

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 : 2020C0108		Report Filed By :		CANDIDATE <input checked="" type="checkbox"/>		COMMITTEE		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: DEL VALLE, ANDRE											
Street Address:											
City:				State:		Zip Code: 19125					
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 <input checked="" type="checkbox"/>	No		
	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	175	STH	DEM	51
					11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		7	1	2020			10	20	2020		
A. Amount Brought Forward From Last Report					\$		372.49				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		890.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		1,262.49				
D. Total Expenditures (From Schedule III)					\$		1,262.49				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		0.00				
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

Signature

Printed Name

My Commission Expires

MO DAY YR

Email

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

Signature

Printed Name

My Commission Expires

MO DAY YR

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
DEL VALLE, ANDRE	From: <u>7/1/2020</u> To: <u>10/20/2020</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)	\$ 100.00
TOTAL for the Reporting Period (2)	\$ 100.00

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)	\$ 790.00
TOTAL for the Reporting Period (3)	\$ 790.00

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.)	\$ 890.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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
DEL VALLE, ANDRE	From: <u>7/1/2020</u> To: <u>10/20/2020</u>

DATE				AMOUNT
Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
Nilba Sanchez				
Mailing Address 5023 Rorer St				
City Philadelphia	State PA	Zip Code (Plus 4) 19120	7 17 2020	

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

PAGE TOTAL
\$ 100.00

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 DEL VALLE, ANDRE	Reporting Period From: <u>7/1/2020</u> To: <u>10/20/2020</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Andre Del Valle							
Mailing Address 2668 Collins St				8	10	2020	\$ 500.00
City Philadelphia	State PA	Zip Code (Plus 4) 19125					
Employer Name Pennsylvania Voice				Occupation Voting Access Campaign Manager			
Employer Mailing Address/Principal Place of Business 123 S. Broad Street STE 630			City Philadelphia		State PA	Zip Code (Plus 4) 19109	

Full Name of Contributor				MO	DAY	YEAR	
Andre Del Valle							
Mailing Address 2668 Collins St				9	14	2020	\$ 250.00
City Philadelphia	State PA	Zip Code (Plus 4) 19125					
Employer Name Pennsylvania Voice				Occupation Voting Access Campaign Manager			
Employer Mailing Address/Principal Place of Business 123 S. Broad Street STE 630			City Philadelphia		State PA	Zip Code (Plus 4) 19109	

Full Name of Contributor				MO	DAY	YEAR	
Andre Del Valle							
Mailing Address 2668 Collins St				10	6	2020	\$ 40.00
City Philadelphia	State PA	Zip Code (Plus 4) 19125					
Employer Name Pennsylvania Voice				Occupation Voting Access Campaign Manager			
Employer Mailing Address/Principal Place of Business 123 S. Broad Street STE 630			City Philadelphia		State PA	Zip Code (Plus 4) 19109	

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

PAGE TOTAL	
\$	790.00

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				
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	
DEL VALLE, ANDRE		From: <u>7/1/2020</u> To: <u>10/20/2020</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	
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 Detailed Summary Page, Section 2.							PAGE TOTAL \$ 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

Name of Filing Committee or Candidate	Reporting Period
DEL VALLE, ANDRE	From <u>7/1/2020</u> To: <u>10/20/2020</u>

DATE				AMOUNT		
To Whom Paid Facebook			MO	DAY	YEAR	\$ 415.98
Mailing Address one hacker way			7	1	2020	
City Menlo park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure marketing			
To Whom Paid Facebook			MO	DAY	YEAR	\$ 13.77
Mailing Address one hacker way			9	21	2020	
City Menlo park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure marketing			
To Whom Paid Act blue			MO	DAY	YEAR	\$ 3.45
Mailing Address 366 Summer St			7	3	2020	
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure fees			
To Whom Paid Squarespace			MO	DAY	YEAR	\$ 25.44
Mailing Address 8 Clarkson Stt			7	23	2020	
City New York	State NY	Zip Code (Plus 4) 10014	Description of Expenditure fees			
To Whom Paid Squarespace			MO	DAY	YEAR	\$ 25.44
Mailing Address 8 Clarkson Stt			8	24	2020	
City New York	State NY	Zip Code (Plus 4) 10014	Description of Expenditure fees			

To Whom Paid Squarespace			MO	DAY	YEAR	\$ 25.44
Mailing Address 8 Clarkson Stt			9	23	2020	
City New York	State NY	Zip Code (Plus 4) 10014	Description of Expenditure fees			

To Whom Paid NGP Van			MO	DAY	YEAR	\$ 250.00
Mailing Address 1445 New York Ave NW Suite 200			8	12	2020	
City Washington D.C.	State DC	Zip Code (Plus 4) 20005	Description of Expenditure fees for database			

To Whom Paid NGP Van			MO	DAY	YEAR	\$ 250.00
Mailing Address 1445 New York Ave NW Suite 200			9	16	2020	
City Washington D.C.	State DC	Zip Code (Plus 4) 20005	Description of Expenditure fees for database			

To Whom Paid The Asbury			MO	DAY	YEAR	\$ 70.92
Mailing Address 210 5th Ave			8	24	2020	
City Asbury Park	State NJ	Zip Code (Plus 4) 07712	Description of Expenditure promotional			

To Whom Paid Amazon			MO	DAY	YEAR	\$ 4.11
Mailing Address 410 Terry Ave North			10	13	2020	
City Seattle	State WA	Zip Code (Plus 4) 98109	Description of Expenditure office closeout materials			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 10.00
Mailing Address 701 W Lehigh Ave			8	31	2020	
City philadelphia	State PA	Zip Code (Plus 4) 19133	Description of Expenditure bank fees			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 10.00
Mailing Address 701 W Lehigh Ave			9	30	2020	
City philadelphia	State PA	Zip Code (Plus 4) 19133	Description of Expenditure bank fees			

To Whom Paid DJI			MO	DAY	YEAR	\$ 157.94
Mailing Address 6424 Santa Monica Blvd			10	9	2020	
City Los Angeles	State CA	Zip Code (Plus 4) 90038	Description of Expenditure Marketing/Promo equipment			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 1,262.49

