

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 :		20150043		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: WHITE, MARTINA FRIENDS OF												
Street Address:												
City: PHILADELPHIA						State: PA			Zip Code: 19114			
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
						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			
		11	24	2020		12	31	2020				
A. Amount Brought Forward From Last Report						\$ 17,498.98						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,500.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 20,998.98						
D. Total Expenditures (From Schedule III)						\$ 9,929.28						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 11,069.70						
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
WHITE, MARTINA FRIENDS OF	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)	\$ 0.00

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)	\$ 3,000.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 3,500.00

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.)	\$ 3,500.00
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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:

DATE			AMOUNT
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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 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 WHITE, MARTINA FRIENDS OF	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	2,500.00
TRANSPORTATION CONSTRUCT INDUST PAC (TCI-PAC)								
Mailing Address								
City		HARRISBURG	State	PA	Zip Code (Plus 4)		17102	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
PFIZER PAC								
Mailing Address								
City		NEW YORK	State	NY	Zip Code (Plus 4)		10017	

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

PAGE TOTAL
\$ 3,000.00

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 WHITE, MARTINA FRIENDS OF	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	
Monique Silvi				\$ 500.00
Mailing Address		12	9	2020
City Villanova	State PA	Zip Code (Plus 4) 19085		
Employer Name Homemaker		Occupation Homemaker		
Employer Mailing Address/Principal Place of Business		City Villanova	State PA	Zip Code (Plus 4) 19085

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	Reporting Period From: _____ To: _____
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			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	
WHITE, MARTINA FRIENDS OF		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:
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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.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
WHITE, MARTINA FRIENDS OF	From <u>11/24/2020</u> To: <u>12/31/2020</u>

				DATE	AMOUNT		
To Whom Paid				MO	DAY	YEAR	\$ 3.43
UPS Store				11	27	2020	
Mailing Address							
City	Harrisburg	State	PA	Zip Code (Plus 4)	17112	Description of Expenditure	
						Printing	
To Whom Paid				MO	DAY	YEAR	\$ 3.00
TD Bank				11	30	2020	
Mailing Address							
City	Feasterville Trevose	State	PA	Zip Code (Plus 4)	19053	Description of Expenditure	
						Bank Fee	
To Whom Paid				MO	DAY	YEAR	\$ 3.00
TD Bank				12	31	2020	
Mailing Address							
City	Feasterville Trevose	State	PA	Zip Code (Plus 4)	19053	Description of Expenditure	
						Bank Fee	
To Whom Paid				MO	DAY	YEAR	\$ 6,827.97
Lauren E Casper				12	23	2020	
Mailing Address							
City	Wyndmoor	State	PA	Zip Code (Plus 4)	19038	Description of Expenditure	
						Fundraising Services/Political Consulting/Reimbursement for Supporter Gifts	
To Whom Paid				MO	DAY	YEAR	\$ 1,750.00
Push Digital LLC				12	15	2020	
Mailing Address							
City	Charleston	State	SC	Zip Code (Plus 4)	29407	Description of Expenditure	
						Digital Media Advertisements	
To Whom Paid				MO	DAY	YEAR	\$ 620.00
News Paper Media Group				12	10	2020	
Mailing Address							
City	Cherry Hill	State	NJ	Zip Code (Plus 4)	08002	Description of Expenditure	
						Advertisement	

To Whom Paid USPS			MO	DAY	YEAR	\$ 106.00
Mailing Address			12	9	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 19154	Description of Expenditure PO Box Permit			

To Whom Paid Jukus Campaign Finance PLLC			MO	DAY	YEAR	\$ 615.88
Mailing Address			12	31	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Accounting and Compliance Service/Shipping Reimbursement			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 9,929.28

