

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 :		20150344		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: ABNEY, AERION FRIENDS OF												
Street Address: 1334 COLUMBUS AVE												
City: PITTSBURGH						State: PA			Zip Code: 15233			
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.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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				
						11	5	2019				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		12	31	2018		12	31	2019				
A. Amount Brought Forward From Last Report						\$ 960.12						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 4,027.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 4,987.12						
D. Total Expenditures (From Schedule III)						\$ 242.10						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 4,745.02						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
ABNEY, AERION FRIENDS OF	From: <u>12/31/2018</u> To: <u>12/31/2019</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 977.00

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)	\$ 1,750.00
TOTAL for the Reporting Period (2)	\$ 1,750.00

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)	\$ 1,300.00
TOTAL for the Reporting Period (3)	\$ 1,300.00

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.)	\$ 4,027.00
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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 ABNEY, AERION FRIENDS OF	Reporting Period From: <u>12/31/2018</u> To: <u>12/31/2019</u>
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DATE	AMOUNT
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Full Name of Contributor Wesley Lyons				MO	DAY	YEAR	\$ 150.00
Mailing Address 4064 Overview Drive				9	12	2019	
City Canonsburg	State PA	Zip Code (Plus 4) 15317					

Full Name of Contributor Wesley Lyons			MO	DAY	YEAR	\$ 100.00
Mailing Address 4064 Overview Drive			8	26	2019	
City Canonsburg	State PA	Zip Code (Plus 4) 15317				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Jermaine Cuyler							
Mailing Address 613 Suismon St				10	2	2019	
City	Pittsburgh	State	Zip Code (Plus 4)				
		PA	15212				

Full Name of Contributor Philip Mack				MO	DAY	YEAR	\$ 100.00
Mailing Address 174 Edgemoade Dr				10	14	2019	
City Monroeville	State PA	Zip Code (Plus 4) 15146					

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Aaron Cook							
Mailing Address 604 Woodward Ave				10	25	2019	
City	McKees Rocks	State	Zip Code (Plus 4)				
		PA	15136				

Full Name of Contributor Mason Herron			MO	DAY	YEAR	\$ 150.00
Mailing Address 1980 Kettering Blvd			11	16	2019	
City San Diego	State CA	Zip Code (Plus 4) 92101				

Full Name of Contributor Stanchelle Patterson			MO	DAY	YEAR	\$ 100.00
Mailing Address 914 Union station prkwy			11	19	2019	
City Lewisville	State TX	Zip Code (Plus 4) 75057				

Full Name of Contributor NaTisha Washington			MO	DAY	YEAR	\$ 100.00
Mailing Address 235 Edgewood Ave			11	28	2019	
City Pittsburgh	State PA	Zip Code (Plus 4) 15218				

Full Name of Contributor Michael Quigley			MO	DAY	YEAR	\$ 150.00
Mailing Address 1615 Centre Ave			12	1	2019	
City Pittsburgh	State PA	Zip Code (Plus 4) 15219				

Full Name of Contributor Atiya Abdelmalik			MO	DAY	YEAR	\$ 150.00
Mailing Address 4450 Tropea Way			12	5	2019	
City Jacksonville	State FL	Zip Code (Plus 4) 32246				

Full Name of Contributor Nathaniel Hanson			MO	DAY	YEAR	\$ 150.00
Mailing Address 814 YORK St			12	14	2019	
City Oakland	State CA	Zip Code (Plus 4) 94610				

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
Alfonzo Washington						
Mailing Address			12	31	2019	
209 Vivie Way						
City	State	Zip Code (Plus 4)				
Stockbridge	GA	30281				

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

PAGE TOTAL
\$ 1,750.00

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

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 ABNEY, AERION FRIENDS OF	Reporting Period From: <u>12/31/2018</u> To: <u>12/31/2019</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Kelvin Johnson							
Mailing Address 721 N. 1st St				11	12	2019	\$ 1,000.00
City Minneapolis	State MN	Zip Code (Plus 4) 55401					
Employer Name LasX				Occupation Vice President			
Employer Mailing Address/Principal Place of Business 4444 centerville Rd			City St. Paul		State MN	Zip Code (Plus 4) 55127	

Full Name of Contributor				MO	DAY	YEAR	
Judy-April Oparaji							
Mailing Address 820 Sumner Dr				9	20	2019	\$ 100.00
City Fayetteville	State NC	Zip Code (Plus 4) 28303					
Employer Name Hospital				Occupation Nurse			
Employer Mailing Address/Principal Place of Business 555 way street			City Cleveland		State OH	Zip Code (Plus 4) 44106	

Full Name of Contributor				MO	DAY	YEAR	
Judy-April Oparaji							
Mailing Address 820 Sumner Dr				9	27	2019	\$ 100.00
City Fayetteville	State NC	Zip Code (Plus 4) 28303					
Employer Name Hospital				Occupation Nurse			
Employer Mailing Address/Principal Place of Business 555 way street			City Cleveland		State OH	Zip Code (Plus 4) 44106	

Full Name of Contributor Judy-April Oparaji				MO	DAY	YEAR	\$ 100.00
Mailing Address 820 Sumner Dr				9	30	2019	
City Fayetteville	State NC	Zip Code (Plus 4) 28303					
Employer Name Hospital				Occupation Nurse			
Employer Mailing Address/Principal Place of Business 555 way street			City Cleveland		State OH	Zip Code (Plus 4) 44106	

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

PAGE TOTAL
\$ 1,300.00

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		Reporting Period	
ABNEY, AERION FRIENDS OF		From: <u>12/31/2018</u> To: <u>12/31/2019</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)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - 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.)			\$ 0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$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	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
ABNEY, AERION FRIENDS OF	From <u>12/31/2018</u> To: <u>12/31/2019</u>

DATE				AMOUNT		
To Whom Paid Facebook			MO	DAY	YEAR	\$ 50.00
Mailing Address 1 Hacker Way			10	1	2019	
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure Ad			
To Whom Paid NationBuilder			MO	DAY	YEAR	\$ 28.70
Mailing Address 520 S. Grand Ave			10	9	2019	
City Los Angeles	State CA	Zip Code (Plus 4) 90071	Description of Expenditure Website			
To Whom Paid NationBuilder			MO	DAY	YEAR	\$ 28.70
Mailing Address 520 S. Grand Ave			11	12	2019	
City Los Angeles	State CA	Zip Code (Plus 4) 90071	Description of Expenditure Website			
To Whom Paid NationBuilder			MO	DAY	YEAR	\$ 28.70
Mailing Address 520 S. Grand Ave			12	9	2019	
City Los Angeles	State CA	Zip Code (Plus 4) 90071	Description of Expenditure Website			
To Whom Paid USPS			MO	DAY	YEAR	\$ 106.00
Mailing Address 101 California Kirkbride			10	28	2019	
City Pittsburgh	State PA	Zip Code (Plus 4) 15233	Description of Expenditure P.O. Box			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 242.10

