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	90166				port ed B		CAI	NDII	DATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist:		Pen	nsyl	vania	Justic	ce &	Public	Safe	ety PAC	-					
Street Address:																		
City:								State	e:				Zip Cod	le:				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PR	E-	5. X	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	٨	0	\
report type)	ANNUAL REPOR	T 7.	Year 2019)				NG ME					PAPER DISKET				ETTE	
Name of Office S	ought by Candid	ate:	_					DAT	E O	OF ELECTION Distric				Office Code	Pai	ty Cod	Code	
								МО		DAY	YE	AR		10000	ОТ	+	1000	
									11		5	2019		(SEE IN	STRUCTI	ONS FOI	CODES	5)
Summary of	•	МО	DAY	YEAF	2			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY	,	
Expenditures	from:		1 1	1 2	019	T	0		10	2	21	2019						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	_				0.00						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 1,000,000.00																		
C. Total Funds Available (Sum Of Lines A and B) \$ 1,000,000.00																		
D. Total Expenditures (From Schedule III) \$ 95,940.20																		
E. Ending Cash Balance (Subtract Line D From Line C)							\$			ç	904,0	59.80						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	Schedu	ile II	I)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule I	V)			\$				36,1	.49.71						
				AFF	FIDA	AVI	T SE	CTIC	ΝC									
PART I - If this is	a Committee re	port, trea	surer sign	here.	If th	nis is	a Car	ndidat	e re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attached so	chedule	s file	d on	paper	or by e	electr	onic m	edium	, are to t	he best o	f my kno	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before me the	ıis	20								S	ignature	of Perso	1 Submit	ting Re	oort		_
	Signat	ture					-						Prin	ted Name	•			_
My Commission Ex	rpires								•				Emai	i				
	мо	D	AY	YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized	Comr	nitte	ee, C	andid	ate sh	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowle	edge and be	lief this	s poli	itical	comm	ittee h	as no	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P	L. 133	з,
Sworn to and subsc	ribed before me thi day of	s	20									Si	ignature o	of Candid	ate			_
	<u> </u>						-						Printe	d Name				- $ $
My Commission Exp	Signature						-		-				Ema	il				-
							-											_
	МО	D	AY	YF	2					Area	Code		Da	ytime T	elephoi	ne Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	J Period		
Pennsylvania Justice & Public Safety PAC	From:	1/1/201	<u>9</u> To:	10/21/2019
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)			\$	0.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting) Period	(2)	\$	0.00
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)			\$	1,000,000.00
TOTAL for the Reporting	Period	(3)	\$	1,000,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,000,000.00

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	Name of Filing Committee or Candidate			Reporting Period						
			From:		То	:				
		•		DATE			AMOUNT			
Full Name of Contributing Com	mittee		мо	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								

PAGE TOTAL
0.00

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

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 Commi	ttee or Candidate	R	Reporting Period					
			From: To) :		
		•		DATE			AMOUNT	
Full Name of Contributor	r		МО	DAY	YEAR			
Mailing Address						\$	0.00	
Hulling Address				i i	I	I		
City	State	Zip Code (Plus 4)						

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

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	nme of Filing Committee or Candidate		Reporting	Period				
			From:			То:		
				DA	TE		,	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Schee	nter Grand Total of Part C on Schedule I, Detailed Summary Page, S			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	nme of Filing Committee or Candidate				Reporting Period						
Pennsylvania Justice & Public Safety PA	AC .		Fron	n:	1/1/2	019 T e) :	10/21/2019			
				D/	ATE			AMOUNT			
Full Name of Contributor				мо	DAY	YEAR	\$	1,000,000.00			
George Soros							*	1,000,000.00			
Mailing Address 250 West 55th Street C1				7	17	2019					
City New York	State	Zip Code (Plus	s 4)]	-,						
	NY	10019									
Employer Name Soros Fund Manageme	ent			Occupation Philanthropist/Chair							
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip	Code (Plus 4)			
Enter Grand Total of Part C on Scheo	Section	on 3.		Γ		PAGE TOTAL					
							\$	1,000,000.00			

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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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									
Pennsylvania Justice & Public Safety PAC	From:	<u>1/1/2019</u> To:	<u>10/21/2019</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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)	\$	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	me of Filing Committee or Candidate				Reporting Period					
			From:			То:				
	Full Name of Contributors					AMOUNT				
Full Name of Contributor				DAY	YEAR					
Mailing Address		_				 		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:		•	•			•				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.			iled Sum	mary Pag	je,		PAGE TOTAL			
	ction 2.					\$	(0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:	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	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reportir	ng Period						
Pennsylvania Justice & Public Safety PA	AC		From	<u>1/</u>	1/2019	То:	10/21/2019			
				DATE			AMOUNT			
To Whom Paid			МО	DAY	YEAR					
Sourced Strategies LLC										
Mailing Address 819 East 64th Stree	t 103		8	6	2019	\$	7,500.00			
City Indianapolis	State	Zip Code (Plus 4)	Description of Expenditure							
	IN	46220		Research re County			Stollsteimer,			
To Whom Paid			мо	DAY	YEAR					
Sourced Strategies LLC			110		12/110					
Mailing Address 819 East 64th Stree	t 103		8	8	2019	\$	3,750.00			
City Indianapolis State Zip Code (Plus 4)				Description of Expenditure						
IN 46220				In-Kind Research to Friends of Jack Stollsteimer, Delaware County Democratic Party						
To Whom Paid			МО	DAY	YEAR					
Sourced Strategies LLC						_				
Mailing Address 819 East 64th Street 103				8	2019	\$	3,750.00			
City Indianapolis	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
	IN	46220		Research re County			Stollsteimer,			
To Whom Paid			мо	DAY	YEAR					
VR Research										
Mailing Address PO Box 72451			8	8	2019	\$	28,574.70			
City Oakland	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
	CA	94612	Researc	h						
To Whom Paid			МО	DAY	YEAR					
VR Research										
Mailing Address PO Box 72451			8	8	2019	\$	13,448.25			
City Oakland	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
	CA	94612	Researc	h						
To Whom Paid			мо	DAY	YEAR					
Amalgamated Bank										
Mailing Address 1825 K St NW			8	20	2019	\$	15.00			
City Washington State Zip Code (Plus 4)				tion of Exp	enditure					
	DC 20006									

To Whom Paid			МО	DAY	YEAR			
Amalgamated Bank			MO	DA1	ILAK			
Mailing Address 1825 K St NW			9	16	2019	\$	2.25	
City Washington	State	Zip Code (Plus 4)	Description of Expenditure					
	Bank Fe	es						
To Whom Paid				DAY	YEAR			
GBAO STRATEGIES			МО		1 = Alix			
Mailing Address 1701 K Street North	west Suite 600		10	21	2019	\$	38,900.00	
City Washington	State	Zip Code (Plus 4)	Description of Expenditure					
DC 20006				In-Kind Polling to Friends of Jack Stollsteimer, Delaware County Democratic Party				
							PAGE TOTAL	
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						\$	95,940.20	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
Pennsylvania Justice & Public Safety PAC			From:	<u>1/1/2019</u> To:			10/21/2019		
				DATE			Outstanding Balance of Debt		
Name of Creditor Berlin Rosen, Ltd				мо	DAY	YEAR			
Mailing Address 15 Maiden Lane Suite 1600				10	18	2019	\$	36,149.71	
City New York	State	Zip Code (P	lus 4) Description of Debt						
NY 10038 In-Kind Literature and F Stollsteimer							ostage to Friends of Jack		
								PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	36,149.71	