# **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 2017	0119			Report Filed B		CANDI	DATE		СОМІ	MITTEE	✓	LOB	BYIST		
Name of Filing	Committee, Candid	ate or L	obbyist:			-	ICAN PEN	NSYLV	/ANI	A FUND	)					
Street Address:	552 ELKNUD	LANE														
City:	JOHNSTOWN						State: PA Zip Code:					<b>de:</b> 15	15905-2064			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	2ND FRIDAY PRE- 2. 3 PRIMARY F				POST- 3.			AMENDI REPORT		Yes	N	0	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	30 DA ELEC		POST- 6.			TERMIN REPORT		Yes	N	0	$\checkmark$		
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2020				NG METHO CHECK OI				PAPER		$\checkmark$	DISK	ЕТТЕ	
Name of Office	Sought by Candida	te:					DATE O	F ELEC	CTIC	N	District Number		Par	ty Code	Cour	
	2 1							DAY	Y	AR	rtuinber	coue			10000	
									3	2020	<b> </b>	(SEE INS	STRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		11 24	- 20	020 <b>T</b>	0	12	3	31	2020	_					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			2,3	334.82						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sched	dule I)	\$			0.00							
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			2,3	334.82						
D. Total Expen	ditures (From Sch	edule II	I)			\$			1,0	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			1,3	34.82						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	e II)	\$				0.00	4					
G. Unpaid Deb	ts And Obligations	(From S	Schedule I\	/)		\$				0.00		·				
				AFF:	IDAVI	T SE	CTION									
PART I - If this i	s a Committee rep	ort, trea	surer sign	here. I	f this is	a Car	ndidate re	eport, c	andi	date sig	gn here.					
I swear (or affirm correct and compl	) that this report, inc ete.	luding the	e attached so	hedules	filed on	paper	or by elect	ronic me	edium	, are to	the best o	of my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	scribed before me this day of	5	20						5	Signaturo	e of Perso	n Submitt	ing Rep	ort		_
	Signatu	Ire				-					Prir	ited Name				_
My Commission E	2										Ema	nil				_
	мо	D	AY	YR		-		Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend	) that to the best of r ed.	ny knowle	edge and bel	ief this	political	comm	ittee has n	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subse	cribed before me this day of		20							s	ignature	of Candida	ite			-
						-					Printe	ed Name				-
My Commission Ex	Signature pires					-					Ema	nil				-
	мо		AY	YR		-		Area	Code		D	aytime Te	elephor	e Num	ber	-
		0		IK							5	-,				

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** GREAT AMERICAN PENNSYLVANIA FUND From: <u>11/24/2020</u> **To:** 12/31/2020 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 or Candidate				porting I	Period			
Fro				From: To:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
							Γ	PAGE TOTAL

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

0.00

\$

PAGE 3

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 Candidat	e			orting P	eriod			
	From: To:							
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
PAGE TOTAL								
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						Γ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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 I		
	From:		То:
		DATE	AMOUNT

				D	ATE		АМ	OUNT
Full Name of Contributor					DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Place of City Business				State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

### 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	Name of Filing Committee or Candidate			ting Perio	od				
				From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description					1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y 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 Perio	od	
GREAT AMERICAN PENNSYLVANIA FUND	From:	<u>11/24/2020</u> <b>то:</b>	<u>12/31/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
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, 1		\$	0.00

### SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

### VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Reporting Period					
	From:			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 Schedule II, In-Kind Contributions Details Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

0.00

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	otion o	of Contribution	
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Summary Page, Section 3.

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period						
GREAT AMERICAN PENNSYLVANIA FUN	From	<u>11/24</u>	То:	<u>12/31/2020</u>								
	DATE AMOU											
<b>To Whom Paid</b> Garrity for PA	мо	DAY	YEAR									
Mailing Address PO Box 62224			12	18	2020	\$	1,000.00					
CityHarrisburgStateZip Code (Plus 4)PA17106				Description of Expenditure Campaign Contribution								
					PAGE TOTAL							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	1,000.00					