

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		2020C0108		<b>Report Filed By :</b>		<b>CANDIDATE</b> <input checked="" type="checkbox"/>		<b>COMMITTEE</b>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> DEL VALLE, ANDRE												
<b>Street Address:</b>												
<b>City:</b>						<b>State:</b>		<b>Zip Code:</b> 19125				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	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.	Year 2020	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	175	STH	DEM	51
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		5	19	2020		6	22	2020				
<b>A. Amount Brought Forward From Last Report</b>						\$		1,274.47				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$		963.72				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$		2,238.19				
<b>D. Total Expenditures (From Schedule III)</b>						\$		1,865.70				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$		372.49				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$		250.00				

## 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
DEL VALLE, ANDRE	From: <u>5/19/2020</u> To: <u>6/22/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 306.86

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 656.86
<b>TOTAL for the Reporting Period (2)</b>	\$ 656.86

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 963.72
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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: <span style="float: right;">To:</span>
<div style="display: flex; justify-content: space-between;"> <span>DATE</span> <span>AMOUNT</span> </div>	

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

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

<b>PAGE TOTAL</b>
\$ 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
DEL VALLE, ANDRE	From: <u>5/19/2020</u> To: <u>6/22/2020</u>

<b>DATE</b>	<b>AMOUNT</b>
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Full Name of Contributor			MO	DAY	YEAR	\$50.00
Katherine Gilmore						
Mailing Address			6	11	2020	
5271 Arlington St.						
City	State	Zip Code (Plus 4)				
Philadelphia	PA	19131				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Maria Quinones						
Mailing Address 2253 N Howard St.			6	5	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19133				

Full Name of Contributor Sara Wattts			MO	DAY	YEAR	\$ 10.00
Mailing Address 2033 E. York Street Apt. 1			6	5	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19125				

<b>Full Name of Contributor</b> Lisette Agosto Cintron			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 50.00
<b>Mailing Address</b> 2571 Cannonball Court			5	30	2020	
<b>City</b> Bensalem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19020				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Raymond Yabor						
Mailing Address 5100 Conventtt Lane Unit 123			5	21	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19114				

Full Name of Contributor John Padora			MO	DAY	YEAR	\$ 8.33
Mailing Address 920 Maple Streett			5	20	2020	
City Lititz	State PA	Zip Code (Plus 4) 17543				

Full Name of Contributor Justin Torres			MO	DAY	YEAR	\$ 50.00
Mailing Address 2042 N Hancock Street			5	19	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19122				

Full Name of Contributor Will Carter			MO	DAY	YEAR	\$ 150.00
Mailing Address 2029 Federal Street			5	19	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19146				

Full Name of Contributor John Flores			MO	DAY	YEAR	\$ 50.00
Mailing Address 384 Cylamen St			5	29	2020	
City New Braunfels	State TX	Zip Code (Plus 4) 78132				

Full Name of Contributor Gustavo Barragan			MO	DAY	YEAR	\$ 10.00
Mailing Address 6254 Kester Ave			5	20	2020	
City Van Nuys	State CA	Zip Code (Plus 4) 91411				

Full Name of Contributor James Bejarano			MO	DAY	YEAR	\$ 10.00
Mailing Address 1462 Lassen Avenue			5	30	2020	
City Salinas	State CA	Zip Code (Plus 4) 93906				

Full Name of Contributor			MO	DAY	YEAR	\$ 10.00
Dylan Cline						
Mailing Address 4274 Queen Anne Dr.			5	29	2020	
City Union City	State CA	Zip Code (Plus 4) 94587				

Full Name of Contributor				MO	DAY	YEAR	\$5.00
Jose Olivares							
Mailing Address				5	29	2020	
771 N. Linden Ave							
City	State	Zip Code (Plus 4)					
Rialto	CA	92376					

Full Name of Contributor				MO	DAY	YEAR	\$ 33.33
Dan Clifford							
Mailing Address				5	20	2020	
33 Andrew Street		State	Zip Code (Plus 4)				
City	Newtown Highlands	MA	02461				

Full Name of Contributor				MO	DAY	YEAR	\$ 20.20
Javier Sanchez							
Mailing Address				6	1	2020	
1121 Eastern Avenue							
City	Capitol Heights	State	Zip Code (Plus 4)				
		MD	20743				

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

<b>PAGE TOTAL</b>
\$ 656.86

**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.

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place 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



## 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: <span style="float: right;">To:</span>
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			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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
DEL VALLE, ANDRE		From: <u>5/19/2020</u> To: <u>6/22/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
DEL VALLE, ANDRE	From <u>5/19/2020</u> To: <u>6/22/2020</u>

DATE				AMOUNT		
To Whom Paid Mail Chimp			MO	DAY	YEAR	\$ 53.99
Mailing Address 675 Ponce de Leon Ave NE Suite 5000			5	26	2020	
City Atlanta	State GA	Zip Code (Plus 4) 30308	Description of Expenditure Marketing Fees			
To Whom Paid SquareSpace			MO	DAY	YEAR	\$ 25.44
Mailing Address 8 Clarkson St			5	26	2020	
City New York	State NY	Zip Code (Plus 4) 10014	Description of Expenditure Marketing Fees			
To Whom Paid SquareSpace			MO	DAY	YEAR	\$ 25.44
Mailing Address 8 Clarkson St			6	22	2020	
City New York	State NY	Zip Code (Plus 4) 10014	Description of Expenditure Marketing Fees			
To Whom Paid FACEBOOK			MO	DAY	YEAR	\$ 517.21
Mailing Address 1 Hacker Way			6	1	2020	
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure Marketing Fees			
To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 250.00
Mailing Address 1445 New Yorrk Avenue NW Suite 200			6	2	2020	
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure Marketing Fees			

<b>To Whom Paid</b> Steve Mesa			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2019 Cove Road			6	1	2020	
<b>City</b> Pennsauken	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 08110	<b>Description of Expenditure</b> Marketing expense			

<b>To Whom Paid</b> TD Bank			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1701 Route 70 East			5	29	2020	
<b>City</b> Cherry Hill	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 08034	<b>Description of Expenditure</b> Maintenance Fee			

<b>To Whom Paid</b> ActBlue			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 366 Summer St.			6	3	2020	
<b>City</b> Somerville	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 02144	<b>Description of Expenditure</b> Maintenance Fee			

<b>To Whom Paid</b> GRAN LLC.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 3609 N 5th St.			6	5	2020	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19140	<b>Description of Expenditure</b> Marketing: T-Shirts			

<b>To Whom Paid</b> NGP VAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1445 New Yorrk Avenue NW Suite 200			6	17	2020	
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20005	<b>Description of Expenditure</b> Marketing Fees			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 1,865.70

**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

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

<b>Name of Filing Committee or Candidate</b>  DEL VALLE, ANDRE			<b>Reporting Period</b>  From: <u>5/19/2020</u> To: <u>6/22/2020</u>	
				<b>Outstanding Balance of Debt</b>
			<b>DATE</b>	
<b>Name of Creditor</b> NGP VAN			<b>MO</b>	<b>DAY</b>
			<b>YEAR</b>	
<b>Mailing Address</b> 1445 New York Ave. NW, Suite 200			7	2
			2020	\$ 250.00
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20005	<b>Description of Debt</b> Marketing Fees	
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>				<b>PAGE TOTAL</b>  \$ 250.00