

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 :		20170364		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: MariaforPA												
Street Address:												
City: Spring House						State: PA		Zip Code: 19477				
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.	30 DAY POST-ELECTION	6. X	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			
		10	20	2020		11	23	2020				
A. Amount Brought Forward From Last Report						\$ 6,866.68						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,493.24						
C. Total Funds Available (Sum Of Lines A and B)						\$ 10,359.92						
D. Total Expenditures (From Schedule III)						\$ 5,828.52						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 4,531.40						
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
MariaforPA	From: <u>10/20/2020</u> To: <u>11/23/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 55.24

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)	\$ 438.00
TOTAL for the Reporting Period (2)	\$ 438.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 3,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 3,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 3,493.24
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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)**

Name of Filing Committee or Candidate MariaforPA	Reporting Period From: <u>10/20/2020</u> To: <u>11/23/2020</u>
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DATE	AMOUNT
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Full Name of Contributor Stephen Hecht			MO	DAY	YEAR	\$ 188.00
Mailing Address			10	20	2020	
City Willow Grove	State PA	Zip Code (Plus 4) 19090				

Full Name of Contributor JOSEPH SILVERSTEIN			MO	DAY	YEAR	\$ 250.00
Mailing Address			10	22	2020	
City Jenkintown	State PA	Zip Code (Plus 4) 190462918				

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

PAGE TOTAL
\$ 438.00

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 MariaforPA	Reporting Period From: <u>10/20/2020</u> To: <u>11/23/2020</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
Highmark Health PAC				11	2	2020
Mailing Address						
City	Camp Hill	State	Zip Code (Plus 4)			
		PA	170111702			
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
Merck Employees Political Action Committee				10	20	2020
Mailing Address						
City	Washington	State	Zip Code (Plus 4)			
		DC	200042601			
						\$ 1,500.00
Full Name of Contributing Committee				MO	DAY	YEAR
Pennsylvania Association of Nurse Anesthetists				10	20	2020
Mailing Address						
City	Harrisburg	State	Zip Code (Plus 4)			
		PA	171011378			
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
Pennsylvania Optometric PAC				10	20	2020
Mailing Address						
City	Harrisburg	State	Zip Code (Plus 4)			
		PA	171011124			
						\$ 500.00

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

PAGE TOTAL
\$ 3,000.00

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	

PAGE TOTAL	
\$	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
	From: To:

			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	
MariaforPA		From: <u>10/20/2020</u> To: <u>11/23/2020</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 RECIEVED - 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:

			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
MariaforPA	From <u>10/20/2020</u> To: <u>11/23/2020</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
ActBlue				
Mailing Address	11	4	2020	\$ 5.38
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure Fee	
To Whom Paid	MO	DAY	YEAR	
ActBlue				
Mailing Address	11	10	2020	\$ 19.14
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure Fee	
To Whom Paid	MO	DAY	YEAR	
Hellenic News of America				
Mailing Address	10	26	2020	\$ 165.00
City Concordville	State PA	Zip Code (Plus 4) 193310465	Description of Expenditure advertisement	
To Whom Paid	MO	DAY	YEAR	
Montgomery County Democratic Committee				
Mailing Address	11	2	2020	\$ 250.00
City Norristown	State PA	Zip Code (Plus 4) 194040857	Description of Expenditure fall dinner	
To Whom Paid	MO	DAY	YEAR	
NGP Van				
Mailing Address	11	2	2020	\$ 265.00
City Washington	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure fee	
To Whom Paid	MO	DAY	YEAR	
Senate Democratic Campaign Committee				
Mailing Address	10	29	2020	\$ 5,000.00
City Philadelphia	State PA	Zip Code (Plus 4) 191029358	Description of Expenditure Contribution	

To Whom Paid USPS			MO	DAY	YEAR	\$ 84.00
Mailing Address			10	20	2020	
City Abington	State PA	Zip Code (Plus 4) 190012633	Description of Expenditure PO Box Renewal Fee			

To Whom Paid Wells Fargo			MO	DAY	YEAR	\$ 30.00
Mailing Address			10	29	2020	
City San Francisco	State CA	Zip Code (Plus 4) 941041207	Description of Expenditure fee			

To Whom Paid Wells Fargo			MO	DAY	YEAR	\$ 10.00
Mailing Address			11	9	2020	
City San Francisco	State CA	Zip Code (Plus 4) 941041207	Description of Expenditure fee			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 5,828.52

