Campaign Finance Report

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

| Filer Identificat Number : | ion | 20031 | 196 | | | Repor Filed | - | Τ | CANDI | DATE | | СОМ | MITTEE | ✓ | LOB | BYIST | | |
|--|-------------------------|---------------|-----------|----------------------------------|---------|----------------|--------|-------------|------------|-------------------|-------|------------|--------------------|----------------|---------|--------|--------------|-----|
| Number : Name of Filing | Committee, | Candida | ite or Lo | bbyist: | | | - | | MAS VIO | TORY | СОМ | | | | | | | |
| Street Address: | | | | | | | , | | | | | | | | | | | |
| Street Address: City: | MEDIA | | | | | | | | state: | PA | | | Zip Co | 4a. 19 | 063-0 | 000 | | |
| - | | | | | | | • | | | | | | <u> </u> | | | | | ı |
| TYPE OF REPORT | 6TH TUESE PRE-PRIMA | ARY | | 2ND FRIDA PRIMARY | | | PRI | DAY [MAF | RY | POST- 3. X | | | AMENDN REPORT | Yes | ۲ | lo | | |
| (place X to the right of | 6TH TUESE PRE-ELECT | | | 2ND FRIDA ELECTION | y pre | ≣- 5. | | DAY CTI | | POST- | 6. | | TERMIN/ REPORT | Yes | ٢ | lo | \checkmark | |
| report type) | ANNUAL F | REPORT | 7. | Year 2020 FILING METH () CHECK (| | | | | | | | | PAPER | \checkmark | DISK | ETTE | | |
| Name of Office | Sought by (| - Candidat | e: | | | | | I | DATE O | F ELEC | СТІО | N | District Number | Office Code | Par | ty Cod | e Cou Cod | |
| SENATOR IN T | HE GENER | AL ASSE | MBI Y | | | | | M | 10 | DAY | YE | AR | 9 | STS | REF |) | 23 | |
| | | | | | | | | | 11 | | 3 | 2020 | | (SEE INS | TRUCTI | ONS FO | R CODE | 5) |
| Summary of | | and | мо | DAY | YEAR | 2 | | r | 10 | DAY | YE | AR | FC | OR OFFIC | e use | ONL | (| |
| Expenditure | s from: | | | 5 19 | 2 | 020 | ГО | | 6 | 2 | 2 | 2020 | | | | | | |
| A. Amount Bro | ought Forwa | ard From | Last Re | eport | | | | \$ | | 1 | 18,7 | 715.46 | | | | | | |
| B. Total Monet | tary Contrib | outions A | nd Rece | eipts (From | Sche | dule I) | | \$ | | | 51,9 | 900.00 | | | | | | |
| C. Total Funds | Available (| (Sum Of | Lines A | and B) | | | | \$ | | 1 | 170,6 | 515.46 | | | | | | |
| D. Total Exper | nditures (Fr | om Sche | dule III |) | | | | \$ | | | 30,2 | 262.99 | | | | | | |
| E. Ending Casl | n Balance (S | Subtract | Line D F | rom Line (| C) | | | \$ | | 1 | 40,3 | 52.47 | | | | | | |
| F. Value Of In | -Kind Contr | ibutions | Receive | d (From S | chedu | le II) | | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Deb | ts And Obli | gations | (From S | chedule IV |) | | | \$ | | | | 0.00 | | | | | | |
| | | | | | AFF | IDAV | IT S | SEC | TION | | | | | | | | | |
| PART I - If this | | - | • | - | | | | | | • • | | - | - | | | | | |
| I swear (or affirm correct and comp | | port, inclu | uding the | attached scl | hedule | s filed or | ı pape | er or | by electi | ronic me | dium | , are to i | the best o | f my know | /ledge | and be | lief , t | rue |
| Sworn to and sub | scribed befor day of | e me this | | 20 | | | | | | | s | ignature | e of Perso | n Submitt | ing Rej | port | | - |
| | | | | | | | _ | | | | | | Prin | ted Name | | | | - |
| My Commission E | xpires | Signatur | e | | | | | | | | | | Ema | il | | | | - |
| | M | 10 | DA | Y | YR | | | | | Are | a Cod | le | Daytin | ne Teleph | one Nu | mber | | — |
| Part II- If this is | a report o | of a cand | idate's a | authorized | Comn | nittee, (| Cand | lidat | te shall : | sign he | re. | | | | | | | |
| I swear (or affirm No 320) as amend | | best of m | y knowle | dge and beli | ef this | politica | l com | nmitt | tee has n | ot violat | ed an | y provis | ions of th | e act of Ju | ine 3,1 | 937 (P | .L. 133 | 33, |
| Sworn to and subs | cribed before | e me this | | | | | | | | | | s | ignature (| of Candida | te | | | — |
| | day of | | | 20 | | | _ | | | | | | Printe | d Name | | | | _ |
| | Si | gnature | | | | | _ | | | Printed Name | | | | | | | | |
| My Commission Ex | | | | | | | | | | | | | Ema | il | | | | _ |
| | _ | мо | DA | Y | YR | 1 | _ | | | Area (| Code | | D | aytime Te | lephor | ne Nun | ıber | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

| | 3 | | | |
|--|-----------|-----------------|---------------|------------------|
| Name of Filing Committee or Candidate | Reporting | J Period | | |
| KILLION, THOMAS VICTORY COM | From: | <u>5/19/202</u> | <u>.0</u> To: | <u>6/22/2020</u> |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | Period | (1) | \$ | 75.00 |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | | | | |
| Contributions Received From Political Committees (Part A) | | | \$ | 300.00 |
| All Other Contributions (Part B) | | | \$ | 525.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 825.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 31,000.00 |
| All Other Contributions (Part D) | | | \$ | 20,000.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 51,000.00 |
| 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 | | | \$ | 51,900.00 |

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 | Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|-----------------------------|--|--------------------|---------------------------|---------------------------|------------------|-----|---|------|------------------|------------|--|
| KILLION, THOMAS VICTORY COM | | | | rom: <u>5/19/2020</u> To: | | | | | <u>6/22/2020</u> | | |
| | | | | | DATE AMOUN | | | | | | |
| | me of Contributing Committee endence Blue Cross PAC (IBC PA | C) | | | мо | DAY | | YEAR | | | |
| Mailing | Address | | | | 5 | 2 | 7 | 2020 | \$ | 150.00 | |
| City | Philadelphia | State PA | Zip Code (Plus 4 19103 | 4) | 5 | _ | | 2020 | | | |
| Eull No | me of Contributing Committee | | | | | | + | | | | |
| | Bus PAC | | | | мо | DAY | | YEAR | | | |
| Mailing | J Address | | | | 6 | 1 | 5 | 2020 | \$ | 150.00 | |
| City | Camp Hill | State PA | Zip Code (Plus 4 17011 | 4) | 0 | - | | 2020 | | | |
| | | | | | | | | | | PAGE TOTAL | |

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

300.00

\$

| | 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) | | | | | | | | | | | | |
|--------|---|------------------------|---------------------|-------|-----------|--------------|----------------|-------------------|--------|--|--|--|--|
| Nar | me of Filing Committee or | Candidate | | Rep | porting P | eriod | | | | | | | |
| KIL | KILLION, THOMAS VICTORY COM | | | | | <u>5/19/</u> | <u>2020</u> То | 6 /22/2020 | | | | | |
| | | | | | | DATE | | | AMOUNT | | | | |
| | lame of Contributor | | | | мо | DAY | YEAR | | | | | | |
| | t J. Melfi Jr. ng Address | | | | | | | \$ | 100.00 | | | | |
| City | Glen Mills | State | Zip Code (Plus 4 | I) | 5 | 27 | 2020 | æ | 100.00 | | | | |
| - | | PA | 19342 | - | | | | | | | | | |
| Full N | lame of Contributor | | | | мо | DAY | YEAR | | | | | | |
| Katay | oun Copeland | | | | | | | | | | | | |
| Mailir | ng Address | | | | | | | \$ | 100.00 | | | | |
| City | Bryn Mawr | State | Zip Code (Plus 4 | •) | 6 | 2 | 2020 | | | | | | |
| | | PA | 19010 | | | | | | | | | | |
| Full N | lame of Contributor | | | | мо | DAY | YEAR | | | | | | |
| | T. Posasale | | | | | | | | | | | | |
| | ng Address | | | | 6 | 10 | 2020 | \$ | 75.00 | | | | |
| City | Kennett Square | State PA | Zip Code (Plus 4 | •) | 0 | 10 | 2020 | | | | | | |
| Full N | lame of Contributor | | | | | | | | | | | | |
| Joshu | ıa Klein | | | | мо | DAY | YEAR | | | | | | |
| Mailir | ng Address | | | | | | | \$ | 250.00 | | | | |
| City | Villanova | State | Zip Code (Plus 4 | •) | 6 | 15 | 2020 | | | | | | |
| | | PA | 19085 | | | | | | | | | | |
| | | | | | | | PAGE TOTAL | | | | | | |
| E | inter Grand Total of Pa | rt A on Schedule I, De | etailed Summary Pag | ge, S | ection 2 | - | | \$ | 525.00 | | | | |

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 | Name of Filing Committee or Candidate Repor | | | Reporting | g Period | | | | |
|--|---|--------------------|-------------------------|------------|------------|---------------|------|------------------|-----------|
| KILLION, THOMAS VICTO | ORY COM | | | From: | <u>5/1</u> | <u>9/2020</u> | То: | <u>6/22/2020</u> | |
| | | | | | DA | TE | | A | MOUNT |
| Full Name of Contributing | Committee | | | | мо | DAY | YEAR | | |
| Citizens for Pat Browne | | | | | | 2 | | \$ | 20,000.00 |
| Mailing Address | | | | | 5 | 20 | 2020 | | |
| City Allentown | | State PA | Zip Cod 18101 | e (Plus 4) | 5 | 20 | | | |
| Full Name of Contributing Committee Comcast Corporation & amp; NBCUniversal PAC - USA | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 1,000.00 |
| City Philadelphia | | State | Zip Cod | e (Plus 4) | 5 | 22 | 2020 | | |
| | | PA | 19103 | | | | | | |
| Full Name of Contributing | | | | | мо | DAY | YEAR | | |
| Pennsylvania Realtors PA | | | | | | | | \$ | 2,500.00 |
| Mailing Address | | State | Zin Cod | e (Plus 4) | 6 | 10 | 2020 | | |
| City Lemoyne | | PA | 17043 | e (Plus 4) | | | | | |
| Full Name of Contributing | Committee | • | | | NO | DAY | YEAR | | |
| For A Better Pennsylvani | a | | | | мо | DAY | TEAR | \$ | 1,000.00 |
| Mailing Address | | | | | 5 | 29 | 2020 | | _, |
| City Harrisburg | | State | Zip Cod | e (Plus 4) | | 25 | 2020 | | |
| | | РА | 17108 | | | | | | |
| Full Name of Contributing | | | | | мо | DAY | YEAR | | |
| Buchanan Ingersoll Com | mittee for Effec | tive State | | | | | | \$ | 500.00 |
| Mailing Address | | 1 | | | 6 | 10 | 2020 | | |
| City Pittsburgh | | State | - | e (Plus 4) | | | | | |
| | | PA | 15219 | | | | | | |
| Full Name of Contributing | Committee | | | | мо | DAY | YEAR | | |
| Be True to Yourself PAC | | | | | | | | \$ | 1,000.00 |
| Mailing Address | | 1 | | | 6 | 11 | 2020 | | |
| City Jenkintown | | State | Zip Cod | e (Plus 4) | | | | | |
| | | PA | 19046 | | | | | | |

| Full Name of Contributing Committee | | мо | DAY | YEAR | | |
|-------------------------------------|--------------------|---------------------------------------|------|-------------------------------|------|--|
| Friends of Camera Bartolotta | | 27.1 | | \$ 5,000.00 | | |
| Mailing Address | 6 | 22 | 2020 | -, | | |
| City Harrisburg | State PA | Zip Code (Plus 4) 171080025 | | | 2020 | |
| Enter Grand Total of Part C on Sche | n 3. | | | \$ PAGE TOTAL 31,000.00 | | |

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 | | | | Repo | porting Period | | | | | |
|---|--------------------|---------------|-----------------------------|------|----------------|---------------|---------------------|----------|------------------------|--|
| KILLION, THOMAS VICTORY COM | | | | Fron | n: | <u>5/19/2</u> | <u>020</u> To | : | <u>6/22/2020</u> | |
| | | | | | DA | ATE | | AI | MOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | 2 500 00 | |
| Dallas L. Krapf | | | | | МО | DAT | TLAK | \$ | 2,500.00 | |
| Mailing Address | | | | | 5 | 26 | 2020 | | | |
| City Exton | State | Zij | p Code (Plus | ; 4) | | | | | | |
| | PA | 19 | 341 | | | | | | | |
| Employer Name Krapf Group | | | | | Occupat | tion | Vice Cha | airman | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Zip Cod | e (Plus 4) | |
| | | | PA | | | | | 19380 | | |
| Full Name of Contributor | | | | | | | | | | |
| Daniel Morgans | | | | | мо | DAY | YEAR | \$ | 500.00 | |
| Mailing Address | | | | | - | 27 | 2020 | 1 | | |
| City Media | State | Zij | p Code (Plus | ; 4) | 5 | 27 | 2020 | | | |
| | PA | ₁₉ | 063 | | | | | | | |
| Employer Name Pilots' Assn. for the Ba | ay & R | | | | Occupat | tion | River Pil | ot | | |
| Employer Mailing Address/Principal Plac | | | City | | | State | | Zip Cod | e (Plus 4) | |
| | | | DE | | | | | 19720 | | |
| Full Name of Contributor | | | | | | • | | | | |
| Kelly D. Johnston | | | | | мо | DAY | YEAR | \$ | 500.00 | |
| Mailing Address | | | | | | | | 1 | | |
| City Newtown Square | State | Zij | p Code (Plus | ; 4) | 6 | 8 | 2020 | | | |
| | PA | 19 | 073 | | | | | | | |
| Employer Name Campbell Soup Co. | | | | | Occupat | tion | Corpora | te Execı | itive | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | · · | State | 0010010 | | e (Plus 4) | |
| | | | - | | | | | | | |
| | | | l Camden | | | I N1 | | 08103 | | |
| | | | Camden | | | NJ | | 08103 | | |
| Full Name of Contributor | | | Camden | | мо | NJ DAY | YEAR | \$ | 1,000.00 | |
| Robert V. Malagoli | | | Camden | | мо | - | YEAR | | 1,000.00 | |
| Robert V. Malagoli Mailing Address | State | 71 | | : 4) | мо 6 | - | YEAR 2020 | \$ | 1,000.00 | |
| Robert V. Malagoli | State | | p Code (Plus | : 4) | | DAY | | \$ | 1,000.00 | |
| Robert V. Malagoli Mailing Address City Garnet Valley | State PA | | | : 4) | 6 | DAY 11 | 2020 | \$ | 1,000.00 | |
| Robert V. Malagoli Mailing Address City Garnet Valley Employer Name Domus Inc. | PA | | p Code (Plus 1060 | : 4) | | DAY 11 | | \$ | | |
| Robert V. Malagoli Mailing Address City Garnet Valley | PA | | p Code (Plus | : 4) | 6 | DAY 11 | 2020 | \$ | 1,000.00 e (Plus 4) | |

| Full Name of Contributor | | | | мо | DAY | YEAR | * | 1 000 00 |
|---|-------------------------|------|---------------------------------|----------------|-------------------------|---------------------|-------------|---------------|
| C. Edward Hillis | | | | | | | \$ | 1,000.00 |
| Mailing Address | | | | 6 | 11 | 2020 | | |
| City Elkins Park | State | Zi | p Code (Plus 4) | | | | | |
| | I PA | 19 | 9027 | | | | | |
| Employer Name Domus Inc. | | | | Occupat | tion | Presider | nt | |
| Employer Mailing Address/Princip | al Place of Business | | City | | State | | Zip Code (| (Plus 4) |
| | | | Philadelphia | | PA | | 19144 | |
| Full Name of Contributor | | | | | | | | |
| Connor Woodward | | | | мо | DAY | YEAR | \$ | 1,000.00 |
| Mailing Address | | | | C C | 11 | 2020 | | |
| City Havertown | State | Zi | p Code (Plus 4) | 6 | 11 | 2020 | | |
| | PA | 19 | 9083 | | | | | |
| Employer Name Woodward Prop | erties | | | Occupat | tion | Chief Or | perating Of | ficer |
| Employer Mailing Address/Princip | | | City | - | State | | Zip Code (| |
| | | | Philadelphia | | PA | | 19131 | |
| Full Name of Contributor | | | | | 1 | | | |
| John M. Rayer | | | | мо | DAY | YEAR | \$ | 10,000.00 |
| Mailing Address | | | | | | | - | |
| City Media | State | Zi | p Code (Plus 4) | 6 | 12 | 2020 | | |
| | PA | | 9063 | | | | | |
| Employer Name Raver Excavatio | | • 1. | | Occupat | tion | Owner | · | |
| Employer Name Rayer Excavations LLC Employer Mailing Address/Principal Place of Business City | | | | Teccupa | State | Owner | Zip Code (| Plus 4) |
| | | | PA | | | | 19063 | (1034) |
| | | | FA | | | | 19005 | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 500.00 |
| Annemarie McFadden | | | | | | | - | |
| Mailing Address | State | 7: | n Codo (Blue 4) | - 6 | 12 | 2020 | | |
| City Springfield | | | p Code (Plus 4) | | | | | |
| Freedom Name Da Da La | I PA | 1 19 | 9064 | | I | I | <u> </u> | |
| Employer Name Remax Realty | | | l | Occupat | 1 | Adminis | trative Ass | |
| Employer Mailing Address/Principa | al Place of Business | | City | | State Zip Code (Plus 4) | | | (Plus 4) |
| | | | Media | | PA | | 19063 | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 1,000.00 |
| David N. Singer | | | | | | | ļ | 1,000.00 |
| Mailing Address | | | | 6 | 15 | 2020 | | |
| City Philadelphia | State | Zi | p Code (Plus 4) | | | | | |
| | l pa | 19 | 9107 | | I | I | 1 | |
| Employer Name Michael Singer F | | | 1 | Occupat | tion | Owner | | |
| Employer Mailing Address/Principal Place of Business City | | | | | State | | Zip Code | (Plus 4) |
| Employer Mailing Address/Princip | al Place of Business | | | | | | | |
| Employer Mailing Address/Princip | al Place of Business | | Philadelphia | | PA | | 19107 | |
| Employer Mailing Address/Princips Full Name of Contributor | al Place of Business | | Philadelphia | мо | 1 | YEAD | | F00.00 |
| | al Place of Business | | Philadelphia | мо | PA DAY | YEAR | 19107 \$ | 500.00 |
| Full Name of Contributor | al Place of Business | | Philadelphia | | DAY | | \$ | 500.00 |
| Full Name of Contributor Matt Pincus | al Place of Business | Zi | Philadelphia p Code (Plus 4) | мо 6 | 1 | YEAR 2020 | \$ | 500.00 |
| Full Name of Contributor Matt Pincus Mailing Address | | | | | DAY | | \$ | 500.00 |
| Full Name of Contributor Matt Pincus Mailing Address | State PA | | p Code (Plus 4) | | DAY 15 | | \$ | 500.00 |
| Full Name of Contributor Matt Pincus Mailing Address City West Chester | State PA Co. Inc. | | p Code (Plus 4) | - 6 | DAY 15 | 2020 | \$ | |

| Full Name of Contributor | | | | NO | DAY | VEAD | | | |
|--|--------------------|-------------------|--------------------|---------|-----------------------------|---------|------------------------------|-------------------------|--|
| Guntram Weissenberger Jr. | | | | мо | DAT | YEAR | \$ | 1,000.00 | |
| Mailing Address | | | | 6 | 16 | 2020 | | | |
| City King of Prussia | State | Zip Code (Plus 4) | | | 10 | | | | |
| | PA | ₁₉ | 9406 | | | | | | |
| Employer Name The Westover Com | panies | | | Occupat | ion | Preside | nt & | ; Owner | |
| Employer Mailing Address/Principal Place of Business City | | | | State | | Zip Cod | e (Plus 4) | | |
| King of Prussia | | | | | PA 194 | | | | |
| Full Name of Contributor Ben Altman | | | | | DAY | YEAR | \$ | 500.00 | |
| Mailing Address | | | | | | | | | |
| City Ambler | State | Zi | p Code (Plus 4) | 6 | 17 | 2020 | | | |
| | _{PA} | 19 | 9002 | | | | | | |
| Employer Name Altman Managemer | nt Co. | | | Occupat | Occupation Property Manager | | | | |
| Employer Mailing Address/Principal P | lace of Business | | City | | State | - | Zip Cod | e (Plus 4) | |
| | | | PA | | | | 19034 | | |
| Enter Grand Total of Part C on Sci | nedule I, Detailed | Sumr | nary Page, Section | on 3. | - | Γ | P | AGE TOTAL | |
| | | | | | | | \$ | 20,000.00 | |
| PA 19002 Employer Name Altman Management Co. Employer Mailing Address/Principal Place of Business City | | | | | 1 | | Zip Cod 19034 P | e (Plus 4) AGE TOTAL | |

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 Candidat | Name of Filing Committee or Candidate | | | Reporting Period | | | | | | |
|---|---------------------------------------|------------|----------|------------------|-----|------|----|---------|------|--|
| | | | | | | | | | | |
| | | | | D | ATE | | | 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 Schedule I, Detailed Summary Page, Section | | | | | | | \$ | | 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 | I | |
|---|------------------|----------------------|------------------|
| KILLION, THOMAS VICTORY COM | From: | <u>5/19/2020</u> то: | <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, 3 | | \$ | 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 | | | | | |
|--|--------------------|-------------------|------------------|----------|----|-----------|-----------|---------|
| F | | | | | | То: | | |
| | | DATE | | AMOUNT | | | | |
| Full Name of Contributor | мо | DAY | YEAR | | | | | |
| Mailing Address | | | | | | \$ | | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |
| Description of Contribution: | | | | | | - | | |
| Enter Grand Total of Part F on Sched Section 2. | ule II, In-Kind Co | ontributions Deta | iled Sum | mary Pag | e, | | PAGE TOTA | <u></u> |
| | | | | | | \$ | | 0.00 |

PAGE 13

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

| Name of Filing Committee or Candidate | | | Reporting Period | | | | | | |
|--|-------|--------------|------------------|-------|---------------------------|---------------------|------|------------------------|-------|
| | | | From: | | То: | | | | |
| | | | | | | DATE | | Α | MOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | Zip Code(Plu | ıs 4) | | | | | | |
| Employer of Contributor Occupation | | | | | | | | • | |
| Employer Mailing Address/Principal Place of Business | | City | | State | e Zip | Code(Plus 4) Descri | | iption 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

| Name of Filing Committee or Candidate | | | Reporting Period | | | | | | | |
|--|---------------------|-------------------|----------------------------|-------------|------------|-----|------------------|--|--|--|
| KILLION, THOMAS VICTORY COM | | | From | <u>5/1</u> | 9/2020 | То: | <u>6/22/2020</u> | | | |
| | | | | DATE | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Metropolitan Strategies LLC | | | | | | | | | | |
| Mailing Address | | | 5 | 21 | 2020 | \$ | 4,000.00 | | | |
| City Malvern State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | | |
| PA 19355 | | | Consult | ing | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| CB Strategies LLC | | | | | | | | | | |
| Mailing Address | | | 5 | 21 | 2020 | \$ | 4,200.00 | | | |
| City West Chester | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | PA 19380 | | | | Consulting | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| MJM Strategies LLC | | | | | | | | | | |
| Mailing Address | | | 5 | 21 | 2020 | \$ | 350.00 | | | |
| CityHarrisburgStateZip Code (Plus 4) | | | Description of Expenditure | | | | | | | |
| PA 171080624 | | | Consulting | | | | | | | |
| To Whom Paid | To Whom Paid | | | | YEAR | | | | | |
| MJM Strategies LLC | | | | | | | | | | |
| Mailing Address | | | 5 | 21 | 2020 | \$ | 15.50 | | | |
| City Harrisburg | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | PA | 171080624 | Postage | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| The Henderson Group | The Henderson Group | | | | | | | | | |
| Mailing Address | | | | 27 | 2020 | \$ | 750.00 | | | |
| City Media State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | | |
| PA 19063 | | | Rent | | | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | | |
| Raise the Money Inc. | | | | | | | | | | |
| Mailing Address | | | 5 | 29 | 2020 | \$ | 26.47 | | | |
| City Little Rock | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| AR 72221 | | | Fundraising Expense | | | | | | | |

| | | | | | | | | - 15 | | | |
|---|-----------------------------|-------|----------------------------|---------------------------------|-------------------------------------|----------|----|----------|--|--|--|
| To W | nom Paid | | | мо | DAY | YEAR | | | | | |
| Majority Strategies LLC | | | | | | | | | | | |
| Mailing Address | | | | 6 | 10 | 2020 | \$ | 2,000.00 | | | |
| City Dallas State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | | |
| TX 752679219 | | | | | Advertising | | | | | | |
| To W | nom Paid | | | мо | DAY | YEAR | | | | | |
| Cody | Bright | | | MO | | TEAK | | | | | |
| Mailin | g Address | | | 6 | 10 | 2020 | \$ | 25.00 | | | |
| City West Chester State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | | | |
| PA 19380 | | | | | Reimbursement - Advertising Expense | | | | | | |
| To W | nom Paid | | | | | | | | | | |
| Cody | Bright | | | мо | DAY | YEAR | | | | | |
| Mailin | g Address | | | 6 | 10 | 2020 | \$ | 948.22 | | | |
| City | West Chester | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | PA | 19380 | Reimbursement - Meeting Expense | | | | | | | |
| To W | nom Paid | | | мо | DAY | YEAR | | | | | |
| Barsz | Gowie Amon & amp; Fultz LLC | 2 | | MO | | | | | | | |
| Mailing Address | | | | 6 | 10 | 2020 | \$ | 1,500.00 | | | |
| City | Media | State | Zip Code (Plus 4) |) Description of Expenditure | | | | | | | |
| | | PA | 19063 | Accounting Services | | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| TD Card Services | | | | MO | | TEAR | | | | | |
| Mailin | g Address | | | 6 | 10 | 2020 | \$ | 6,600.00 | | | |
| City | Cherry Hill | State | Zip Code (Plus 4) | Descrip | Description of Expenditure | | | | | | |
| | | ŊJ | 080340372 | Software | | | | | | | |
| To W | nom Paid | | | мо | DAY | YEAR | | | | | |
| TD Ca | ard Services | | | MO | | | | | | | |
| Mailin | g Address | | | 6 | 10 | 2020 | \$ | 35.00 | | | |
| City | Cherry Hill | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | NJ | 080340372 | Annual Fee | | | | | | | |
| To W | nom Paid | | | | DAY | YEAR | | | | | |
| TD Ca | ard Services | | | мо | | TEAR | | | | | |
| Mailing Address | | | | | 10 | 2020 | \$ | 91.56 | | | |
| City | Cherry Hill | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | NJ | 080340372 | Storage | | | | | | | |
| To Whom Paid | | | | MO | DAY | YEAR | | | | | |
| TD Card Services | | | | мо | DAT | TEAR | | | | | |
| TD Ca | | | | | | | 1. | | | | |
| | g Address | | | 6 | 10 | 2020 | \$ | 389.90 | | | |
| | | State | Zip Code (Plus 4) | | 10 tion of Exp | | \$ | 389.90 | | | |

| To Whom Paid | | | | мо | DAY | YEAR | | | |
|---|--|-------|----------------------------|----------------------------|-------------|----------|------------|----------|--|
| Ресо | | | | мо | | TLAK | | | |
| Mailing Address | | | 6 | 10 | 2020 | \$ | 247.59 | | |
| City Philadelphia State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | |
| | | PA | 19101 | Utilities | | | | | |
| To Whe | om Paid | | | мо | DAY | YEAR | | | |
| Verizo | n Wireless | | | | | | | | |
| Mailing | J Address | | | 6 | 10 | 2020 | \$ | 100.66 | |
| City | Lehigh Valley | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | | PA | 180025505 | Utilities | | | | | |
| To Who | om Paid | | | мо | DAY | YEAR | | | |
| CB Str | ategies LLC | | | - | | | | | |
| Mailing Address | | | | 6 | 15 | 2020 | \$ | 4,200.00 | |
| City | West Chester | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | |
| | | PA | 19380 | Consulting | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | |
| Metropolitan Strategies LLC | | | | | | | | | |
| Mailing Address | | | 6 | 17 | 2020 | \$ | 4,000.00 | | |
| City Malvern State Zip Code (Plus 4) | | | Descript | tion of Exp | enditure | | | | |
| PA 19355 | | | | Consulting | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | |
| Raise the Money Inc. | | | | | | | | | |
| Mailing | Address | | | 6 | 22 | 2020 | \$ | 143.85 | |
| City | Little Rock | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | |
| AR 72221 | | | | Bank Charges | | | | | |
| To Whe | om Paid | | | мо | DAY | YEAR | | | |
| The Chambers Group | | | | | | | | | |
| Mailing Address | | | | 6 | 22 | 2020 | \$ | 639.24 | |
| City | Malvern State Zip Code (Plus 4) Description of Expenditure | | | | | | | | |
| | PA 19355 Printing | | | | | | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | | PAGE TOTAL | | |
| | | | | | | \$ | 30,262.99 | | |