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 :	on 201	.60170			Rep File			CAI	NDI	DATE		COM	AITTEE	V	LUBB	1131	
Name of Filing C	ommittee, Cand	idate or L	obbyist:	•	FRIE	ND:	S OF	CARC	LYN	I COM	ITTA	•					
Street Address:																	
City:	WEST CHES	TER						State	e:	PA			Zip Co	de: 19	9380		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		F	POST-	3. X		AMENDN REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5	5.	30 DA		F	POST-	6.		TERMIN. REPORT		Yes	No	\
report type)	ANNUAL REPOR	T 7.	Year 2020					NG ME					PAPER		\checkmark	DISKE	ГТЕ
Name of Office S	- Sought by Candid	ate:						DAT	ΕO	F ELE	CTIC	N	District Number	Office Code	Part	y Code	County Code
SENATOD IN TH	HE GENERAL AS	CEMBIV						МО		DAY	YI	AR	19	STS	DEM		15
SCINATOR IN TI	IL GLINERAL AS	SLMDLI							11		3	2020		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR				МО		DAY	ΥI	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		5 19	20	020	T	0		6	:	22	2020					
A. Amount Bro	ught Forward Fro	om Last F	leport				\$			•	38,6	528.64					
B. Total Moneta	ary Contribution	s And Red	eipts (Fron	n Sche	dule	I)	\$				23,0	080.00					
C. Total Funds Available (Sum Of Lines A and B)							\$				61,7	708.64					
D. Total Expenditures (From Schedule III)							\$				58,5	503.79					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$				3,2	04.85					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II)	\$					0.00					
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	/)			\$					0.00					
								CTIC									
	that this report, ir	-	_							-		_		of my kno	wledge a	ınd belie	ef , true
correct and comple	cribed before me tl	nis										`i	of Davas	n Submit	tina Dan		
	day of		_ 20				-					ngilature	or Perso	iii Subiiiii	tilly Kep	ort .	
	Signa	ture					-						Prin	ited Name	•		
My Commission Ex							_						Ema	il			
	МО		AY	YR							ea Cod	le	Daytin	ne Teleph	one Nur	nber	
Part II- If this is	•					•				_							4000
I swear (or affirm) No 320) as amende	ed.	•	eage and bei	ier tnis	polit	icai	comm	ittee n	as n	ot viola	ted an	y provis	ions or th	e act or J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	day of	5	20									S	ignature	of Candid	ate		
	<u> </u>						-						Printe	ed Name			
My Commission Exp	Signature ires												Ema	nil			<u> </u>
	МО	D	AY	YR			-			Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF CAROLYN COMITTA	From:	5/19/202	<u>0</u> To:	6/22/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	80.00
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)			\$	1,000.00
TOTAL for the Reporting	\$	1,000.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	18,500.00
All Other Contributions (Part D)			\$	3,500.00
TOTAL for the Reporting	Period	(3)	\$	22,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	23,080.00

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 Candida	te	F	Reporting	Period			
		F	From: To:			:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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)

Nan	ne of Filing Committee or Candi	idate		Reporting P	eriod		
FRII	ENDS OF CAROLYN COMITTA			From:	5/19/	2020 T o	6/22/2020
					DATE		AMOUNT
	ame of Contributor N TIERNAN			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	WEST CHESTER	State PA	Zip Code (Plus 4) 193804340	5	23	2020	
Full Na	ame of Contributor			мо	DAY	YEAR	
DIANE	SNYDER			MO	DAT	TEAR	
Mailin	g Address						\$ 100.00
City	WEST CHESTER	State PA	Zip Code (Plus 4) 193801426	5	20	2020	
Full Na	ame of Contributor			мо	DAY	YEAR	
CHRIS	STOPHER PIELLI					12/11	
Mailin	g Address					l	\$ 100.00
City	WEST CHESTER	State	Zip Code (Plus 4	5	27	2020	
		PA	193804070				
Full Na	ame of Contributor			мо	DAY	YEAR	
FRIEN	DS OF JOE CIRESI N/A						
Mailin	g Address					l	\$ 250.00
City	ROYERSFORD	State	Zip Code (Plus 4	5	26	2020	
		PA	194681626				
Full Na	ame of Contributor			мо	DAY	YEAR	
MARY	MCCLOSKEY			MO	DAI	LAK	
Mailin	g Address						\$ 100.00
City	WEST CHESTER	State	Zip Code (Plus 4	6	8	2020	
		PA	193806473				
Full Na	ame of Contributor			мо	DAY	YEAR	
	g Address						\$ 100.00
City	WEST CHESTER	State	Zip Code (Plus 4	5	26	2020	100.00
		PA	193804326				
Full Na	ame of Contributor						
	DS OF TINA DAVIS			МО	DAY	YEAR	
	Mailing Address						\$ 250.00
Mailli	3						
City	PHILADELPHIA	State	Zip Code (Plus 4	5	20	2020	250100

PAGE TOTAL

\$ 1,000.00

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 Candidat	e		Reporting Period					
FRIENDS OF CAROLYN COMITTA			From:	<u>5/1</u>	.9/2020	То:	6/2	22/2020
				DA	TE		АМ	OUNT
Full Name of Contributing Committee AFSCME COUNCIL 13				МО	DAY	YEAR	\$	2,500.00
Mailing Address				5	23	2020]	_,
City HARRISBURG	State PA				23	2020		
Full Name of Contributing Committee APSCUF/CAP PA				МО	DAY	YEAR	\$	500.00
Mailing Address				5	21	2020]	
City HARRISBURG	State	Zip Cod	e (Plus 4)			2020		
	PA	171011	.203					
Full Name of Contributing Committee CITIZENS FOR HUGHES		МО	DAY	YEAR	\$	2,000.00		
Mailing Address				6	12	2020		2,000.00
City PHILADELPHIA	State	Zip Cod	e (Plus 4)	6	12	2020		
	PA	191314	1700					
Full Name of Contributing Committee		-		мо	DAY	YEAR		
FRIENDS TO ELECT CHRISTINE TART	AGLIONE						\$	500.00
Mailing Address				5	21	2020		
City ELKINS PARK	State PA	Zip Cod 190272	e (Plus 4) 2104					
					1	<u> </u>	l I	
Full Name of Contributing Committee LABORERS DISTRICT COUNCIL				МО	DAY	YEAR	\$	10,000.00
Mailing Address				_	_	2020	*	10,000.00
City PHILADELPHIA	State	Zip Cod	e (Plus 4)	6	1	2020		
	PA	191232	2537					
Full Name of Contributing Committee PASNAP PAC				МО	DAY	YEAR		
Mailing Address							\$	500.00
City CONSHOHOCKEN	State	Zin Cod	e (Plus 4)	5	23	2020		
, CONSTIGNIOCKEN	PA	194284						

Full N	ll Name of Contributing Committee				DAY	YEAR	
PLUM	PLUMBERS UNION LOCAL 690 ELECTION POLITICAL ACTION FUND				DAI	12711	\$ 2,500.00
Mailin	Mailing Address				1	2020	_,
City	PHILADELPHIA	State	Zip Code (Plus 4)	6	_	2020	
		PA	191541211				

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

PAGE TOTAL\$ 18,500.00

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	ame of Filing Committee of Candidate					Reporting Period						
FRIENDS OF CAROLYN COMITTA				Fron	n:	5/19/2	<u>020</u> To):	6/22/2020			
					DA	TE		Α	MOUNT			
Full Name of Contributor					мо	DAY	YEAR					
KARLA JURVETSON					МО	DAT	TEAR	\$	2,500.00			
Mailing Address					5	23	2020					
City LOS ALTOS	State	Zip	Code (Plus	4)		23	2020					
	l _{CA}	940	0223602									
Employer Name SELF					Occupat	ion	PHYSIC	IAN				
Employer Mailing Address/Principal Plac	Employer Mailing Address/Principal Place of Business City					State		Zip Co	de (Plus 4)			
Full Name of Contributor					мо	DAY YEA		\$	500.00			
SARA HARRIS							,] *	500.00			
Mailing Address	.				5	21	2020					
City RIVIERA BEACH	State	Zip	Code (Plus	4)								
	l _{FL}	334	4042679									
Employer Name RETIRED					Occupation RETIRED							
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus 4)			
Full Name of Contributor					мо	DAY	YEAR					
JIM SARGENT					МО	DAT	ILAK	\$	500.00			
Mailing Address					5	26	2020					
City WEST CHESTER	State	Zip	Code (Plus	4)								
	l _{PA}	193	3823774									
Employer Name LAMB MCERLANE PC					Occupat	ion ,	ATTORN	IEY				
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus 4)			
			WEST CHE	STER		PA		19382	3151			
									PAGE TOTAL			
Enter Grand Total of Part C on Schee	dule I, Detailed Si	umm	ary Page,	Section	on 3.							
								\$	3,500.00			
							L					

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	ing Peri	od			
			From:	DATE MO DAY YEAR \$ 4)				
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	'	.					<u> </u>	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Perio	od							
FRIENDS OF CAROLYN COMITTA	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 Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00						
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,		\$	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:				
		<u>.</u>		DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•	•		•		
					-			
	inter Grand Total of Part F on Schedule II, In-Kind Contributions Det			tailed Summary Page,			PAGE TOTAL	
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		YEAR \$			
						DATE	YEAR \$ Description of Contrib			-
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	iptio	on of Contribut	ion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	TAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
FRIENDS OF CAROLYN COMITTA	From	5/19/2020	То:	<u>6/22/2020</u>

	•									
			DATE		AMOUNT					
		МО	DAY	YFAR						
		М		12/11						
Mailing Address				2020	\$	32,418.66				
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
DC	200082624	MAILER	S							
To Whom Paid				ΥFΔR						
CITIZENS BANK				12/11						
Mailing Address					\$	30.00				
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
PA 193011518					WIRE TRANSFER FEE					
		МО	DAY	ΥFΔR						
		М		ILAK						
Mailing Address				2020	\$	30.00				
City PAOLI State Zip Code (Plus 4)			Description of Expenditure							
PA 193011518				WIRE TRANSFER FEE						
		МО	DAY	VFΔR						
		HO		ILAK						
Mailing Address				2020	\$	1,050.00				
State	Zip Code (Plus 4)	Description of Expenditure								
PA	193413055	CONSULTING FEE								
		мо	DAY	ΥFΔR						
		110		12/11						
Mailing Address					\$	736.36				
		5	28	2020	T	, 50.50				
State	Zip Code (Plus 4)	<u> </u>	tion of Exp		<u> </u>	, , , , , , , , , , , , , , , , , , , ,				
State PA	Zip Code (Plus 4) 193802261	Descript		enditure		,,,,,,				
		Descrip	Lion of Exp AND WEE	enditure BSITE UP		, 50.00				
		Descript	l tion of Exp	enditure		, 50.00				
		Descrip	Lion of Exp AND WEE	enditure BSITE UP		1,984.05				
		Descript DIGITAL MO	L AND WEE	enditure BSITE UP YEAR 2020	KEEP					
	State PA State PA State State	State Zip Code (Plus 4) 193011518 State PA 193011518 State PA 193011518 State Zip Code (Plus 4) 193011518 State Zip Code (Plus 4) State Zip Code (Plus 4)	DC 200082624 MAILER MO 5 State Zip Code (Plus 4) Descript PA 193011518 WIRE TI MO 6 State Zip Code (Plus 4) Descript PA 193011518 WIRE TI MO 5 State Zip Code (Plus 4) Descript State Zip Code (Plus 4) Descript	MO	MO	MO				

								FAGL 14		
To Whom Paid				мо	DAY	YEAR				
EMILY EYSTER										
Mailin	g Address			6	18	2020	\$	10,000.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 171123138				CONSULTING FEE						
To Wi	nom Paid			мо	DAY	YEAR				
JAMIE WC LORGUS										
Mailing Address				6	1	2020	\$	372.00		
City	WEST CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	193823333	CONSU	LTING FEE					
To Whom Paid				МО	DAY	YEAR				
JAMIE	WC LORGUS									
Mailin	g Address			6	5	2020	\$	372.00		
City	WEST CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	193823333	CONSU	LTING FEE					
To Wi	nom Paid			мо	DAY	YEAR				
JAMIE	WC LORGUS			140		ILAK				
Mailing Address				6	18	2020	\$	672.00		
City	WEST CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	193823333	CONSULTING FEE						
To Whom Paid				мо	DAY	YEAR				
LINDA MAXWELL				140		ILAK				
Mailin	g Address			6	1	2020	\$	50.00		
City	WEST CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA 193821950 BUTTONS				JTTONS				
To W	nom Paid			мо	DAY	YEAR				
THE SEXTON GROUP										
Mailing Address				6	5	2020	\$	788.72		
City	CHICAGO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		IL		ROBOCALLS						
To Wi	nom Paid			МО	DAY	YEAR				
WIN CREATIVE LLC				МО		ILAK				
Mailing Address					1	2020	\$	10,000.00		
City	NEW YORK	State	Zip Code (Plus 4)	Description of Expenditure						
	NY 100134026 DIGITAL AD					SING				
	- C							PAGE TOTAL		
Enter	r Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D).			\$	58,503.79		
								•		