### **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 :	<b>on</b> 201	.60290				Repor Filed I		CA	NDI	DATE		COM	4ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist	t:	<u>- ا</u>	1EDIA	DEMC	CRA	TIC (	COMM	ITTE	<u> </u>	<u>_</u>					
Street Address:																		
City:	MEDIA							State	e:	PA			Zip Cod	<b>ie:</b> 19	063-0	284		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FI PRIMA		PRE-	2.	30 DA		Р	OST-	3.		AMENDM REPORT	Yes	N	0	<b>√</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FI		PRE-	5. <b>X</b>	30 DAY F ELECTION			OST- 6.		TERMINA REPORT		Yes	N	0	<b>\</b>	
report type)	ANNUAL REPOR	<b>T</b> 7.	Year 2	2020			FILING METHO			_			PAPER		<b>√</b>	DISK	ETTE	
Name of Office S	ought by Candid	ate:				•		DAT	ΈO	F ELE	CTIC	)N	District Number	Office Code	Pai	ty Cod	e Cour	
								МО		DAY	Y	EAR	5		DEN	М	23	
									11		3	2020		(SEE INS	TRUCTI	ONS FO	CODES	5)
Summary of Expenditures		МО	DAY	γ ,	YEAR			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
			6	23	20	20	О		10		19	2020						
A. Amount Bro	ught Forward Fro	om Last R	eport				\$					535.29						
B. Total Moneta	ary Contributions	s And Rec	eipts (	From	Sched	ule I)	\$	i				705.82						
C. Total Funds	Available (Sum (	Of Lines A	and B	)			\$				1,	241.11						
D. Total Expend	ditures (From Sc	hedule II	I)				\$	1			:	210.09						
E. Ending Cash	Balance (Subtra	ct Line D	From L	ine C	)		\$				1,0	31.02						
F. Value Of In-	Kind Contributio	ns Receiv	ed (Fro	om Scl	hedule	e II)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedu	le IV)	1		\$	;				0.00						
					AFFI	DAVI	T SE	CTI	NC									
PART I - If this is				_						-		_						
I swear (or affirm) correct and comple		cluding the	e attache	ed sche	edules	filed on	paper	or by	electi	onic m	ediun	i, are to t	he best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me tl day of	nis	20								:	Signature	of Perso	n Submitt	ing Re <sub>l</sub>	oort		_
	Signa	ture	<b>-</b> -				<u>-</u>						Prin	ted Name				_
My Commission Ex	_												Ema	il				-
	МО	D	AY		YR					Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	author	ized C	Commi	ittee, C	Candid	ate s	hall	sign h	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and	d belie	f this p	oolitical	comm	ittee l	nas no	ot viola	ted aı	ny provis	ions of th	e act of Ju	ıne 3,1	937 (P	L. 133	з,
Sworn to and subsc		s	20									s	ignature o	of Candida	ite			_
-	day of		_ 20 				_						Printe	d Name				-
	Signature	e					-											_
My Commission Exp	ires												Ema	il				
	мо	D	AY		YR		_			Area	Code		Da	aytime Te	elephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
MEDIA DEMOCRATIC COMMITTEE	From:	6/23/202	<u>0</u> To:	10/19/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	365.82
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)			\$	250.00
TOTAL for the Reporting	g Period	(2)	\$	250.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	90.00
			· I	
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	705.82

#### **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 of	or Candidate		Reporting	Period			
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Co	mmittee		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)

Name of Filing Committee or Candidate

**Reporting Period** 

MEDIA DEMOCRATIC COMMITTEE

From: 6/23/2020 To:

DATE

10/19/2020

**AMOUNT** 

	Full Name of Contributor Brian C. Hall				DAY	YEAR	
	Mailing Address						<b>\$</b> 250.00
City	Media	State	Zip Code (Plus 4)	9	1	2020	
		PA	19063				

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

**PAGE TOTAL \$** 250.00

#### **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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							<b>-</b>   \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	n Schedule I, Detaile	d Summary Pa	age, Sectio	n 3.			\$	0.00

## 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				Repo	orting Pe	riod			
				Fron	n:		To	):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

## 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	Reporting Peri	iod	
MEDIA DEMOCRATIC COMMITTEE	From:	6/23/2020 <b>To:</b>	10/19/2020

			D	ATE		AMOUN	IT
Full Name				DAY	VEAD		
Media-Upper Providence Free	Library		МО	DAY	YEAR	<b>\$</b>	90.00
Mailing Address			8	5	2020		
<b>City</b> Media	State	Zip Code (Plus 4)			2020		
	PA	19063					
Receipt Description Room	n Rental Rebate						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

**PAGE TOTAL \$**90.00

#### **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	
MEDIA DEMOCRATIC COMMITTEE	From:	<u>6/23/2020</u> <b>To:</b>	10/19/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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,	<u> </u>	\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

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

Name of Filing Committee or Candid	nme of Filing Committee or Candidate						
			From:			To:	
		•		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>7</b> \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	-	•	•		•	
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
MEDIA DEMOCRATIC COMMI	TTEE		From	<u>6/2:</u>	3/2020	То:	10/19/2020
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Delaware County Democratic	Committee						
Mailing Address	Mailing Address				2020	\$	125.00
<b>City</b> Media	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 19063			Biden S	igns			
To Whom Paid			мо	DAY	YEAR		
Jeanne F Wordley			1.0				
Mailing Address			6	29	2020	\$	49.20
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19063	Postage	e fees for C	ertified L	etters.	
To Whom Paid			мо	DAY	YEAR		
Women's Democratic Club of	Delaware County		МО	DAT	TEAR		
Mailing Address			9	24	2020	\$	30.00
<b>City</b> Springfield	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 19064			Fundrai	ser contrib	ution		
To Whom Paid			МО	DAY	YEAR		
PayPal	ayPal				LAK		
Mailing Address			10	19	2020	\$	5.89
						1	

Zip Code (Plus 4)

95131

Description of Expenditure

Finance Fees

State

CA

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

City

San Jose

**PAGE TOTAL** 

210.09

\$