#### **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	20140	0011				Repo Filed		:	CA	NDIDATE COMMITTEE LOBBYIST									
Name of Filing C	ommittee,	Candida	ite or Lo	obbyis	t:	Δ	AUME	NT F	-OR	SEN	ATE									
Street Address:																				
City:										State	e:	PA			Zip Code:					
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.		0 DA RIMA		Р	OST-	3.		AMENDMENT REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND F ELECT		PRE-	- 5.		0 DA LECT		Р	OST-	6.		TERMINATION REPORT?		Yes	N	0	<b>\</b>
report type)	ANNUAL R	REPORT	7. <b>X</b>	Year	2020					IG ME		_			PAPER		<b>√</b>	DISK	ETTE	
Name of Office S	ought by C	Candidat	e:				•			DAT	E O	F ELE	СТІС	ON	District Number	Office Code	Pai	rty Cod	Code	
										МО		DAY	Y	EAR			REF	)		
											11		3	2020		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		and	МО	DA	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	7	
Expenditures	irom:		1	l 1	24	20	20	то	)		12	:	31	2020						
A. Amount Bro	ught Forwa	ard From	Last R	eport					\$				35,	053.52						
B. Total Moneta	ary Contrib	utions A	nd Rec	eipts (	From	Sched	lule I	)	\$					0.00						
C. Total Funds	Available (	Sum Of	Lines A	and B	5)				\$				35,	053.52						
D. Total Expenditures (From Schedule III)							\$				1,	548.93								
E. Ending Cash	. Ending Cash Balance (Subtract Line D From Line C)						\$				33,	504.59								
F. Value Of In-	Kind Contri	ibutions	Receive	ed (Fr	om Sc	hedule	e II)		\$					0.00						
G. Unpaid Debt	s And Obli	gations (	(From S	Schedu	ıle IV)	)			\$					0.00	╡ .					
						AFFI	[DA\	/IT	SE	CTIC	N									
PART I - If this is		-	-		_															
I swear (or affirm) correct and comple		port, inclu	iding the	attach	ed sch	edules	filed o	on pa	per o	or by e	electr	onic m	edium	ı, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before day of	e me this		20									:	Signature	of Persoi	n Submitt	ing Re	port		_
		Signatur	e												Print	ted Name				-
My Commission Ex	opires										-	Email								
	М	0	D/	AY		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report o	f a cand	idate's	autho	rized (	Commi	ittee,	Can	dida	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge an	d belie	f this p	politic	al co	mmi	ittee h	as no	ot viola	ted aı	ny provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subsc		me this		2.5										s	ignature o	f Candida	ite			-
-	day of — — —														Printe	d Name				-
	Sig	gnature																		_
My Commission Exp	ires														Emai	I				
	_	мо	DA	AY		YR						Area	Code		Da	ytime Te	elephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
AUMENT FOR SENATE	From:	11/24/202	<u>:0</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)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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 Pa			\$	0.00

#### **PART A**

### CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	is Part to itemize onl vith an aggregate valu							
Name of Filing Commit	tee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributing	g Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	•			•	-		

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 Filing Committee o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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 Candi	date		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 Committee or Candi	date			Rep	orting Pe	eriod			
				Fron	n:		To	<b>)</b> :	
			_		D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•				Occupa	tion	•	•	
Employer Mailing Address/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	PAGE TOTAL 0.00

## 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		Report	ing Perio	od			
			From:			To:		
				D	ATE			AMOUNT
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 I. Detailed	d Summary Page	Section	4			ı	PAGE TOTAL
	Januario 1, Betailet	a cannual y 1 age,	2000011	••			\$	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	
AUMENT FOR SENATE	From:	<u>11/24/2020</u> <b>To:</b>	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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candida	te				Re	porting	Period				
					Fro	m:		То	:		
							DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	ation				
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reporti	ng Period			
AUMENT FOR SENATE			From	11/24	<u>4/2020</u>	То:	12/31/2020
				DATE			AMOUNT
To Whom Paid GODADDY.COM			МО	DAY	YEAR		
Mailing Address 14747 N. N	ORTHSIDE BLVD		12	21	2020	\$	45.34
City SCOTTSDALE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
33311337.22	AZ	85260		ISTRATIVE			
To Whom Paid VERIZON WIRELESS	·		МО	DAY	YEAR		
Mailing Address 142 PARK CITY CENTER				31	2020	\$	266.81
City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17601		ISTRATIVE			
To Whom Paid LNP GROUP			мо	DAY	YEAR		
Mailing Address 8 W. KING	STREET		11	27	2020	\$	9.95
City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Ex	enditure		
2 6 . 2	PA	17608	Description of Expenditure ADMINISTRATIVE				
To Whom Paid DOWNTOWN DELI	·		мо	DAY	YEAR		
Mailing Address 225 MARKE	T STREET		12	8	2020	\$	21.81
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Thursday, Co.	PA	171012126	MEALS				
To Whom Paid	·	<u> </u>	МО	DAY	YEAR		
LNP GROUP							
LNP GROUP  Mailing Address 8 W. KING	STREET		12	24	2020	\$	9.95

17608

ADMINISTRATIVE

PA

						PAG	GE 12
To Whom Paid VERIZON WIRELESS			МО	DAY	YEAR		
Mailing Address 142 PARK CITY	CENTER		12	1	2020	\$	266.81
City LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17601	1	otion of Exp			
To Whom Paid GODADDY.COM			МО	DAY	YEAR		
Mailing Address 14747 N. NOR	THSIDE BLVD		12	21	2020	\$	38.34
City SCOTTSDALE	1	otion of Exp ISTRATIVE					
To Whom Paid USPS			мо	DAY	YEAR		
Mailing Address 74 E. MAIN ST.			12	14	2020	\$	275.00
City LITITZ	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 175430900	Description of Expenditure				
To Whom Paid GOOGLE INC			МО	DAY	YEAR		
Mailing Address 1600 AMPHITH	EATRE PKWY		12	3	2020	\$	69.96
City MOUNTAIN VIEW	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 94043	Description of Expenditure ADMINISTRATIVE				
To Whom Paid S'MORE SPACE STORAGE			МО	DAY	YEAR		
Mailing Address 581 STONEY B.	ATTERY ROAD		12	2	2020	\$	193.98
City LANDISVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17538	1	otion of Exp			
<b>To Whom Paid</b> EVITE			МО	DAY	YEAR		
Mailing Address 600 WILSHIRE BLVD SUITE #400				1	2020		
600 WILSHIRE	BLVD SUITE #400		11	30	2020	\$	14.99

							15
To Whom Paid SAINT BONIFACE BREWING CO				DAY	YEAR		
Mailing Address 1701 W MAIN ST			12	4	2020	\$	55.32
City EPHRATA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 175221106	Description of Expenditure				
To Whom Paid JULIS STURGIS PRETZEL BAKERY			МО	DAY	YEAR		
Mailing Address 219 E. MAIN ST.			12	2	2020	\$	154.08
City LITITZ	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 175432011	Description of Expenditure				
To Whom Paid S CLYDE WEAVER				DAY	YEAR		
Mailing Address 5253 MAIN STREET			12	22	2020	\$	17.98
City EAST PETERSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 175201607	Description of Expenditure				
To Whom Paid FINE WINE & COOD SPIRITS				DAY	YEAR		
Mailing Address CENTERVILLE SQUARE			12	2	2020	\$	108.61
City LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17601	Description of Expenditure CAMPAIGN EXPENSE				
Enter Crand Total of Free	unditures on Dogo 1. Do	mort Cover Dage Items D					PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	•			\$	1,548.93