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 2012	20190				port ed B		CANDI	DATE		СОМ	1ITTEE	✓	LOBE	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:	•	FRIE	END:	S OF	STEVE M	ICCART	ER						
Street Address:	P.O. BOX 467	,														
City:	GLENSIDE							State:	PA			Zip Cod	de: 19	9038		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No	>
(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	\
report type)	ANNUAL REPORT	7.	Year 2019					IG METH				PAPER		$\overline{}$	DISKE	TTE
Name of Office S	Sought by Candida	te:	-					DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR			DEN	1	
								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	irom:		5 7	20	019	Т	0	6		10	2019					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			83,8	804.79					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	ı)	\$			2	250.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			84,0	54.79					
D. Total Expend	ditures (From Sch	edule II	I)				\$			4,3	25.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			79,7	29.79					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	le II	i)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00					
			,	AFF	IDA	٩VI	ΓSE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	[f thi	is is	a Can	ididate r	eport, d	candio	late sig	ın here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	dules	filed	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , true
Sworn to and subs	cribed before me thi day of	S	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ıre					-					Prin	ted Name	•		
My Commission Ex	cpires						_					Ema	il			
	МО	D	AY	YR					Are	ea Cod	е	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized C	omm	itte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of i	ny knowl	edge and belief	this	polit	tical	commi	ittee has r	ot viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	ate		
							-					Printe	d Name			
My Commission Exp	Signature						-					Ema	il			
, commission Exp																
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF STEVE MCCARTER	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)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	250.00
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	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			\$	250.00

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		
FRIENDS OF STEVE MCCARTER	From:	5/7/2019	То:	6/10/2019
		DATE		AMOUNT

Full Name of Contributing Comm	ittee		МО	DAY	YEAR	
Mailing Address 212 N. TH	IRD STREET					\$ 250.00
City HARRISBURG	State	Zip Code (Plus 4)	6	1	2019	
	PA	17101				

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

PAGE TOTAL \$ 250.00

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 Candi	date		Re _l Fro	oorting P m:	eriod	To	o:	
					DATE			AMOUNT
Full Name of Contributor				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

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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			Repo	orting Pe	riod			
			Fron	n:		То	:	
				D/	ATE		А	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Place Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary Page,	Section	on 3.		5		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 C	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description								
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page.	Section	4.			PAGE TOTA	\L
		· • • • • • • • • • • • • • • • • • • •					\$ C	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		
FRIENDS OF STEVE MCCARTER	From:	<u>5/7/2019</u> To:	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 Candidat	:e		Reporting	g 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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		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 Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reportir	ng Period				
FRIENDS OF STEVE MCCARTER			From	<u>5/</u>	7/2019	То:	6/10/2019	
		•		DATE			AMOUNT	
To Whom Paid GREATER GLENSIDE PATRIOTIC	ASSOCIATION		мо	DAY	YEAR			
Mailing Address P.O. BOX 72			6	1	2019	\$	175.00	
City GLENSIDE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19038		JULY PAR				
To Whom Paid EAST CHELTENHAM COMMUNIT	Y COUNCIL		МО	DAY	YEAR			
Mailing Address 137 FRANKL	IN STREET		6	1	2019	\$	150.00	
City CHELTENHAM	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
G. IEET E. W. W. T	PA	19012		JULY PAR				
To Whom Paid EMERGE PA			мо	DAY	YEAR			
Mailing Address P.O. BOX 60	0078		6	1	2019	\$	500.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19102	DONAT					
To Whom Paid HOUSE DEMOCRATIC CAMPAIGI	N COMMITTEE		мо	DAY	YEAR			
						1		
Mailing Address P.O. BOX 55	5		6	1	2019	\$	3,000.00	
F.O. BOX 33	5 State	Zip Code (Plus 4)					3,000.00	
F.O. DOX 33		Zip Code (Plus 4) 17108		tion of Exp			3,000.00	
F.O. BOX 33	State		Descrip	tion of Exp			3,000.00	
City HARRISBURG To Whom Paid	State PA		Descrip DONAT	otion of Exp	penditure		3,000.00 250.00	

15084

PΑ

DONATION

								PAGE 12
To Whom Paid FRIENDS OF MATT BRADFORD					DAY	YEAR		
Mailing Address P.O. BOX 349				6	4	2019	\$	250.00
City N	IORRISTOWN	State PA	Zip Code (Plus 4) 19404	Description of Expenditure DONATION				
Enter Gr	rand Total of Expend	litures on Page 1, Re	port Cover Page, Item D	•			\$	PAGE TOTAL 4,325.00