# **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 :	ion 2000	190			Repor Filed		CANDI	DATE		СОМІ	MITTEE	✓	LOB	BYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		AFT-PE	NNSY	LVANIA								-
Street Address:	3031 WALTO	N RD, BL	JILDING A	, STE :	340										
City:	PLYMOUTH MI	EETING					State:	PA			Zip Co	<b>de:</b> 19	462		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D. PRIM		POST-	3. <b>X</b>		AMENDI REPORT		Yes	No	) 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D. ELEC	AY F TION	POST-	6.		TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7.	<b>Year</b> 2020				FILING METHOD ( ) CHECK ONE				PAPER		$\checkmark$	DISK	TTE
Name of Office S	L Sought by Candida	te:					DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County
							мо	DAY	YE	AR					
							11		3	2020		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	1		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		5 19	20	020 7	Ю	6	2	22	2020					
A. Amount Bro	ught Forward Fror	n Last R	eport			\$		1	L47,2	233.95					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 775.28															
C. Total Funds Available (Sum Of Lines A and B) \$							L48,C	09.23							
D. Total Expen	ditures (From Sch	edule II	I)			\$	5			0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$		1	48,0	09.23	4				
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$				0.00	4				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		\$	5			0.00					
				AFF	IDAV	IT SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	If this i	s a Ca	ndidate re	eport, c	andio	date sig	gn here.				
I swear (or affirm correct and compl	) that this report, incl ete.	uding the	attached sc	hedules	s filed or	i paper	or by elect	ronic me	dium,	, are to t	the best o	of my knov	vledge	and bel	ief , true
Sworn to and subs	cribed before me this day of	5	20						s	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prir	ited Name			
My Commission E	-										Ema	il			
	МО	DA	AY	YR				Are	a Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, (	Candid	late shall	sign he	ere.						
I swear (or affirm) No 320) as amendo	that to the best of n ed.	ny knowle	edge and beli	ief this	political	comn	ittee has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	. 1333,
Sworn to and subso	ribed before me this day of		20							s	ignature	of Candida	ite		
											Printe	ed Name			
	. Signature					_					Ema	il			
My Commission Exp	oires					_									
	мо	DA	AY	YR		_		Area (	Code		D	aytime Te	elephor	e Numb	oer

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** AFT-PENNSYLVANIA From: <u>5/19/2020</u> **To:** <u>6/22/2020</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 775.28 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 775.28 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candidat	Name of Filing Committee or Candidate			Reporting Period					
				From: To:					
i					DATE		AMOUNT		
Full Name of Contributing Committee			мо		DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								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										
			Fror	From: To:						
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_						\$	0.00		
City	State	Zip Code (Plus 4	)							
								PAGE TOTAL		
Enter Grand Total of Part A on	\$	0.00								

# 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	Reporting Period						
			From:	То:						
				DA	TE		A	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 Sched	age, Sectio	n 3.			\$	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				Reporting Period					
From				om:			To:		
				DATE AMOUNT					
Full Name of Contributor				DAY	YEAR	\$	0.00		
State	Zip Code (Plu	s 4)							
•			Occupation						
ce of Business	City			State		Zip Code	(Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						<b>PAGE TOTAL</b> \$ 0.00			
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA From: DA MO State Zip Code (Plus 4) Coccupat ce of Business City	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To   DATE   MO DAY YEAR   State Zip Code (Plus 4) Image: Comparison of the second	From: To:   DATE AM   MO DAY YEAR   \$ MO DAY YEAR   State Zip Code (Plus 4) I I   Occupation Occupation I   ce of Business City State Zip Code   edule I, Detailed Summary Page, Section 3. PA		

## 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			Report	Reporting Period						
			From:	1: <b>To</b> :						
				DATE AMOU			AMOUNT			
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	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		
AFT-PENNSYLVANIA	From:	<u>5/19/2020</u> <b>То:</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	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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:			То:		
		DATE			AMOUNT			
Full Name of Contributor				DAY	YEAR			
Mailing Address						<b>]</b> \$	0.0	)0
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ailed Summary Page, PAGE			AGE TOTAL	_			
						\$	0.0	0

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

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate				Reporting Period						
						То:					
					DATE AMOUN						
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	ation						
Employer Mailing Address/Principal Plac	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution					
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						<b>PAGE TOTAL</b> 0.00					

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
				From			To:		
		DATE		AMOUNT					
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
Enter Grand Total of Exponditures	<b>`</b>				PAGE TOTAL				
	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D					\$	0.00		