

# 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 : 2000190		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: AFT-PENNSYLVANIA										
Street Address: 3031 WALTON RD, BUILDING A, STE 340										
City: PLYMOUTH MEETING				State: PA		Zip Code: 19462				
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					\$ 149,231.21					
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 939.83					
C. Total Funds Available (Sum Of Lines A and B)					\$ 150,171.04					
D. Total Expenditures (From Schedule III)					\$ 105,000.00					
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 45,171.04					
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

Signature

Printed Name

My Commission Expires

Email

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

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

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 939.83

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

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

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 939.83
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	0.00

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)					

<b>PAGE TOTAL</b>	
\$	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.

<b>PAGE TOTAL</b>
\$ 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	Reporting Period
	From: <span style="float: right;">To:</span>

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

<b>PAGE TOTAL</b>
\$ 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
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

				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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
AFT-PENNSYLVANIA		From: <u>9/15/2020</u> To: <u>10/19/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00



# SCHEDULE III STATEMENT OF EXPENDITURES

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

DATE				AMOUNT		
To Whom Paid PA HDCC			MO	DAY	YEAR	\$ 25,000.00
Mailing Address PO BOX 555			9	28	2020	
City HARRISBURGH	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid FRIENDS OF JULIE SLOMSKI			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 5510 MILL STREET			9	28	2020	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure CONTRIBUTION			
To Whom Paid GEORGE SCOTTFOR PA-15			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 1063			9	29	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid FRIENDS OF ANN MITCHELL			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 261			9	29	2020	
City RICHBORO	State PA	Zip Code (Plus 4) 18954	Description of Expenditure CONTRIBUTION			
To Whom Paid FRIENDS OF LISSA			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 107			9	29	2020	
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101	Description of Expenditure CONTRIBUTION			

To Whom Paid FRIENDS OF KEVIN BRANCO			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 6003 VALLEY FORGE DRIVE			9	29	2020	
City COOPERBURG	State PA	Zip Code (Plus 4) 18036	Description of Expenditure CONTRIBUTION			

To Whom Paid ELECT EMILY 4 PA			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 1242			9	29	2020	
City WEXFORD	State PA	Zip Code (Plus 4) 15090	Description of Expenditure CONTRIBUTION			

To Whom Paid FRIENDS OF ANTON ANDREW			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 402			9	29	2020	
City CHADDS FORD	State PA	Zip Code (Plus 4) 19317	Description of Expenditure CONTRIBUTION			

To Whom Paid FRIENDS OF NANCY GUENST			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 206 ACADEMY ROAD			9	29	2020	
City HATBORO	State PA	Zip Code (Plus 4) 19040	Description of Expenditure CONTRIBUTION			

To Whom Paid JOHN KANE FOR SENATE			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 209 HARDING AVENUE			9	29	2020	
City HAVERTOWN	State PA	Zip Code (Plus 4) 19083	Description of Expenditure CONTRIBUTION			

To Whom Paid FAMILY AND FRIENDS OF JANET DIAZ			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 1653 LITITZ PIKE #207			9	29	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 17601	Description of Expenditure CONTRIBUTION			

To Whom Paid MARLENE KATZ FOR PA			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO BOX 386			9	29	2020	
City JAMISON	State PA	Zip Code (Plus 4) 18929	Description of Expenditure CONTRIBUTION			

To Whom Paid ELECT GARY SPILLANE			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO BOX 34			9	29	2020	
City CHALFONT	State PA	Zip Code (Plus 4) 18914	Description of Expenditure CONTRIBUTION			

To Whom Paid FRIENDS OFJONATHAN KASSA FOR STATE REP			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO BOX 771			9	29	2020	
City MONTGOMERYVILLE	State PA	Zip Code (Plus 4) 18936	Description of Expenditure CONTRIBUTION			

To Whom Paid KNOLL 4 PA 44			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 157 TOMSRUN ROAD			9	29	2020	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15237	Description of Expenditure CONTRIBUTION			

To Whom Paid FRIENDS OF HAROLD M HAYNES			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 2148 Andrea Drive			9	29	2020	
City Bensalem	State PA	Zip Code (Plus 4) 19020	Description of Expenditure CONTRIBUTION			

To Whom Paid FRIENDS OF JILL DENNIN			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO BOX 1014			9	29	2020	
City BOYERTOWN	State PA	Zip Code (Plus 4) 19512	Description of Expenditure CONTRIBUTION			

<b>To Whom Paid</b> PAUL FOR PA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> PO BOX 42			9	29	2020	
<b>City</b> KIMBERTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19442	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>To Whom Paid</b> FRIENDS OF JENNIFER O'MARA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> PO BOX 398			9	29	2020	
<b>City</b> SPRINGFIELD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19064	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>To Whom Paid</b> FREINDS OF JOE CIRESI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> 120 CONNOR DRIVE			9	29	2020	
<b>City</b> LIMERICK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19468	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>To Whom Paid</b> FRIENDS OF WENDY ULLMAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> PO BOX 16			9	29	2020	
<b>City</b> FOUNTAINVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18923	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>To Whom Paid</b> DEB CIAMACCA FOR PA 168			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,000.00
<b>Mailing Address</b> 301 RADNOR STREET			9	29	2020	
<b>City</b> MEDIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 105,000.00

