

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 :		20140157		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Friends of Joe Torsella												
Street Address: PO Box 626												
City: Flourtown						State: PA			Zip Code: 19031			
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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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
STATE TREASURER						MO	DAY	YEAR	-1	TRE	DEM	46
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	24	2020		12	31	2020				
A. Amount Brought Forward From Last Report						\$ 91,830.46						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 526.17						
C. Total Funds Available (Sum Of Lines A and B)						\$ 92,356.63						
D. Total Expenditures (From Schedule III)						\$ 15,391.05						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 76,965.58						
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
Friends of Joe Torsella	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 26.00

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)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.17

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.)	\$ 526.17
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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.**

Name of Filing Committee or Candidate	Reporting Period
	From: To:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$ 0.00

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	Reporting Period
	From: To:

DATE			AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

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 Friends of Joe Torsella	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Ravi Batra Esq							
Mailing Address 142 Lexington Ave				11	25	2020	\$ 500.00
City New York	State NY	Zip Code (Plus 4) 100168108					
Employer Name The Law Firm of Ravi Batra, P.C.				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 142 Lexington Ave			City New York	State NY	Zip Code (Plus 4) 100168108		

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

PAGE TOTAL
\$ 500.00

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 Friends of Joe Torsella	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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				DATE			AMOUNT
Full Name				MO	DAY	YEAR	
PNC Bank							
Mailing Address 1801 Market St Lbby H				12	31	2020	\$ 0.08
City Philadelphia	State PA	Zip Code (Plus 4) 191031602					
Receipt Description Interest							

Full Name				MO	DAY	YEAR	
PNC Bank							
Mailing Address 1801 Market St Lbby H				11	30	2020	\$ 0.09
City Philadelphia	State PA	Zip Code (Plus 4) 191031602					
Receipt Description Interest							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.17

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	
Friends of Joe Torsella		From: <u>11/24/2020</u> To: <u>12/31/2020</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.					<div>PAGE TOTAL</div> <div>\$ 0.00</div>	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Friends of Joe Torsella	From <u>11/24/2020</u> To: <u>12/31/2020</u>

DATE				AMOUNT		
To Whom Paid PNC Bank			MO	DAY	YEAR	\$ 113.00
Mailing Address 1801 Market St Lbby H			12	1	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191031602	Description of Expenditure Service Charge			
To Whom Paid Daniel McNamara			MO	DAY	YEAR	\$ 9,500.00
Mailing Address 705 Wharton St			11	30	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191475121	Description of Expenditure Consulting			
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 102.99
Mailing Address 366 Summer St			12	3	2020	
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure Merchant fees			
To Whom Paid Google Apps			MO	DAY	YEAR	\$ 77.76
Mailing Address 1600 Amphitheatre Pkwy			12	8	2020	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Web & Email Hosting			
To Whom Paid Vantiv			MO	DAY	YEAR	\$ 85.59
Mailing Address 8500 Governors Hill Dr			12	9	2020	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Merchant Fee			

To Whom Paid Strassheim Graphic Design & Press Corp			MO	DAY	YEAR	\$ 524.22
Mailing Address 1500 Spring Garden St Ste 225			12	14	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191304600	Description of Expenditure Printing services			

To Whom Paid The Law Office of Adam C. Bonin			MO	DAY	YEAR	\$ 1,250.00
Mailing Address 121 S Broad St Ste 400			12	10	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191074544	Description of Expenditure Legal services			

To Whom Paid Samantha Semanek Renninger			MO	DAY	YEAR	\$ 3,737.49
Mailing Address 926 Irving St			12	1	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191075718	Description of Expenditure Consulting + Reimbursement: Zoom subscription			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 15,391.05

