

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 : 20160290		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: MEDIA DEMOCRATIC COMMITTEE										
Street Address: PO BOX 284										
City: MEDIA			State: PA		Zip Code: 19063-0284					
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	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	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
				MO	DAY	YEAR	32		DEM	23
				11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		6	11	2019	TO	10	21	2019		
A. Amount Brought Forward From Last Report				\$		1,398.70				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		3,060.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		4,458.70				
D. Total Expenditures (From Schedule III)				\$		917.00				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		3,541.70				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		200.00				
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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
MEDIA DEMOCRATIC COMMITTEE	From: <u>6/11/2019</u> To: <u>10/21/2019</u>

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 Period (2)	\$ 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 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.)	\$ 3,060.00
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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
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 B
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 Candidate	Reporting Period
MEDIA DEMOCRATIC COMMITTEE	From: <u>6/11/2019</u> To: <u>10/21/2019</u>

				DATE	AMOUNT
Full Name of Contributor				MO	DAY
Michael O'Brien					
Mailing Address 421 Kirk Ln					\$ 100.00
City Media	State	Zip Code (Plus 4)		9	
	PA	19063		30	
				2019	
Full Name of Contributor				MO	DAY
Robert Stump					
Mailing Address 510 N Lemon Apt D9					\$ 200.00
City Media	State	Zip Code (Plus 4)		10	
	PA	19063		4	
				2019	
Full Name of Contributor				MO	DAY
Linda Axamethy Floyd					
Mailing Address 205 N Edgmont St					\$ 100.00
City Media	State	Zip Code (Plus 4)		10	
	PA	19063		4	
				2019	
Full Name of Contributor				MO	DAY
Richard J Ciamacca					
Mailing Address 301 Radnor Street					\$ 200.00
City Media	State	Zip Code (Plus 4)		10	
	PA	19063		7	
				2019	
Full Name of Contributor				MO	DAY
Brittany N. Forman					
Mailing Address 639 West End Walk					\$ 75.00
City Media	State	Zip Code (Plus 4)		10	
	PA	19063		7	
				2019	
Full Name of Contributor				MO	DAY
David Krull					
Mailing Address 702 Centennial Ave					\$ 100.00
City Media	State	Zip Code (Plus 4)		10	
	PA	19063		7	
				2019	

Full Name of Contributor			MO	DAY	YEAR	\$	105.00
Jack Doyle			10	3	2019		
Mailing Address	201 E. Front St						
City	Media	State	PA	Zip Code (Plus 4)	19063		

Full Name of Contributor			MO	DAY	YEAR	\$	100.00
James A Ziegelhoffer			10	7	2019		
Mailing Address	402 W 3rd St						
City	Media	State	PA	Zip Code (Plus 4)	19063		

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 MEDIA DEMOCRATIC COMMITTEE	Reporting Period From: <u>6/11/2019</u> To: <u>10/21/2019</u>
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			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
DELAWARE CO DEM COM	PO BOX 473	MEDIA	7	22	2019	\$ 300.00
State	Zip Code (Plus 4)					
PA	19063-0000					
Scanlon For Congress	PO Box 263	Swarthmore	10	7	2019	\$ 500.00
State	Zip Code (Plus 4)					
PA	19081					

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

PAGE TOTAL
\$ 800.00

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 MEDIA DEMOCRATIC COMMITTEE	Reporting Period From: <u>6/11/2019</u> To: <u>10/21/2019</u>
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	DATE			AMOUNT
Full Name of Contributor Brian C. Hall	MO	DAY	YEAR	\$ 350.00
Mailing Address 117 N Edgmont St	9	30	2019	
City Media	State	Zip Code (Plus 4)		
PA	19063			
Employer Name Eisenberg & Rothweiler	Occupation Laywer			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	
1634 Spruce St	Philadelphia	PA	19103	

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

PAGE TOTAL
\$ 350.00

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 MEDIA DEMOCRATIC COMMITTEE	Reporting Period From: <u>6/11/2019</u> To: <u>10/21/2019</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)	\$ 200.00
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.)	\$ 200.00

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate MEDIA DEMOCRATIC COMMITTEE	Reporting Period From: <u>6/11/2019</u> To: <u>10/21/2019</u>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
Koffee Korner						\$ 100.00
Mailing Address 15 South Jackson St			9	30	2019	
City Media	State PA	Zip Code (Plus 4) 19063				
Description of Contribution: 5 Gift Certificates						
Full Name of Contributor			MO	DAY	YEAR	
Jack & Patty Doyle						\$ 100.00
Mailing Address 201 E, Front St			10	7	2019	
City Media	State PA	Zip Code (Plus 4) 19063				
Description of Contribution: Wine & Homemade Trivets						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL
						\$ 200.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
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
MEDIA DEMOCRATIC COMMITTEE	From <u>6/11/2019</u> To: <u>10/21/2019</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
Media-Upper Providence Free Library	8	30	2019	\$	45.00
Mailing Address 1 E Front St					
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure 1 Room Rental		
To Whom Paid	MO	DAY	YEAR		
Media VFW Post #3460					
Mailing Address 11 Hilltop Ave	10	8	2019	\$	550.00
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Hall Rental		
To Whom Paid	MO	DAY	YEAR		
PayPal					
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	MO	DAY	YEAR		
Blackhorse Graphics					
Mailing Address 609 West State St	9	16	2019	\$	314.82
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure 50 Lawn Signs		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL	
				\$	917.00

