Campaign Finance Report

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

Filer Identificati Number :	on 201	.60255				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Cand	idate or L	obbyist:		SPIF	RIT	OF 17	76									_
Street Address:	3031A WAL	TON ROA	D														
City:	PLYMOUTH I	MEETING						State:	PA			Zip Cod	ie: 19	9462			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	Y	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PR	E- !	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPOR	T 7. X	Year 2020)				NG METHO				PAPER			DISKE	TTE	
Name of Office S	Sought by Candid	ate:	-					DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County	,
	,							МО	DAY	YE	AR	Number	code			code	_
								11		3	2020		(SEE IN	ISTRUCTI	ONS FOR (ODES)	_
Summary of Expenditures	Receipts and	МО	DAY	YEAF	2		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			11 24	1 2	020	T	<u> </u>	12	:	31	2020						
A. Amount Bro	ught Forward Fr	om Last R	Report				\$			145,3	340.00						
B. Total Monet	ary Contribution	s And Rec	eipts (Fro	n Sche	dule	· I)	\$			7,6	500.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			152,9	940.00						
D. Total Expen	ditures (From So	hedule II	Ί)				\$				0.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$:	152,9	40.00						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	Schedu	le II	:)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule I	V)			\$				0.00			•			_
				AFF	IDA	١٧٢	T SE	CTION									
PART I - If this is			_														
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached s	chedule	s filed	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , true	4
Sworn to and subs	cribed before me tl day of	nis	20							S	ignature	of Perso	n Submit	ting Re	oort		
							- -					Prin	ted Nam	e			٠
My Commission Ex	Signa opires	ture										Ema	il				. [
·	МО	D	AY	YR			-		Are	ea Cod	le		e Telepi	none Nu	mber		١
Part II- If this is	a report of a ca	ndidate's	authorized	l Comr	nitte	e, C	andid	ate shall	sign he	ere.							Ī
I swear (or affirm) No 320) as amende		my knowl	edge and be	lief this	s polit	tical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	1
Sworn to and subso	ribed before me th	s									s	ignature o	of Candid	ate			.
	day of		_ 20				_										.
	Signature						-					Printe	d Name				
My Commission Exp	_	-										Ema	il				
	мо	D	AY	YF	2		•		Area	Code		Da	aytime T	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
SPIRIT OF 1776	From:	11/24/202	<u>20</u> To:	12/31/2020
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)			\$	0.00
All Other Contributions (Part D)			\$	7,600.00
TOTAL for the Reporting	Period	(3)	\$	7,600.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	7,600.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL
\$ 0.00

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 Filling Committee of Candidate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candi	nme of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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 Co	ommittee or Candida	ate			Rep	orting Pe	riod				
SPIRIT OF 1776					Fror	n:	11/24/2	<u>020</u> To:	To: <u>12/31/2020</u>		
						D	ATE		АМО	DUNT	
Full Name of Con						МО	DAY	YEAR			
UFCW Local 177	6ks										
Mailing Address	3031a Walton Rd								\$	4,200.00	
City Plymouth	n Meeting	State	Zi	p Code (Plus	4)	11	30	2020			
		PA	19	9462							
Employer Name	N/A					Occupat	tion	I/A	.		
Employer Mailing Address/Principal Place of City Business					State		Zip Code	(Plus 4)			
3031a Walton Rd Plymouth Me			Meeti	ng	PA		19462				
Full Name of Con	tributor					МО	DAY	YEAR			
UFCW Local 177	6ks					МО	DAT	TEAR			
Mailing Address	3031a Walton Rd								\$	3,400.00	
City Plymouth	n Meeting	State	Zi	p Code (Plus	4)	12	22	2020			
		PA	19	9462							
Employer Name	N/A	•	•			Occupat	tion N	I/A	1		
Employer Mailing Business	Address/Principal I	Place of		City		•	State		Zip Code	(Plus 4)	
3031a Walton Ro	d			Plymouth	Meeti	ng	PA		19462		
Enter Grand To	tal of Part C on So	chedule I. Deta	ailed Sumn	narv Page.	Section	on 3.			PAC	GE TOTAL	
				,	2	-		\$		7,600.00	
								ı			

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 Car	ime of Filing Committee or Candidate			ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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 Per	iod	
SPIRIT OF 1776	From:	<u>11/24/2020</u> To:	12/31/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Name of Filing Committee or Candidate					Reporting Period					
	From			То:							
				DATE			AMOUNT				
To Whom Paid	МО	DAY	YEAR								
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item I							PAGE TOTAL				
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00				