Campaign Finance Report

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

Filer Identification 20160255 Report Filed By:								LOBE	SYIST								
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		SPIF	RIT (OF 17	776									
Street Address:	3031A WALTO	n Roai)														
City:	PLYMOUTH ME	ETING			State: PA				PA			Zip Cod	ie: 19	9462			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	٧	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	Y PRE	<u>-</u> 5	5.	30 DA		POST-	6.			TERMINATION Yes No REPORT?			٧	
report type)	ANNUAL REPORT	7.	Year 2021					NG METH CHECK O				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candidat	te:	_					DATE C)F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	County Code	/
								МО	DAY	Y	EAR		1000	I		-	
								11		2	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	2			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		1 1	2	021	Т	0	3	3	29	2021						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			152,	940.00						
B. Total Monet	ary Contributions A	And Rec	eipts (From	Sche	dule	I)	\$	\$ 3,800.00									
C. Total Funds Available (Sum Of Lines A and B)							\$			156,	740.00						
D. Total Expenditures (From Schedule III) \$ 0.00																	
E. Ending Cash Balance (Subtract Line D From Line C)							\$			156,7	740.00						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee repo	ort, trea	surer sign l	nere. I	If thi	is is	a Car	ndidate r	eport,	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedules	s filed	l on	paper	or by elect	tronic m	edium	ı, are to t	he best o	f my kno	wledge	and belie	ef , true	≥,
Sworn to and subs	cribed before me this day of	•	20								Signature	of Perso	n Submit	ting Rep	ort		•
			_				-					Prin	ted Name	e			-
My Commission Ex	Signatu cpires	re										Ema	il				.
	мо	D	AY	YR			-		Ar	ea Co	de	Daytim	e Teleph	none Nu	mber		•
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							Ī
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has r	not viola	ted ar	ny provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	
Sworn to and subso	ribed before me this										s	ignature o	of Candid	ate			۱.
	day of						-					Printa	d Name				.
	Signature						-										
My Commission Exp	_											Ema	il	_			
	МО	D	AY	YR	l		-		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	J Period		
SPIRIT OF 1776	From:	1/1/202	<u>1</u> To:	3/29/2021
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)			\$	3,800.00
TOTAL for the Reporting	Period	(3)	\$	3,800.00
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			\$	3,800.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
		From:				:		
		<u> </u>			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	_				<u> </u>			DAGE 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 Filing Committee or Candidate				Reporting Period					
			Fro	m:		To):		
					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 Candidate Reporti			Reporting	ng Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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 o	lame of Filing Committee or Candidate						Reporting Period						
SPIRIT OF 1776	SPIRIT OF 1776				<u>1/1/2</u>	<u>021</u> To	To: <u>3/29/2021</u>						
				D	ATE		АМО	OUNT					
Full Name of Contributor UFCW Local 1776KS				МО	DAY	YEAR							
Mailing 3031A W	alton Road						\$	3,800.00					
City Plymouth Meeting	State PA	Zip Code (Plus 19462	s 4)	1	28	2021							
Employer Name N/A		•		Occupa	tion	I/A							
Employer Mailing Address/F Business	Principal Place of	City		•	State		Zip Code	(Plus 4)					
N/A		N/A			PA		19462						
Enter Grand Total of Par	t C on Schedule I, Detailed S	Gummary Page,	Section	on 3.		4		GE TOTAL 3,800.00					

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 Car	Name of Filing Committee or Candidate				Reporting Period					
			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	l Summary Page.	Section	4.			P	AGE TOTAL		
	2, 2000		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 Period	I	
SPIRIT OF 1776	From:	<u>1/1/2021</u> To:	<u>3/29/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
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	Reporting Period						
	From:						
				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	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		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:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Reporti						
	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		
							PAGE TOTAL
Enter Grand Total of Expe	naitures on Page 1, Re	port Cover Page, Item L).			\$	0.00