

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 : 8100237		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: PENNSYLVANIA APARTMENT ASSOCIATION											
Street Address: ONE BALA PLAZA STE 515											
City: BALA CYNWYD				State: PA		Zip Code: 19004-0000					
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.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	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		
		9	15	2020		10	19	2020			
A. Amount Brought Forward From Last Report					\$ 240,811.56						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 4,779.70						
C. Total Funds Available (Sum Of Lines A and B)					\$ 245,591.26						
D. Total Expenditures (From Schedule III)					\$ 16,581.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 229,010.26						
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
PENNSYLVANIA APARTMENT ASSOCIATION	From: <u>9/15/2020</u> To: <u>10/19/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

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)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

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)	\$ 4,779.70
TOTAL for the Reporting Period (3)	\$ 4,779.70

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.)	\$ 4,779.70
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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)					

PAGE TOTAL	
\$	0.00

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	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.

PAGE TOTAL
\$ 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 PENNSYLVANIA APARTMENT ASSOCIATION	Reporting Period From: <u>9/15/2020</u> To: <u>10/19/2020</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Alexander Stefanelli							
Mailing Address 720 Green Meadow Drive				9	15	2020	\$ 4,779.70
City Douglassville	State PA	Zip Code (Plus 4) 19518					
Employer Name The Westover Companies				Occupation Real Estate			
Employer Mailing Address/Principal Place of Business 550 American Ave			City King of Prussia	State PA	Zip Code (Plus 4) 19406		

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

PAGE TOTAL
\$ 4,779.70

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:
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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.

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	
PENNSYLVANIA APARTMENT ASSOCIATION		From: <u>9/15/2020</u> To: <u>10/19/2020</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

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
PENNSYLVANIA APARTMENT ASSOCIATION	From <u>9/15/2020</u> To: <u>10/19/2020</u>

DATE				AMOUNT		
To Whom Paid Citizens Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address PO Box 7000			9	30	2020	
City Providence	State RI	Zip Code (Plus 4) 02940	Description of Expenditure Service Charge			
To Whom Paid Citizens for Gleim			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 624			9	15	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Fundraiser			
To Whom Paid Citizens for Stan Saylor			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO Box 624			9	15	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Fundraiser			
To Whom Paid Friends of Bob Mensch			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO Box 624			9	15	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Fundraiser			
To Whom Paid Sue Helm for State House Committee			MO	DAY	YEAR	\$ 2,000.00
Mailing Address PO Box 624			9	15	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Fundraiser			

To Whom Paid Kerry Benninghoff for Representative			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO Box 624			9	15	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Fundraiser			

To Whom Paid Citizens for Jordan Harris			MO	DAY	YEAR	\$ 1,500.00
Mailing Address PO Box 32097			9	17	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19146	Description of Expenditure Fundraiser			

To Whom Paid Friends of Scott Martin			MO	DAY	YEAR	\$ 500.00
Mailing Address 802 Lightfoot Drive			9	23	2020	
City Lancaster	State PA	Zip Code (Plus 4) 17602	Description of Expenditure Fundraiser			

To Whom Paid Vote Kathy for Philly			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 28029			9	23	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19131	Description of Expenditure Fundraiser			

To Whom Paid Pennsylvania Apartment Association			MO	DAY	YEAR	\$ 5,578.00
Mailing Address One Bala Plaza Suite 515			10	13	2020	
City Bala Cynwyd	State PA	Zip Code (Plus 4) 19004	Description of Expenditure Reimbursement for Fundraiser			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 16,581.00

