### **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 :	lei Identification 20160290 Report									СОМ	<b>ITTEE</b>	✓	LOBE	SYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		MED	DIA I	DEMO	CRATIC	COMM	ITTEE						
Street Address:	PO BOX 284															
City:	MEDIA							State:	PA			Zip Cod	<b>de:</b> 19	9063-0	284	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2019					IG METHO				PAPER		/	DISKE	ГТЕ
Name of Office S	Sought by Candida	te:	•					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
	,							МО	DAY	YE	AR	32	Toode	DEM	1	23
								11		5	2019		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	s trom:		5 7	20	019	T	0	6		10	2019					
A. Amount Bro	ught Forward Fro	n Last R	eport				\$			1,2	45.00					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$			1,3	345.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			2,5	90.00					
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,1	91.30					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			1,3	98.70					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	le II	I)	\$				0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00					
			ļ	٩FF	IDA	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. 1	[f th	nis is	a Can	didate r	eport, o	candio	date sig	jn here.				
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sche	dules	file	d on	paper o	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge a	and belie	ef , true
Sworn to and subs	cribed before me this day of	5	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	re					<u>-</u>					Prin	ted Name	•		
My Commission Ex	cpires						_					Ema	il			
	МО	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized Co	omm	nitte	ee, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief	this	polit	tical	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		20								s	ignature o	of Candida	ate		
	day of						-					Printe	d Name			
My Commission 5	Signature						-					Ema	il			
My Commission Exp	es						_									
	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	Reporting	g Period		
MEDIA DEMOCRATIC COMMITTEE	From:	<u>5/7/201</u>	<u>9</u> To:	6/10/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	325.00
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)			\$	620.00
TOTAL for the Reporting	Period	(2)	\$	620.00
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)			\$	400.00
TOTAL for the Reporting	) Period	(3)	\$	400.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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			\$	1,345.00

#### **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 Candida	Reporting Period						
			From:		То	:	
		•		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 Candid	ate		Reportin	g P	eriod				
MEDIA DEMOC	IEDIA DEMOCRATIC COMMITTEE					<u>5/7/</u>	2019 <b>T</b> o	<u>6/10/2019</u>		
					DATE AMOUNT					
Full Name of Cont	ributor			мо	,	DAY	YEAR			
Paul Robinson										
Mailing Address	133 E. 5th St.							\$ 120	0.00	
<b>City</b> Media		State	Zip Code (Plus 4	)	5	11	2019			
		PA	19063							
Full Name of Cont	ributor			мо	)	DAY	YEAR			
Robert Stump										
Mailing Address	510 N Lemon Apt	: C13						\$ 100	0.00	
<b>City</b> Media		State	Zip Code (Plus 4	)	5	11	2019			
		PA	19063							
Full Name of Cont	ributor			мс	)	DAY	YEAR			
Jeanne F. Wordle	у									
Mailing Address	402 W. 3rd St.							\$ 100	0.00	
<b>City</b> Media		State	Zip Code (Plus 4	)	5	11	2019			
		PA	19063							
Full Name of Cont	ributor			мс	,	DAY	YEAR			
Terence Rumsey										
Mailing Address	342 W. 4th St.							\$ 100	0.00	
<b>City</b> Media		State	Zip Code (Plus 4	)	5	11	2019			
		PA	19063							
Full Name of Cont	ributor			мо		DAY	YEAR			
Adeline C.Ciannel	la			MC		DAT	IEAR			
Mailing Address	417 S. Edgmont	St						\$ 200	0.00	
<b>City</b> Media		State	Zip Code (Plus 4	)	5	16	2019			
		PA	19063							
						1		I		

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

7/3/2025 6:25:56 AM

620.00

#### **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	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0	0.00
Mailing Address							<b>+</b>	U	.00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0	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			Repo	orting Pe	riod			
MEDIA DEMOCRATIC COMMITTEE			Fron	n:	5/7/2	019 <b>T</b> o	):	6/10/2019
				D/	ATE		ı	AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	400.00
Brian Hall							<b>1</b> *	400.00
Mailing Address 117 N Edgmont St				5	16	2019		
City Media	State	Zip Code (Plus	<b>34</b> )		10	2013		
	PA	19063						
Employer Name Eisenberg & Rothweile	er			Occupat	ion	_aywer		
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Co	de (Plus 4)
1634 Spruce St		Philadelph	nia		PA		19103	1
Enter Grand Total of Part C on Scheo	lule T. Detailed Su	ımmarv Page	Section	n 3.				PAGE TOTAL
zinci orana rotal or rait e on oche	zaic i, Detailed St	a. <b>y</b> 1 agc,	Jeth	, J.		:	\$	400.00

## 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 Peri	od			
			From:			To:		
				C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address	_						$\neg$	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	•	
			<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page,	Section	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 Period		
MEDIA DEMOCRATIC COMMITTEE	From:	<u>5/7/2019</u> <b>To</b> :	6/10/2019
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 Can	Name of Filing Committee or Candidate Rep					Reporting Period				
			From:			To:				
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						<b>7</b> \$	0.0	10		
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•						
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL			
Section 2.						\$	0.0	0		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

PAGE TOTAL

1,191.30

## STATEMENT OF EXPENDITURES

Name of Filing Con	ame of Filing Committee or Candidate					Reporting Period				
MEDIA DEMOCRAT	MEDIA DEMOCRATIC COMMITTEE				From <u>5/7/2019</u> To: <u>6/</u>					
					DATE			AMOUNT		
To Whom Paid				МО	DAY	YEAR				
Willow's Garden Ca	afe			1.0						
Mailing Address	23 S. Jackson St.			5	11	2019	\$	406.90		
<b>City</b> Media		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	19063	Food &	Beverage					
To Whom Paid				мо	DAY	YEAR				
Professional Duplic	ating, Inc			140		ILAK				
Mailing Address	33 E. State St			5	17	2019	\$	784.40		
<b>City</b> Media		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
		PA	19063	Newslet	ters & Yar	d Signs				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.