

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20190142		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FAMILY AND FRIENDS OF JANET DIAZ												
<b>Street Address:</b> 1653 LITITZ PIKE #207												
<b>City:</b> LANCASTER						<b>State:</b> PA			<b>Zip Code:</b> 17601			
<b>TYPE OF REPORT</b>  (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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2020		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
SENATOR IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	13	STS	DEM	36
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		11	24	2020		12	31	2020				
<b>A. Amount Brought Forward From Last Report</b>						\$ 73,090.72						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 533.38						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 73,624.10						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 3,160.58						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 70,463.52						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FAMILY AND FRIENDS OF JANET DIAZ	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 399.29

<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>	\$ 134.09
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 134.09

<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>	\$ 533.38
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**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.**

<b>Name of Filing Committee or Candidate</b>  FAMILY AND FRIENDS OF JANET DIAZ	<b>Reporting Period</b>  <b>From:</b> <u>11/24/2020</u> <b>To:</b> <u>12/31/2020</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> NEIGHBORS FOR KEVIN RESSLER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 134.09
<b>Mailing Address</b> 14 LOCUST ST			12	28	2020	
<b>City</b> LANCASTER	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  176023608				

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

<b>PAGE TOTAL</b>
\$ 134.09

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>	
FAMILY AND FRIENDS OF JANET DIAZ		From: <u>11/24/2020</u> To: <u>12/31/2020</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 II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FAMILY AND FRIENDS OF JANET DIAZ	From <u>11/24/2020</u> To: <u>12/31/2020</u>

DATE				AMOUNT
<b>To Whom Paid</b> ACTBLUE	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 441146	12	3	2020	\$ 105.58
<b>City</b> WEST SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> CONTRIBUTION PROCESSING FEES	
<b>To Whom Paid</b> JACQUELINE CASTRO	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 816 UNION ST	12	15	2020	\$ 300.00
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 176035440	<b>Description of Expenditure</b> STAFF BONUS	
<b>To Whom Paid</b> PASQUALE CIPOLLONI	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 269 HEMLOCK LN	12	15	2020	\$ 700.00
<b>City</b> SPRINGFIELD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190641112	<b>Description of Expenditure</b> STAFF BONUS	
<b>To Whom Paid</b> FEDEX OFFICE	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1958 FRUITVILLE PIKE	12	1	2020	\$ 11.58
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 176013916	<b>Description of Expenditure</b> PRINTING	
<b>To Whom Paid</b> FEDEX OFFICE	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1958 FRUITVILLE PIKE	12	2	2020	\$ 8.76
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 176013916	<b>Description of Expenditure</b> COPYING AND PRINTING	

To Whom Paid FEDEX OFFICE			MO	DAY	YEAR	\$ 26.15
Mailing Address 1958 FRUITVILLE PIKE			12	2	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 176013916	Description of Expenditure SHIPPING			

To Whom Paid STUART GOLDBERG			MO	DAY	YEAR	\$ 25.00
Mailing Address 575 RED MAPLE WAY			12	2	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 176032005	Description of Expenditure REFUND			

To Whom Paid GOOGLE LLC			MO	DAY	YEAR	\$ 55.54
Mailing Address 1600 AMPHITHEATRE PKWY			12	1	2020	
City MOUNTAIN VIEW	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure EMAIL HOSTING			

To Whom Paid ROBIN MICHALI			MO	DAY	YEAR	\$ 8.33
Mailing Address 2696 S SIERRA MADRE			12	15	2020	
City PALM SPRINGS	State CA	Zip Code (Plus 4) 922649454	Description of Expenditure REFUND			

To Whom Paid NGPVAN INC			MO	DAY	YEAR	\$ 371.00
Mailing Address 1445 NEW YORK AVE NW STE 200			12	1	2020	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure FINANCE SOFTWARE			

To Whom Paid KONSTANTIN TEMIN			MO	DAY	YEAR	\$ 100.00
Mailing Address 215 LAPORE DR			12	1	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 176022648	Description of Expenditure CAMPAIGN EXPENSES			

<b>To Whom Paid</b> OLIVER TRUONG			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 121 HERITAGE RD			12	15	2020	
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 176021595	<b>Description of Expenditure</b> STAFF BONUS			

  

<b>To Whom Paid</b> VANTIV, INC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8500 GOVERNORS HILL DR			12	9	2020	
<b>City</b> SYMMES TWP	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 452491384	<b>Description of Expenditure</b> CONTRIBUTION PROCESSING FEES			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 3,160.58

