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 20	190166				port ed B		CANE	IDAT	E		COMM	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	didate or	Lobbyist:		PEN	NSY	LVAN	IA JUS	TICE 8	k PU	BLIC	SAFE	TY PAC					
Street Address:	700 13TH S	ST, NW, S	STE 600															
City:	WASHINGT	ON						State:	DC				Zip Code: 20		0005-5998			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR PRIMAR	IDAY PRI	≣-	2. X	30 DA		POST	- 3	•		AMENDMENT REPORT?		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR ELECTION	IDAY PR ON	E-	5.	30 DA		POST	·- 6			TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REPO	RT 7.	Year 20	021				NG METI CHECK					PAPER		\	DISK	ETTE	
Name of Office S	ought by Candi	date:	-					DATE	OF EI	LECT	TION		District Number	Office Code	Pai	ty Cod	Cour	
								МО	DA	Y	YEA	\R						
								1	1	2		2021	(SEE INSTRUCTIONS FOR CODES					5)
Summary of		МО	DAY	YEA	R			МО	DA	Y	YEA	\R	FO	R OFFIC	E USE	ONLY	,	
Expenditures	from:		1	1 2	2021	T	0		5	3	3	2021						
A. Amount Bro	ught Forward F	rom Last	Report				\$	_		1	7,40	2.94						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																		
C. Total Funds Available (Sum Of Lines A and B) \$ 17,402.94																		
D. Total Expend	ditures (From S	chedule I	II)				\$				6,56	0.00						
E. Ending Cash	Balance (Subtr	act Line I	From Li	ne C)			\$			1	0,84	2.94						
F. Value Of In-	Kind Contribution	ons Recei	ved (Fror	n Sched	ule II	I)	\$					0.00						
G. Unpaid Debt	s And Obligatio	ns (From	Schedule	e IV)			\$			6	3,35	7.00		•				
				AF	FIDA	AVI	ΓSE	CTION	J									
PART I - If this is				_					=	-		_						
I swear (or affirm) correct and complete		including t	ne attache	d schedule	es file	ed on	paper	or by ele	ctronic	medi	ium, a	are to t	he best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me	this	20								Sig	ınature	of Perso	n Submitt	ing Re	oort		_
	Sign	ature					-		_				Prin	ted Name	ı			_
My Commission Ex	pires						_						Emai	I				
	МО	l	DAY	YF	2					Area	Code		Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate'	s authoriz	zed Com	mitte	ee, C	andid	ate sha	ll sign	here	e.							
I swear (or affirm) No 320) as amende		of my know	ledge and	belief thi	s poli	itical	comm	ittee has	not vi	olated	d any	provisi	ons of the	e act of Ju	ıne 3,1	937 (P	L. 133	з,
Sworn to and subsc	ribed before me to day of	nis	20						_			Si	gnature o	of Candida	ite			_
							-		_				Printe	d Name				-
	Signatu	re					-											_
My Commission Exp	ires												Emai	il				
	мо		DAY	Y	R		•		Ar	ea Co	de		Da	ytime Te	elephoi	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	1			
Name of Filing Committee or Candidate	Reporting	g Period		
PENNSYLVANIA JUSTICE & PUBLIC SAFETY PAC	From:	1/1/202	<u>1</u> To:	<u>5/3/2021</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reportin	g 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 Reportin	g 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 Reportin	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reportin	g Period	(4)	\$	0.00
			<u> </u>	
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Report Cover Page 2, Report Cover Page 3, Report Cover P			\$	0.00

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 Candida	te	R	eporting	Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL\$ 0.00

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

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.

		From:		To	o:	
	I		DATE			AMOUNT
		мо	DAY	YEAR		
					\$	0.00
State	Zip Code (Plus 4)					
	State	State Zip Code (Plus 4)	МО	DATE MO DAY	DATE MO DAY YEAR	DATE MO DAY YEAR \$

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:			То:		
				DA	TE		,	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Schee	dule 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 or Candidat	•			Rep	orting Pe	riod					
				Fron	n:			To:			
					D	ATE			AMO	OUNT	
Full Name of Contributor					МО	DAY	YEA	R	\$		0.00
Mailing Address											
City	State	Zi	p Code (Plus	4)							
Employer Name	•				Occupa	tion					
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Z	ip Code	(Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detaile	d Sumr	mary Page,	Section	on 3.			\$	PA	GE TOTA	L .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 Peri	od			
			From:			To:		
		•		E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	'			•			
Futor Curred Total of Doub	F an Cabadula I Datailad	I Comment Dama Co		4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	Summary Page, So	ection	4.			\$	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	
PENNSYLVANIA JUSTICE & PUBLIC SAFETY PAC	From:	<u>1/1/2021</u> To:	<u>5/3/2021</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	TF)		
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 Can	didate		Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
PENNSYLVANIA JUSTICE & PUBLIC SAFETY PAC	From	1/1/2021	То:	<u>5/3/2021</u>

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Amalgamated Bank			MO		ILAK		
Mailing Address 1825 K St NW	1		1	22	2021	\$	10.00
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	20006	Bank Fe	ee			
To Whom Paid			мо	DAY	YEAR		
Amalgamated Bank			140		ILAK		
Mailing Address 1825 K St NW	1		2	25	2021	\$	10.00
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	20006	Bank Fe	ee			
To Whom Paid			мо	DAY	YEAR		
Amalgamated Bank							
Mailing Address 1825 K St NW	1		3	29	2021	\$	10.00
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	20006	Bank Fe	ee			
To Whom Paid			мо	DAY	YEAR		
Amalgamated Bank							
Mailing Address 1825 K St NW	1		4	27	2021	\$	30.00
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	20006	Bank Fe	ee			
To Whom Paid Public Policy Polling			мо	DAY	YEAR		
	ods Blvd, Ste. 201		3	12	2021	<u> </u>	6,500.00
City Raleigh	State	Zip Code (Plus 4)	Descrip	 tion of Exp	 enditure		
, italeigh	NC	27604	Polling	J. EAP			
	1100	127001	1, 0,,,,,				PAGE TOTAL
Enter Grand Total of Expendit	ures on Page 1, Rep	oort Cover Page, Item D).			\$	
						•	6,560.00

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
PENNSYLVANIA JUSTICE & PUBLIC SAFETY PAC			From:		1/1/2021	То:		<u>5/3/2021</u>
					DATE			utstanding alance of Debt
Name of Creditor Berlin Rosen				мо	DAY	YEAR		
Mailing Address 15 Maiden Lane, Suite 1600				5	3	2021	\$	63,357.00
City New York	State	Zip Code (F	Zip Code (Plus 4) Descrip			t		
NY 10038 Radio Advertisement Pu Krasner - Liability Incur								Supporting Larry
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	63,357.00