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 2016	0290			Repo			CA	NDI	DATE		COM	AITTEE	Y	LUBE	1131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	MEDI	IA [DEMO	CRAT	TIC (COMMI	TTEE	<u> </u>					
Street Address:	PO BOX 284																
City:	MEDIA							State	e:	PA			Zip Co	de: 19	9063-0	284	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.		30 DA PRIMA		P	POST-	3.		AMENDN REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	Ē- 5.	. X	30 DA		P	POST-	6.		TERMIN/ REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7.	Year 2019				FILIN	IG ME					PAPER			DISKE	ГТЕ
Name of Office S	- Sought by Candida	te:						DAT	ΈO	F ELEC	CTIC	N	District Number	Office Code	Part	ty Code	County Code
								МО		DAY	YI	AR	32	•	DEM		23
									11		5	2019		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	l			МО		DAY	YI	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		6 11	. 20	019	T	0		10	2	21	2019					
A. Amount Bro	ught Forward Fror	n Last R	eport		•		\$				1,3	398.70					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule 1	I)	\$				3,0	060.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				4,4	458.70					
D. Total Expend	ditures (From Sch	edule II	I)				\$				9	917.00					
E. Ending Cash	Balance (Subtrac	Line D	From Line	C)			\$				3,5	41.70					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)		\$				2	200.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			1		
					IDA'												
I swear (or affirm)	that this report, incl	-	_									_		of my kno	wledge a	nd belie	ef , true
correct and comple	cribed before me this	ì										`i	of Perso	Cubacit	tina Dan		
	day of		_ 20				•					ngilature	oi Peiso	iii Subiiiii	tilly Kep	ort	
	Signatu	re					-						Prin	ited Name	е		
My Commission Ex	· —						_		•				Ema	il			
	МО		AY	YR							a Coo	le	Daytin	ne Teleph	none Nui	nber	
	a report of a cand									_							4000
No 320) as amende		iy knowie	eage and bei	ier tnis	politic	cai	comm	ittee r	ias n	ot violai	ес ап	y provis	ions of th	e act or J	une 3,15	137 (P.L.	1333,
SWOFN TO AND SUBSC	ribed before me this day of		20									S	ignature (of Candid	ate		
			_				- -						Printe	ed Name			
My Commission Exp	Signature ires								,				Ema	iil			
	МО	D	AY	YR			•			Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate				
MEDIA DEMOCRATIC COMMITTEE	<u>6/11/201</u>	<u>9</u> To	10/21/2019	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	930.00
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)	\$	980.00		
TOTAL for the Reporting	\$	980.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	800.00
All Other Contributions (Part D)			\$	350.00
TOTAL for the Reporting) Period	(3)	\$	1,150.00
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			\$	3,060.00

PAGE TOTAL

0.00

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				Period				
		F	rom:		То	:		
		·		DATE			AMOUNT	
Full Name of Contributing Comm	nittee		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. \$

7/3/2025 7:17:48 AM

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	e or Candidate		Reporting P	eriod		
MEDIA DEMOCRATIC CO	MMITTEE		From:	6/11/	2019 T o	<u>10/21/2019</u>
				DATE		AMOUNT
Full Name of Contributor			мо	DAY	YEAR	
Michael O'Brien						
Mailing Address 421 Kir	rk Ln					\$ 100.00
City Media	State PA	Zip Code (Plus 4) 19063	9	30	2019	
Full Name of Contains	FA	19003				<u> </u>
Full Name of Contributor James A Ziegelhoffer			МО	DAY	YEAR	
Mailing Address 402 W	3rd St					\$ 100.00
City Media	State	Zip Code (Plus 4)	10	7	2019	100.00
-	PA	19063				
Full Name of Contributor			МО	DAY	YEAR	
Jack Doyle						
Mailing Address 201 E.	Front St					\$ 105.00
City Media	State	Zip Code (Plus 4)	10	3	2019	
	PA	19063		<u> </u>	<u> </u>	
Full Name of Contributor David Krull			мо	DAY	YEAR	
Mailing Address 702 Ce	entennial Ave					\$ 100.00
City Media	State	Zip Code (Plus 4)	10	7	2019	
	PA	19063				
Full Name of Contributor Brittany N. Forman	·		МО	DAY	YEAR	
•	est End Walk					\$ 75.00
City Media	State	Zip Code (Plus 4)	10	7	2019	
	PA	19063		<u> </u>		
Full Name of Contributor			мо	DAY	YEAR	
Richard J Ciamacca						
Mailing Address 301 Ra	dnor Street					\$ 200.00
City Media	State	Zip Code (Plus 4)	10	7	2019	
	PA	19063		<u> </u>	<u> </u>	

Full Name of Cont	ull Name of Contributor						
Linda Axamethy F	Linda Axamethy Floyd						
Mailing Address 205 N Edgmont St							\$ 100.00
City Media		State	Zip Code (Plus 4)	10	4	2019	
		PA	19063				
Full Name of Cont	ributor			мо	DAY	YEAR	
Robert Stump				1-10		ILAK	
Mailing Address	510 N Lemon Apt I	09					\$ 200.00
City Media		State	Zip Code (Plus 4)	10	4	2019	

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

PAGE TOTAL
\$ 980.00

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					
MEDIA DEMOCRATIC COMMITTEE				<u>6/1</u>	1/2019	То:	10/21/2019		
				DA	TE		AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR			
DELAWARE CO DEM COM							\$ 300.00		
Mailing Address PO BOX 473				7	22	2019			
City MEDIA	State	Zip Code	e (Plus 4)] ′		2013			
	PA	19063-	0000						
Full Name of Contributing Committee				мо	DAY	YEAR			
Scanlon For Congress				1.10	571.		\$ 500.00		
Mailing Address PO Box 263				10	7	2019			
City Swarthmore	State	Zip Code	e (Plus 4)] '	,	2013			
	PA	19081							

 $\label{lem:enter-constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL\$ 800.00

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	Reporting Period						
MEDIA DEMOCRATIC COMMITTEE					From: <u>6/11/2</u>			019 To : 10/21/2			
	·					DATE AMOUNT					
Full Name of Contributor					МО	DAY	YEAR	\$	350.00		
Brian C. Hall								*	330.00		
Mailing Address 117 N Edgmont St					9	30	2019				
City Media	State	Zip	Code (Plus	4)		30	2013				
	PA	190	063								
Employer Name Eisenberg & Rothweile	er				Occupation Laywer						
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Code (Plus 4)			
1634 Spruce St			Philadelphi	a		PA		191	03		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page					on 3.				PAGE TOTAL		
	,		, , ,					\$	350.00		

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	ing Peri	od				
			From:			To:			
		•		D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Plu	ıs 4)						
Receipt Description	•	•			1		<u> </u>		
Futor Count Total of Doub	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL	
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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 Peri	od								
MEDIA DEMOCRATIC COMMITTEE	From:	<u>6/11/2019</u> To:	10/21/2019							
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 PART F)										
TOTAL for the Reporting Pe	eriod (2)	\$	200.00							
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,	•	\$	200.00							

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period						
MEDIA DEMOCRATIC COMMITTEE			From:	<u>6/</u>	<u>/11/2019</u>	To:	10/21/2019
		•		DATE			AMOUNT
Full Name of Contributor Koffee Korner			МО	DAY	YEAR	<u>_</u>	100.00
Mailing Address 15 South Jackson S	<u> </u>		9	30	2019	\$	100.00
City Media	State	Zip Code (Plus 4)					
	PA	19063					
Description of Contribution: 5 Gift Co	ertificates	1	•				
Full Name of Contributor Jack & Patty Doyle			МО	DAY	YEAR		
Mailing Address 201 E, Front St			10	7	2019	\$	100.00
City Media	State	Zip Code (Plus 4)		'	2019		
	PA	19063					
Description of Contribution: Wine &	T Homemade Triv	ets	•	•		•	
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kir	nd Contributions Deta	iled Sumi	mary Pag	ıe,		PAGE TOTAL
						\$	200.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Place of Business City			ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	Reporting Period				
MEDIA DEMOCRATIC COMMITTEE				<u>6/1</u>	<u>1/2019</u>	То:	10/21/2019	
				DATE				
To Whom Paid Media-Upper Providence Free Library				DAY	YEAR			
Mailing Address 1 E Front St				30	2019	\$	45.00	
City Media	State PA	Zip Code (Plus 4) 19063		Description of Expenditure 1 Room Rental				
To Whom Paid Media VFW Post #3460				DAY	YEAR			
Mailing Address 11 Hilltop Ave				8	2019	\$	550.00	
City Media	State PA	Zip Code (Plus 4) 19063		Description of Expenditure Hall Rental				
To Whom Paid PayPal			мо	DAY	YEAR			
Mailing Address 2211 N. 1st St			10	21	2019	\$	7.18	
City San Jose	State CA	Zip Code (Plus 4) 95131		Description of Expenditure Transaction Fees				
To Whom Paid Blackhorse Graphics				DAY	YEAR			
Mailing Address 609 West State St			9	16	2019	\$	314.82	

	PA	19063	50 Lawn Signs			
	PAGE TOTAL					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					917.00	

Zip Code (Plus 4) Description of Expenditure

State

City

Media