

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 : 7900537		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: Montgomery County Democratic Committee											
Street Address: 21 East Airy Street											
City: Norristown				State: PA		Zip Code: 19401					
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. 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	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	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	19	2020		6	22	2020			
A. Amount Brought Forward From Last Report					\$ 83,826.05						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 3,710.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 87,536.05						
D. Total Expenditures (From Schedule III)					\$ 4,206.34						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 83,329.71						
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
Montgomery County Democratic Committee	From: <u>5/19/2020</u> To: <u>6/22/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 160.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 200.00
All Other Contributions (Part B)	\$ 350.00
TOTAL for the Reporting Period (2)	\$ 550.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 3,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 3,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 3,710.00
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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 Montgomery County Democratic Committee	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
DATE	
AMOUNT	

Full Name of Contributing Committee Pennsylvania Democratic Party			MO	DAY	YEAR	\$ 200.00
Mailing Address 300 N 2nd St Fl 8			5	30	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 171011303				

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

PAGE TOTAL
\$ 200.00

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 Montgomery County Democratic Committee	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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DATE	AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$	125.00
Frank S Burstein							
Mailing Address			6	9	2020		
160 Pebble Beach Dr							
City	Linfield	State	Zip Code (Plus 4)				
		PA	194681040				

Full Name of Contributor			MO	DAY	YEAR	\$	125.00
Ronald A. Kolla							
Mailing Address			6	14	2020		
2 Barley Way							
City	Horsham	State	Zip Code (Plus 4)				
		PA	190441854				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Barbara Rice							
Mailing Address 712 Germantown Pike				6	17	2020	
City Lafayette Hill	State PA	Zip Code (Plus 4) 194441604					

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

PAGE TOTAL
\$ 350.00

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 Montgomery County Democratic Committee	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee Bridge Across PA PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 121 S Broad St Fl 4				5	30	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191074544					
Full Name of Contributing Committee Cement Masons Local #592				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2843 Snyder Ave				6	19	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191452429					
Full Name of Contributing Committee Friends of Jason Salus				MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO Box 1214				5	30	2020	
City Norristown	State PA	Zip Code (Plus 4) 194041214					

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

PAGE TOTAL
\$ 3,000.00

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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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.

PAGE TOTAL
\$ 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: 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	
Montgomery County Democratic Committee		From: <u>5/19/2020</u> To: <u>6/22/2020</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 RECEIVED - 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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Montgomery County Democratic Committee	From <u>5/19/2020</u> To: <u>6/22/2020</u>

DATE				AMOUNT		
To Whom Paid Kingdom Janitorial Maid Service			MO	DAY	YEAR	\$ 415.52
Mailing Address 1801 Pine St			6	22	2020	
City Norristown	State PA	Zip Code (Plus 4) 194013041	Description of Expenditure Office Expense			
To Whom Paid Paychex Payroll Processing			MO	DAY	YEAR	\$ 2,683.83
Mailing Address 1100 Adams Ave 1100 Adams Avenue			6	19	2020	
City Norristown	State PA	Zip Code (Plus 4) 194032404	Description of Expenditure Salary			
To Whom Paid Paychex Payroll Processing			MO	DAY	YEAR	\$ 980.25
Mailing Address 1100 Adams Ave 1100 Adams Avenue			6	19	2020	
City Norristown	State PA	Zip Code (Plus 4) 194032404	Description of Expenditure Payroll Taxes			
To Whom Paid Paychex Payroll Processing			MO	DAY	YEAR	\$ 64.15
Mailing Address 1100 Adams Ave 1100 Adams Avenue			6	19	2020	
City Norristown	State PA	Zip Code (Plus 4) 194032404	Description of Expenditure Office Expense			
To Whom Paid Staples			MO	DAY	YEAR	\$ 62.59
Mailing Address PO Box 689020			6	2	2020	
City Des Moines	State IA	Zip Code (Plus 4) 503689020	Description of Expenditure Office Expense			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 4,206.34

