2019	\$	30.00
Full Name of Contributor Eric Husted				МО	DAY	YEAR		
Mailing Address 2154 Berwick Tpke						2025	\$	100.00
City Ulster	State PA	Zip Code (Plus 4) 188507704		5	6	2019		

Full Name of Contributor Alicia Kraemer	мо	DAY	YEAR			
Mailing Address 6775 Pioneer Dr					2010	\$ 100.00
City Macungie	State PA	Zip Code (Plus 4) 180628496	4	28	2019	
Full Name of Contributor Elizabeth Longstreth			МО	DAY	YEAR	
Mailing Address 301 W Gravers Ln				\$ 100.00		
City Philadelphia	State PA	Zip Code (Plus 4) 191183745	5	6	2019	
Full Name of Contributor Wendy H. Meyer			МО	DAY	YEAR	
Mailing Address 210 W Rittenhouse	Sq Apt 2204					\$ 100.00
City Philadelphia	State PA	Zip Code (Plus 4) 191033802	4	17	2019	
Full Name of Contributor Edward Richards				DAY	YEAR	
Mailing Address 4394 Meadow Ln						\$ 100.00
City Allentown	State	Zip Code (Plus 4)	5	6	2019	

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

PAGE TOTAL \$ 755.00

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 Reporting					ng 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 Sche	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					Reporting Period						
Wolf PAC			Fron	n:	4/2/2	o: <u>5/6/2019</u>					
				D/	AMOUNT						
Full Name of Contributor Roger Longenderfer				МО	DAY	YEAR					
Mailing 512 S 3rd St Apt A					_		\$ 500.00				
City Philadelphia	State PA	Zip Code (Plus 191472350	s 4)	5	6	2019					
Employer Name Retired				Occupat	ion	Retired					
Employer Mailing Address/Principal Place Business	ce of	City			State		Zip Code (Plus 4)				
512 S 3rd StApt A		Philadelp	hia		PA		191472350				
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PAGE TOTAL \$ 500.00				
						_					

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 Cand	didate		Report	ting Perio	d			
Wolf PAC			From:		4/2/201	9 To :		5/6/2019
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR		
Independence Blue Cross				МО	DAI	ILAK		
Mailing Address 1901 Market	St Fl 37						\$	506.63
City Philadelphia	State	Zip Code (Plus 4)	4	15	2019)	
·	PA	1910314	55					
Receipt Description Refund I	Health Insurance Ove	rpayment			I			
Full Name Paychex of New York, LLC				МО	DAY	YEAR		
Mailing Address 2405 Park Dr	Ste 200						\$	592.94
City Harrisburg	State	Zip Code (Plus 4)	4	22	2019)	
	PA	1711093	13					
Receipt Description Refund I	Payroll Taxes							
Full Name							П	
Paychex of New York, LLC				МО	DAY	YEAR		
Mailing Address 2405 Park Dr	Ste 200						\$	2,810.28
City Harrisburg	State	Zip Code (Plus 4)	4	30	2019)	
-	PA	1711093	13					
Receipt Description Refund I	Payroll	<u>'</u>						
				_		ſ		PAGE TOTAL
Enter Grand Total of Part E on S	schedule I, Detailed	Summary Page,	Section	4.			\$	3.909.85

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	I							
Wolf PAC	From:	<u>4/2/2019</u> To:	5/6/2019						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Candidate				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 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	porting l	Period			
F						From: To:				
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	Reporting Period						
Wolf PAC			From	<u>4/2</u>	<u>2/2019</u>	To: <u>5/6/201</u>				
				DATE	AMOUNT					
To Whom Paid ActBlue Technical Services			мо	DAY	YEAR					
Mailing Address 14 Arrow St			5	3	2019	\$	53.67			
City Cambridge	State	Zip Code (Plus 4)	Descrir	tion of Exp	l enditure	<u> </u>				
Cambridge	MA	021385106		Card Proce						
To Whom Paid Cabbage Hill Consulting, LLC	·		МО	DAY	YEAR					
Mailing Address 7 Conestoga	Rd		5	2	2019	\$	5,000.00			
City Lancaster	State PA	Zip Code (Plus 4) 176023831	Description of Expenditure Fundraising Consulting							
To Whom Paid Cabbage Hill Consulting, LLC		·	мо	DAY	YEAR					
Mailing Address 7 Conestoga	Rd		5	2	2019	\$	446.11			
City Lancaster State Zip Code (Plus 4)			Description of Expenditure							
PA 176023831				Travel/Accommodations/Meals						
To Whom Paid Aldona Collani			МО	DAY	YEAR					
Mailing Address 387 Buck River Rd			5	6	2019	\$	100.00			
City Gouldsboro	State PA	Zip Code (Plus 4) 184249233		Description of Expenditure Refund						
To Whom Paid Commonwealth of Pennsylvania		·	МО	DAY	YEAR					
Mailing Address PO Box 2809	901		4	16	2019	\$	926.60			

Zip Code (Plus 4)

171280901

Description of Expenditure

Travel Reimbursement

State

PΑ

City

Harrisburg

To Whom Paid Paychex of New York, LLC			МО	DAY	YEAR			
Mailing Address 2405 Park Dr Ste 200			4	15	2019	\$		5,863.21
City Harrisburg	State PA	Zip Code (Plus 4) 171109313	Description of Expenditure Payroll Taxes					
To Whom Paid Paychex of New York, LLC			МО	DAY	YEAR			
Mailing Address 2405 Park Dr Ste 200			4	15	2019	\$		94.84
City Harrisburg	State Zip Code (Plus 4) PA 171109313				enditure			
To Whom Paid Paychex of New York, LLC			МО	DAY	YEAR			
Mailing Address 2405 Park Dr Ste 2	200		4	15	2019	\$		123.89
City Harrisburg	State PA	Zip Code (Plus 4) 171109313	Description of Expenditure Payroll Processing Fees					
To Whom Paid Paychex of New York, LLC			МО	DAY	YEAR			
	200	<u> </u>	MO 4	DAY 30	YEAR 2019	\$		13,175.51
Paychex of New York, LLC	200 State PA	Zip Code (Plus 4) 171109313	4		2019	\$		13,175.51
Paychex of New York, LLC Mailing Address 2405 Park Dr Ste 2	State		4 Descrip	30	2019	\$		13,175.51
Paychex of New York, LLC Mailing Address 2405 Park Dr Ste 2 City Harrisburg To Whom Paid	State PA		4 Descrip Payroll	30	2019 penditure	\$		13,175.51 7,087.18
Paychex of New York, LLC Mailing Address 2405 Park Dr Ste 2 City Harrisburg To Whom Paid Paychex of New York, LLC	State PA		4 Descrip Payroll MO	30 DAY 30 Stion of Exp	2019 Penditure YEAR 2019			
Paychex of New York, LLC Mailing Address 2405 Park Dr Ste 2 City Harrisburg To Whom Paid Paychex of New York, LLC Mailing Address 2405 Park Dr Ste 2	State PA 200 State	171109313 Zip Code (Plus 4)	4 Descrip Payroll MO 4 Descrip	30 DAY 30 Stion of Exp	2019 Penditure YEAR 2019			
Paychex of New York, LLC Mailing Address 2405 Park Dr Ste 2 City Harrisburg To Whom Paid Paychex of New York, LLC Mailing Address 2405 Park Dr Ste 2 City Harrisburg To Whom Paid	State PA 200 State PA	171109313 Zip Code (Plus 4)	4 Descrip Payroll MO 4 Descrip Payroll	30 DAY 30 Stion of Exp Taxes	2019 Penditure YEAR 2019 Penditure			

To Whom Paid Paychex of New York, LLC	мо	DAY	YEAR			
Mailing Address 2405 Park Dr Ste 200	5	1	2019	\$		193.49
City Harrisburg PA Zip Code (Plus 4) 171109313		otion of Exp Processing				
To Whom Paid Paychex of New York, LLC	МО	DAY	YEAR			
Mailing Address 2405 Park Dr Ste 200	5	3	2019	\$		4.17
City Harrisburg PA Zip Code (Plus 4) 171109313	Descrip Insurar	otion of Exp	penditure			
To Whom Paid Paychex of New York, LLC	МО	DAY	YEAR			
Mailing Address 2405 Park Dr Ste 200	5	3	2019	\$		111.56
City Harrisburg State Zip Code (Plus 4)	Descrin	Description of Expenditure Payroll Processing Fees				
PA 171109313						
PA 171109313 To Whom Paid	Payroll	Processing	Fees	\$	1	,500.00
To Whom Paid Pennsylvania Democratic Party	Payroll MO 5	Processing	YEAR 2019	\$	1	,500.00
To Whom Paid Pennsylvania Democratic Party Mailing Address 229 State St City Harrisburg State Zip Code (Plus 4)	MO 5 Descrip	DAY 1	YEAR 2019	\$	1	,500.00
To Whom Paid Pennsylvania Democratic Party Mailing Address 229 State St City Harrisburg State PA 271011110 To Whom Paid	MO 5 Descrip	DAY 1 otion of Exp	YEAR 2019 Denditure	\$,500.00 ,735.00
To Whom Paid Pennsylvania Democratic Party Mailing Address 229 State St City Harrisburg State PA 271011110 To Whom Paid Perkins Coie	MO 5 Descrip Rent MO 5 Descrip	DAY 1 DAY DAY	YEAR 2019 Penditure YEAR 2019			
To Whom Paid Pennsylvania Democratic Party Mailing Address 229 State St City Harrisburg State PA 2ip Code (Plus 4) 171011110 To Whom Paid Perkins Coie Mailing Address 1201 3rd Ave Ste 4900 City Seattle State 2ip Code (Plus 4)	MO 5 Descrip Rent MO 5 Descrip	DAY 1 DAY DAY 2 Dition of Exp	YEAR 2019 Penditure YEAR 2019			
To Whom Paid Pennsylvania Democratic Party Mailing Address 229 State St City Harrisburg State PA Zip Code (Plus 4) 171011110 To Whom Paid Perkins Coie Mailing Address 1201 3rd Ave Ste 4900 City Seattle WA 981013099 To Whom Paid	Payroll MO 5 Descrip Rent MO 5 Descrip Legal S	DAY 1 DAY 2 Dition of Expervices	YEAR 2019 Denditure 2019 Denditure		6	

To Whom Paid Joseph M. Shafer			мо	DAY	YEAR	
Mailing Address 521 9th St SE			4	30	2019	\$ 2,810.28
City Washington	State DC	Zip Code (Plus 4) 200032839	Descrip Payroll	otion of Exp	enditure	
Enter Grand Total of Expen	nditures on Page 1, Re	port Cover Page, Item D				\$ PAGE TOTAL 54,331.71