#### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

| Filer Identificati<br>Number :           | on 7900                         | 0263       |                          |      | Repor       |          | CAND               | IDATE     |             | СОМ        | <b>4ITTEE</b>      | ✓              | LOBE         | YIST     |                |
|--|---------------------------------|------------|--------------------------|------|-------------|----------|--------------------|-----------|-------------|------------|--------------------|----------------|--------------|----------|----------------|
| Name of Filing C                         | Committee, Candid               | late or L  | obbyist:                 | В    | BERKS       | CO DI    | ЕМ СОМ             |           |             |            |                    | -              |              |          |                |
| Street Address:                          | 434 WALNUT                      | ST         |                          |      |             |          |                    |           |             |            |                    |                |              |          |                |
| City:                                    | READING                         |            |                          |      |             |          | State:             | PA        |             |            | Zip Cod            | <b>le:</b> 19  | 9601-0       | 000      |                |
| TYPE OF<br>REPORT                        | 6TH TUESDAY<br>PRE-PRIMARY      | 1.         | 2ND FRIDAY PR<br>PRIMARY | E-   | 2.          | 30 DA    |                    | POST-     | 3. <b>X</b> |            | AMENDM<br>REPORT   |                | Yes          | No       | <b>~</b>       |
| (place X to<br>the right of              | 6TH TUESDAY<br>PRE-ELECTION     | 4.         | 2ND FRIDAY PRELECTION    | RE-  | 5.          | 30 DA    |                    | POST-     | 6.          |            | TERMINA<br>REPORT  |                | Yes          | No       | <b>~</b>       |
| report type)                             | ANNUAL REPORT                   | 7.         | <b>Year</b> 2020         |      |             |          | NG METH<br>CHECK C |           |             |            | PAPER              |                | $\checkmark$ | DISKE    | ГТЕ            |
| Name of Office S                         | Sought by Candida               | rte:       | •                        |      |             |          | DATE (             | OF ELE    | CTIC        | N          | District<br>Number | Office<br>Code | Pari         | ty Code  | County<br>Code |
|  |                                 |            |                          |      |             |          | МО                 | DAY       | YI          | AR         | -1                 | 10000          | DEM          |          | 06             |
|  |                                 |            |                          |      |             |          | 1:                 | 1         | 3           | 2020       |                    | (SEE IN        | ISTRUCTIO    | NS FOR C | ODES)          |
|  | Receipts and                    | МО         | DAY YEA                  | \R   |             |          | МО                 | DAY       | ΥI          | AR         | FO                 | R OFFI         | CE USE       | ONLY     |                |
| Expenditures                             |                                 |            | 5 19                     | 20   | 20 <b>T</b> | О.       | (                  | 5         | 22          | 2020       |                    |                |              |          |                |
| A. Amount Bro                            | ught Forward Fro                | m Last R   | eport                    |      |             | \$       |                    |           | 20,4        | 126.57     |                    |                |              |          |                |
| B. Total Moneta                          | ary Contributions               | And Rec    | eipts (From Sch          | ed   | ule I)      | \$       |                    |           | 2,8         | 355.28     |                    |                |              |          |                |
| C. Total Funds                           | Available (Sum O                | f Lines A  | and B)                   |      |             | \$       |                    |           | 23,2        | 281.85     |                    |                |              |          |                |
| D. Total Expend                          | ditures (From Sch               | edule II   | I)                       |      |             | \$       |                    |           | 6,8         | 90.04      |                    |                |              |          |                |
| E. Ending Cash                           | Balance (Subtrac                | t Line D   | From Line C)             |      |             | \$       |                    |           | 16,3        | 91.81      |                    |                |              |          |                |
| F. Value Of In-                          | Kind Contribution               | s Receiv   | ed (From Sched           | ule  | e II)       | \$       |                    |           |             | 59.90      |                    |                |              |          |                |
| G. Unpaid Debt                           | s And Obligations               | (From S    | Schedule IV)             |      |             | \$       |                    |           |             | 0.00       |                    |                |              |          |                |
|  |                                 |            | AF                       | FΙ   | DAVI        | T SE     | CTION              |           |             |            |                    |                |              |          |                |
| PART I - If this is                      | s a Committee rep               | ort, trea  | surer sign here          | . If | this is     | a Car    | ndidate r          | eport,    | candi       | date sig   | ın here.           |                |              |          |                |
| I swear (or affirm) correct and comple   | ) that this report, inc<br>ete. | luding the | e attached schedul       | es   | filed on    | paper    | or by elec         | tronic m  | edium       | , are to t | he best o          | f my kno       | wledge a     | nd belie | f , true       |
| Sworn to and subs                        | cribed before me thi            | s          | 20                       |      |             |          |                    |           | 5           | ignature   | of Perso           | n Submit       | ting Rep     | ort      |                |
|  | Signati                         |            | _                        |      |             | <u>-</u> |                    |           |             |            | Prin               | ted Nam        | e            |          |                |
| My Commission Ex                         | _                               |            |                          |      |             |          |                    |           |             |            | Ema                | il             |              |          |                |
|  | МО                              | D          | AY Y                     | R    |             |          |                    | Ar        | ea Cod      | le         | Daytim             | e Telepi       | none Nui     | nber     |                |
| Part II- If this is                      | a report of a can               | didate's   | authorized Com           | ımi  | ittee, C    | andid    | ate shall          | sign h    | ere.        |            |                    |                |              |          |                |
| I swear (or affirm)<br>No 320) as amende | that to the best of ed.         | my knowl   | edge and belief th       | is p | oolitical   | comm     | ittee has          | not viola | ted an      | y provis   | ions of the        | e act of J     | une 3,19     | 37 (P.L. | 1333,          |
| Sworn to and subsc                       | ribed before me this            |            |                          |      |             |          |                    | -         |             | s          | ignature o         | of Candid      | ate          |          |                |
|  | day of<br>                      |            |                          |      |             | _        |                    |           |             |            | Drints             | d Name         |              |          |                |
|  | Signature                       |            |                          |      |             | _        |                    |           |             |            |                    |                |              |          |                |
| My Commission Exp                        | _                               |            |                          |      |             |          |                    |           |             |            | Ema                | il             |              |          |                |
|  | МО                              | D          | AY Y                     | ′R   |             | _        |                    | Area      | Code        |            | Da                 | aytime T       | elephon      | e Numbe  | er             |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period        |              |           |
|--|-----------|-----------------|--------------|-----------|
| BERKS CO DEM COM   | From:     | <u>5/19/202</u> | <u>0</u> To: | 6/22/2020 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |                 |              |           |
| TOTAL for the Reporting  | ) Period  | (1)             | \$           | 510.00    |
| 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)   |           |                 | \$           | 260.00    |
| TOTAL for the Reporting  | ) Period  | (2)             | \$           | 260.00    |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |                 |              |           |
| Contributions Received From Political Committees (Part C)  |           |                 | \$           | 980.28    |
| All Other Contributions (Part D)   |           |                 | \$           | 1,105.00  |
| TOTAL for the Reporting  | Period    | (3)             | \$           | 2,085.28  |
| 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 |           |                 | \$           | 2,855.28  |

#### **PART A**

### CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

|                        | this Part to itemize onl with an aggregate value |                   | \$2 |     | ) in the |      |    |            |
|------------------------|--|-------------------|-----|-----|----------|------|----|------------|
|                        |  |                   |     | om: | renou    | To:  |    |            |
|                        |  |                   |     |     | DATE     |      |    | AMOUNT     |
| Full Name of Contribut | ing Committee                                    |                   |     | МО  | DAY      | YEAR |    |            |
| Mailing Address        |  |                   |     |     |          |      | \$ | 0.00       |
| City                   | State  | Zip Code (Plus 4) | )   |     |          |      |    |            |
|                        | <b>!</b>   | <b>I</b>          | !   |     | <u> </u> |      |    | DAGE TOTAL |

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

**PAGE TOTAL**\$ 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 Committee or Candida          | nte                |                                   | Rep  | orting P | eriod        |         |            |           |
|--|--------------------|-----------------------------------|------|----------|--------------|---------|------------|-----------|
| BERKS CO DEM COM                             |                    |                                   | Fron | m:       | <u>5/19/</u> | 2020 To | <b>)</b> : | 6/22/2020 |
|  |                    |                                   | ·    |          | DATE         |         | Α          | MOUNT     |
| Full Name of Contributor Jacob Botte         |                    |                                   |      | МО       | DAY          | YEAR    |            |           |
| Mailing Address 37 S. 22nd St.               |                    |                                   |      |          |              |         | \$<br>\$   | 100.00    |
| <b>City</b> Pottsville                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17901 | )    | 6        | 6            | 2020    |            |           |
| Full Name of Contributor  Zane Szurgot       |                    |                                   |      | МО       | DAY          | YEAR    |            |           |
| Mailing Address 146 Spook Lane               | State              | Zip Code (Plus 4)                 |      | 5        | 29           | 2020    | \$         | 25.00     |
| <b>City</b> Fleetwood                        | PA                 | 19522                             |      |          |              |         |            |           |
| <b>Full Name of Contributor</b> Zane Szurgot |                    |                                   |      | МО       | DAY          | YEAR    |            |           |
| Mailing Address 146 Spook Lane               |                    |                                   |      |          |              |         | <b>\$</b>  | 10.00     |
| <b>City</b> Fleetwood                        | State<br>PA        | <b>Zip Code (Plus 4)</b><br>19522 | ,    | 5        | 28           | 2020    |            |           |
| <b>Full Name of Contributor</b> Zane Szurgot |                    |                                   |      | мо       | DAY          | YEAR    |            |           |
| Mailing Address 146 Spook Lane               | Tour .             | Tri- 0- 1- (Ph 4)                 |      | 6        | 20           | 2020    | \$<br>\$   | 25.00     |
| <b>City</b> Fleetwood                        | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19522 |      |          |              |         |            |           |
| <b>Full Name of Contributor</b> Debbie Noel  |                    |                                   |      | МО       | DAY          | YEAR    |            |           |
| Mailing Address 277 Timber Ridge             | Rd                 |                                   |      |          |              |         | \$         | 50.00     |
| <b>City</b> Morgantown                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19543 |      | 6        | 22           | 2020    |            |           |

| Full Name of Contributor  Debbie Noel |       |                   |   | DAY | YEAR |                 |
|---------------------------------------|-------|-------------------|---|-----|------|-----------------|
| Mailing Address 277 Timber Ridg       | e Rd  |                   |   |     |      | <b>\$</b> 50.00 |
| City Morgantown                       | State | Zip Code (Plus 4) | 5 | 22  | 2020 |                 |
|                                       | PA    | 19543             |   |     |      |                 |

**PAGE TOTAL**\$ 260.00

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                       |                     |                          | Reporting                 | g Period   |        |      |           |            |
|---|---------------------|--------------------------|---------------------------|------------|--------|------|-----------|------------|
| BERKS CO DEM COM  |                     |                          | From:                     | <u>5/1</u> | 9/2020 | То:  | 6/22/2020 |            |
|   |                     |                          |                           | DA         | TE     |      | А         | MOUNT      |
| Full Name of Contributing Committee LAMAR FOLEY FOR PA 2020 |                     |                          |                           | мо         | DAY    | YEAR |           |            |
| Mailing Address 386 WATER ST                                |                     |                          |                           | _          |        | 2026 | \$        | 885.00     |
| City OLEY   | <b>State</b><br>PA  | <b>Zip Cod</b> 19547-    | <b>e (Plus 4)</b><br>8760 | 5          | 26     | 2020 | )         |            |
| Full Name of Contributing Committee LAMAR FOLEY FOR PA 2020 |                     |                          |                           | МО         | DAY    | YEAR |           |            |
| Mailing Address 386 WATER ST                                |                     |                          |                           | _          | _      |      | \$        | 95.28      |
| City OLEY   | <b>State</b><br>PA  | <b>Zip Cod</b><br>19547- | <b>e (Plus 4)</b><br>8760 | 6          | 6      | 2020 | )         |            |
|   |                     |                          |                           |            |        |      |           | PAGE TOTAL |
| Enter Grand Total of Part C on Scho                         | edule I, Detailed S | ummary Pa                | age, Sectio               | n 3.       |        |      | \$        | 980.28     |

## 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 Cor   | nmittee or Candidate   |                     |               | Rep     | orting Pe | riod          |               |           |                          |
|----------------------|------------------------|---------------------|---------------|---------|-----------|---------------|---------------|-----------|--------------------------|
| BERKS CO DEM (       | COM                    |                     |               | Fror    | m:        | <u>5/19/2</u> | <u>020</u> To | :         | 6/22/2020                |
|                      |                        |                     |               |         | D/        | ATE           |               | АМО       | DUNT                     |
| Full Name of Cont    | ributor                |                     |               |         | мо        | DAY           | YEAR          |           |                          |
| Richard G. Horton    | l                      |                     |               |         | 140       | DAI           | ILAK          |           |                          |
| Mailing<br>Address   | 10 Kern Road           |                     |               |         |           |               |               | \$        | 505.00                   |
| City Kutztown        |                        | State               | Zip Code (Plu | 5 4)    | 5         | 29            | 2020          |           |                          |
|                      |                        | PA                  | 19530         |         |           |               |               |           |                          |
| Employer Name        | Retired                |                     |               |         | Occupat   | ion R         | letired       |           |                          |
| Employer Mailing A   | Address/Principal Plac | e of                | City          |         |           | State         |               | Zip Code  | (Plus 4)                 |
| 10 Kern Road         |                        |                     | Kutztowi      | า       |           | PA            |               | 19530     |                          |
| Full Name of Control | ributor                |                     |               |         | мо        | DAY           | YEAR          |           |                          |
| Mailing<br>Address   | 377 Golf Course Rd     |                     |               |         |           |               |               | \$        | 600.00                   |
| City Birdsboro       |                        | State               | Zip Code (Plu | 5 4)    | 6         | 20            | 2020          |           |                          |
|                      |                        | PA                  | 19508         |         |           |               |               |           |                          |
| Employer Name        | Graham Company         |                     |               |         | Occupat   | i <b>on</b>   | afety C       | onsultant |                          |
| Employer Mailing A   | Address/Principal Plac | e of                | City          |         |           | State         |               | Zip Code  | (Plus 4)                 |
| 1 Penn Square We     | est                    |                     | Philadelp     | hia     |           | PA            |               | 19102     |                          |
| Enter Grand Tota     | al of Part C on Sche   | dule I, Detailed Su | ummary Page,  | Section | on 3.     |               |               | PAG       | <b>GE TOTAL</b> 1,105.00 |
|                      |                        |                     |               |         |           |               |               |           |                          |

## 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               |                   | Repor   | ting Perio | od  |      |    |          |
|-------------------------------|-------------------------|-------------------|---------|------------|-----|------|----|----------|
|                               |                         |                   | From:   |            |     | To:  |    |          |
|                               |                         |                   | •       | D          | ATE |      | AI | MOUNT    |
| 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          |     |      | PA | GE TOTAL |
| - Inc. Statia Total of Fall E | Jonedane 1, Betanet     | . Jammar y r uge, | 500.011 |            |     |      | \$ | 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 Perio | od                          |                  |
|--|-----------------|-----------------------------|------------------|
| BERKS CO DEM COM   | From:           | <u>5/19/2020</u> <b>To:</b> | <u>6/22/2020</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P  | ER CONTRIBUTOR  |                             |                  |
| TOTAL for the Reporting Pe   | eriod (1)       | \$                          | 22.01            |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR   | T F)            |                             |                  |
| TOTAL for the Reporting Pe   | eriod (2)       | \$                          | 37.89            |
| 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, |                 | \$                          | 59.90            |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

| Name of Filing Committee or Ca   | andidate               |                                   | Reporting | Period        |                  |           |                   |
|--|------------------------|-----------------------------------|-----------|---------------|------------------|-----------|-------------------|
| BERKS CO DEM COM   |                        |                                   | From:     | <u>5/</u>     | 19/2020          | To:       | 6/22/2020         |
|  |                        | •                                 |           | DATE          |                  |           | AMOUNT            |
| <b>Full Name of Contributor</b><br>Bernice Hines Corbit                                |                        |                                   | мо        | DAY           | YEAR             |           |                   |
| Mailing Address 54 Sawgra  | ass Drive              |                                   | 5         | 19            | 2020             | \$        | 17.98             |
| <b>City</b> Reading  | State<br>PA            | <b>Zip Code (Plus 4)</b><br>19606 |           |               |                  |           |                   |
|  | •                      | •                                 |           | •             | •                | •         |                   |
| Description of Contribution:   | Office Supplies        |                                   |           |               |                  |           |                   |
| Full Name of Contributor   | Office Supplies        |                                   | МО        | DAY           | YEAR             |           |                   |
| Full Name of Contributor Bernice Hines Corbit  Mailing Address 54 Sawgra               |                        |                                   | <b>MO</b> | <b>DAY</b> 15 | <b>YEAR</b> 2020 | \$        | 19.91             |
| Full Name of Contributor Bernice Hines Corbit  |                        | Zip Code (Plus 4)                 | 6         |               |                  | <b>\$</b> | 19.91             |
| Full Name of Contributor Bernice Hines Corbit  Mailing Address 54 Sawgra               | ass Drive              | <b>Zip Code (Plus 4)</b><br>19606 | 6         |               |                  | \$        | 19.91             |
| Full Name of Contributor Bernice Hines Corbit  Mailing Address 54 Sawgra  City Reading | ass Drive              |                                   | 6         |               |                  | \$        | 19.91             |
| Full Name of Contributor Bernice Hines Corbit  Mailing Address 54 Sawgra  City Reading | State PA First Aid Kit | 19606                             | 6         | 15            | 2020             | \$        | 19.91  PAGE TOTAL |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate                          |             |         |            |         | 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 Plac<br>Business            | ce of       | City    |            | State   |        | Zip<br>4) | Code(Plus | Descr | iption | of Contribution        |
| Enter Grand Total of Part G on Sch<br>Summary Page, Section 3. | edule II, I | in-Kind | Contributi | ons De  | etaile | ed        |           |       |        | <b>PAGE TOTAL</b> 0.00 |

### SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Period |           |     |           |  |
|---------------------------------------|------------------|-----------|-----|-----------|--|
| BERKS CO DEM COM                      | From             | 5/19/2020 | То: | 6/22/2020 |  |

|  |                    |                                   |   | DATE                       |      |    | AMOUNT |
|--|--------------------|-----------------------------------|---|----------------------------|------|----|--------|
| <b>To Whom Paid</b> Bernice Hines Corbit                 | мо                 | DAY                               | YEAR                                    |                            |      |    |        |
| Mailing Address 54 Sawgrass                              | s Road             |                                   | 6                                       | 1                          | 2020 | \$ | 125.64 |
| <b>City</b> Reading                                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 19606    | <b>Descrip</b><br>Biden S               | otion of Exp<br>Signs      |      |    |        |
| To Whom Paid United States Postal Service                |                    |                                   |   | DAY                        | YEAR |    |        |
| Mailing Address 2100 N. 13th St.                         |                    |                                   |   | 1                          | 2020 | \$ | 95.28  |
| <b>City</b> Reading                                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19612 | Description of Expenditure Bulk Mailing |                            |      |    |        |
| <b>To Whom Paid</b> Goodville Mutual Casualty Comp       | pany               |                                   | МО                                      | DAY                        | YEAR |    |        |
| Mailing Address 625 West Ma                              | ain Street         |                                   | 6                                       | 1                          | 2020 | \$ | 141.00 |
| City New Holland PA    State   Zip Code (Plus 4)   17557 |                    |                                   |   | otion of Exp<br>nce Premiu |      |    |        |
| To Whom Paid United States Postal Service                |                    |                                   | МО                                      | DAY                        | YEAR |    |        |
| Mailing Address 2100 N. 13th St.                         |                    |                                   | 5                                       | 26                         | 2020 | \$ | 885.00 |
| <b>City</b> Reading                                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19612 | Description of Expenditure Bulk Mailing |                            |      |    |        |
| <b>To Whom Paid</b><br>Mailchimp                         |                    |                                   | МО                                      | DAY                        | YEAR |    |        |
| Mailing Address 675 Ponce D                              | e Leon Ave.        |                                   | 5                                       | 19                         | 2020 | \$ | 21.19  |
| City Atlanta   | <b>State</b><br>GA | <b>Zip Code (Plus 4)</b><br>30308 | Description of Expenditure Email        |                            |      |    |        |
|  |                    |                                   |   |                            |      |    |        |

|  |                      |                   |                            |               |                  | PA | GE 13  |
|--|----------------------|-------------------|----------------------------|---------------|------------------|----|--------|
| <b>To Whom Paid</b><br>Square Space            |                      |                   | мо                         | DAY           | YEAR             |    |        |
| Mailing Address 225 Vario                      | k St., 12th Flr      |                   | 6                          | 1             | 2020             | \$ | 27.56  |
| City New York                                  | State                | Zip Code (Plus 4) | Descrir                    | tion of Exp   | enditure         | l  |        |
| - New TOTK                                     | NY 10014             |                   |                            |               | , ciiaitai c     |    |        |
| To Whom Paid Comcast                           |                      |                   |                            | DAY           | YEAR             |    |        |
| Mailing Address 1701 JFK Blvd.                 |                      |                   |                            | 1             | 2020             | \$ | 162.11 |
| City Philadelphia State Zip Code (Plus 4)      |                      |                   |                            | tion of Exp   | enditure         |    |        |
|  | PA                   | 19103             | Utilities                  |               |                  |    |        |
| <b>To Whom Paid</b> Crawford County Democratic | Party                |                   | МО                         | DAY           | YEAR             |    |        |
| Mailing Address 766 Braw                       | ley Avenue           |                   | 6                          | 2             | 2020             | \$ | 215.50 |
| City Meadville                                 | State                | Zip Code (Plus 4) | Descrip                    | tion of Exp   | enditure         |    |        |
|  | PA                   | 16335             | Yard Signs                 |               |                  |    |        |
| <b>To Whom Paid</b><br>GetThru                 |                      |                   | МО                         | DAY           | YEAR             |    |        |
| Mailing Address 1330 Broadway, 3rd Floor       |                      |                   | 6                          | 15            | 2020             | \$ | 100.00 |
| City Oakland                                   | State                | Zip Code (Plus 4) | Descrip                    | tion of Exp   | enditure         | •  |        |
|  | CA                   | 94612             | Texting Services           |               |                  |    |        |
| To Whom Paid ActBlue                           |                      |                   |                            | DAY           | YEAR             |    |        |
| Mailing Address P. O. Box 441146               |                      |                   |                            | 8             | 2020             | \$ | 12.12  |
| City Somerville State Zip Code (Plus           |                      |                   | Description of Expenditure |               |                  |    |        |
|  | MA                   | 02144             | Fees and Charges           |               |                  |    |        |
|  | To Whom Paid Staples |                   |                            | i             |                  | ı  |        |
|  |                      |                   | мо                         | DAY           | YEAR             |    |        |
| Staples  | rkiomen Ave          |                   | <b>MO</b> 6                | <b>DAY</b> 11 | <b>YEAR</b> 2020 | \$ | 193.96 |
| Staples  | rkiomen Ave<br>State | Zip Code (Plus 4) | 6                          |               | 2020             |    | 193.96 |

| City Reading  State PA  19604  PA  Description of Expenditure Reimburse for stamps  To Whom Paid Helping Harvest  Mo DAY  YEAR  Mailing Address  117 Morgan Dr  City Reading  State Zip Code (Plus 4) 19608  Description of Expenditure Charitable contributions  To Whom Paid Vantiv  Mo DAY  YEAR  To Whom Paid Vantiv  Mo DAY  YEAR  Mailing Address  8500 Governors Hill Dr  City Symmes Townshipp  State OH  OH  To Whom Paid GetThru  Mo DAY  YEAR  Description of Expenditure Charitable contributions  To Whom Paid GetThru  Mo DAY  YEAR  Description of Expenditure Monthly fee  To Whom Paid GetThru  Mo DAY  YEAR  Monthly fee  | Zelda Yoder  Mailing Address             | 1601 Lorraine                 |                    |                                   | мо                         | DAY                         | YEAR |             |        |
|---|--|-------------------------------|--------------------|-----------------------------------|----------------------------|-----------------------------|------|-------------|--------|
| City Reading State PA State PA  |  | 1601 Lorraine                 |                    |                                   |                            |                             |      |             |        |
| To Whom Paid Helping Harvest  Mo DAY YEAR  Mailing Address 117 Morgan Dr  City Reading State PA 19608  To Whom Paid Vantiv  To Whom Paid Vantiv  To Whom Paid Vantiv  To Whom Paid Vantiv  Mo DAY YEAR  Description of Expenditure Charitable contributions  Mo DAY YEAR  Aliang Address 8500 Governors Hill Dr  Find Whom Paid Vantiv  To Whom Paid Vantiv  Mo DAY YEAR  Aliang Address 8500 Governors Hill Dr  Find Whom Paid GetThru  Mo DAY YEAR  Aliang Address 1330 Broadway, 3rd Floor  | <b>City</b> Reading                      | Mailing Address 1601 Lorraine |                    |                                   |                            |                             | 2020 | \$          | 55.00  |
| Helping Harvest  Mailing Address 117 Morgan Dr  City Reading State PA   |  |                               |                    |                                   |                            |                             |      |             |        |
| City Reading State PA State 19608   Description of Expenditure Charitable contributions    To Whom Paid Vantiv   Mo DAY   YEAR    Mailing Address   8500 Governors Hill Dr   6   9   2020   \$  City Symmes Townshipp   State OH   45249   Description of Expenditure Monthly fee    To Whom Paid GetThru   Mo DAY   YEAR    Mo DAY   YEAR   YEAR |  |                               |                    |                                   | мо                         | DAY                         | YEAR |             |        |
| To Whom Paid Vantiv  Mo DAY YEAR  Moling Address 8500 Governors Hill Dr  City Symmes Townshipp  State OH  OH  OH  To Whom Paid GetThru  Mo DAY  YEAR  Zip Code (Plus 4) 45249  Monthly fee  Mo DAY  YEAR  At 2249  Monthly fee  To Whom Paid GetThru  Mo DAY  YEAR  Molling Address 1330 Broadway, 3rd Floor  | Mailing Address 117 Morgan Dr            |                               |                    |                                   | 6                          | 8                           | 2020 | \$          | 775.00 |
| Vantiv  Mailing Address 8500 Governors Hill Dr  State OH ADDRESS Monthly fee  City Symmes Townshipp  State OH ADDRESS Monthly fee  City Symmes Townshipp  To Whom Paid GetThru  Mailing Address 1330 Broadway, 3rd Floor  | <b>City</b> Reading                      |                               |                    |                                   |                            |                             |      |             |        |
| City Symmes Townshipp State OH  |  |                               |                    |                                   | МО                         | DAY                         | YEAR |             |        |
| To Whom Paid GetThru  Mo DAY YEAR  Mailing Address 1330 Broadway, 3rd Floor  A 5249  Monthly fee  To Whom Paid GetThru  Mo DAY YEAR  6 15 2020 \$   | Mailing Address                          | 8500 Governors Hill           | Dr                 |                                   | 6 9 2020 \$                |                             |      |             | 27.94  |
| GetThru  Mo DAY YEAR  Mailing Address 1330 Broadway, 3rd Floor 6 15 2020 \$   | <b>City</b> Symmes To                    | ownshipp                      |                    |                                   |                            |                             |      |             |        |
| 1330 Bloadway, Stuthon  |  |                               |                    |                                   | МО                         | DAY                         | YEAR |             |        |
| State State (State 4)   | Mailing Address 1330 Broadway, 3rd Floor |                               |                    | 6                                 | 15                         | 2020                        | \$   | 31.48       |        |
| City Oakland CA CA Description of Expenditure texting fees  | <b>City</b> Oakland                      |                               | <b>State</b><br>CA | <b>Zip Code (Plus 4)</b><br>94612 | Description of Expenditure |                             |      |             |        |
| To Whom Paid Hack Away at Hunger  MO DAY YEAR   |  |                               |                    |                                   | МО                         | DAY                         | YEAR |             |        |
| Mailing Address 11 Nancy Circle 6 15 2020 \$ 1  | Mailing Address 11 Nancy Circle          |                               |                    | 6                                 | 15                         | 2020                        | \$   | 100.00      |        |
|   | <b>City</b> Reading                      |                               | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19606 | 1                          | _                           |      | rvest event | :      |
| City Reading State Zip Code (Plus 4) Description of Expenditure   | To Whom Paid<br>United Labor Counc       | <u></u>                       | _                  | _                                 | мо                         | DAY                         | YEAR |             |        |
| City Reading State PA    Zip Code (Plus 4)   Description of Expenditure   | Mailing Address                          | 1251 N front St               |                    |                                   | 6                          | 15                          | 2020 | \$          | 120.00 |
| City Reading  State PA  2ip Code (Plus 4) 19606  Description of Expenditure sponsorship for Helping Harvest event  To Whom Paid United Labor Council  MO DAY YEAR  Mailing Address  | <b>City</b> Reading                      |                               | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19601 |                            | tion of Exp<br>rship for fu |      | 5           |        |

| To Whom Paid Mailchimp  |                            |                                   |   | DAY   | YEAR     |                            |          |
|---|----------------------------|-----------------------------------|---|---|----------|----------------------------|----------|
| Mailing Address 675 Ponce   | De Leon Ave.               |                                   | 6   | 14  | 2020     | \$                         | 19.07    |
| <b>City</b> Atlanta   | <b>State</b><br>GA         | <b>Zip Code (Plus 4)</b> 30308    | <b>Descrip</b><br>Monthly                         | otion of Exp                                    | enditure |                            |          |
| To Whom Paid<br>DAKS LLC  |                            |                                   | мо  | DAY   | YEAR     |                            |          |
| Mailing Address 1116 South St, PO Box 63627                             |                            |                                   | 6   | 16  | 2020     | \$                         | 3,708.00 |
| <b>City</b> Philadelphia  | PA Zip Code (Plus 4) 19147 |                                   |   | <b>Description of Expenditure</b> Office rental |          |                            |          |
| <b>To Whom Paid</b><br>Microsoft  |                            |                                   | МО  | DAY   | YEAR     |                            |          |
| Mailing Address One Microsoft Way                                       |                            |                                   | 6   | 17  | 2020     | \$                         | 74.19    |
| City Redmond  | <b>State</b><br>WA         | <b>Zip Code (Plus 4)</b><br>98052 | Description of Expenditure Microsoft office tools |   |          |                            |          |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. |                            |                                   |   |   | \$       | <b>PAGE TOTAL</b> 6,890.04 |          |