

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 : 20120115		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: SCHLOSSBERG, MIKE FRIENDS OF										
Street Address: 1620 POND RD, STE 200										
City: ALLENTOWN			State: PA	Zip Code: 18104-2255						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	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	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2021	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	
				MO	DAY	YEAR	DEM		39	
				11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	2021	TO	5	3	2021		
A. Amount Brought Forward From Last Report				\$		38,598.36				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		13,883.60				
C. Total Funds Available (Sum Of Lines A and B)				\$		52,481.96				
D. Total Expenditures (From Schedule III)				\$		14,756.69				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		37,725.27				
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

My Commission Expires _____

MO DAY YR

Signature of Person Submitting Report

Printed Name

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

My Commission Expires _____

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
SCHLOSSBERG, MIKE FRIENDS OF	From: <u>1/1/2021</u> To: <u>5/3/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 50.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 750.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 750.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 13,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 13,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 83.60

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.)	\$ 13,883.60
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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 Candidate	Reporting Period
SCHLOSSBERG, MIKE FRIENDS OF	From: <u>1/1/2021</u> To: <u>5/3/2021</u>
DATE AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
RCPA-PAC			3	19	2021	
Mailing Address 777 E PARK DR, STE 300						
City HARRISBURG	State PA	Zip Code (Plus 4) 17111-2754				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
GGR INC PAC (GMERK GOV RELATIONS)			4	1	2021	
Mailing Address 212 LOCUST STREET, SUITE 300						
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
Pennsylvania SEIU COPE			3	23	2021	
Mailing Address 1500 North Second Street, 2nd Floor, Suite 11						
City Harrisburg	State PA	Zip Code (Plus 4) 17102				

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

PAGE TOTAL
\$ 750.00

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
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor						
Mailing Address	MO	DAY	YEAR			\$ 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	Reporting Period
SCHLOSSBERG, MIKE FRIENDS OF	From: <u>1/1/2021</u> To: <u>5/3/2021</u>

			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
TRIAD STRATEGIES PA PAC	300 N 2ND ST, STE 600	HARRISBURG	4	21	2021	\$ 500.00
		State: PA Zip Code (Plus 4): 17101				
PA Association of Nurse Anesthetists	400 W. WILSON BRIDGE ROAD,SUITE 120	Worthington	4	5	2021	\$ 500.00
		State: OH Zip Code (Plus 4): 43085				
PSEA PACE	400 North Third Street, PO Box 1724	Harrisburg	3	25	2021	\$ 500.00
		State: PA Zip Code (Plus 4): 17105-1724				
Certified Public Accountants PAC	500 North 3rd Street, Suite 600A	Harrisburg	3	23	2021	\$ 500.00
		State: PA Zip Code (Plus 4): 17101				
HOSPITAL & HEALTHSYSTEM ASSOC OF PA PAC(HAPAC)	30 NORTH THIRD STREET STE 600 PO BOX 8600	HARRISBURG	3	3	2021	\$ 500.00
		State: PA Zip Code (Plus 4): 17101				

Full Name of Contributing Committee CAPITAL BLUE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 60710			3	17	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17106-0710				
Full Name of Contributing Committee Pennsylvania AAA Federation			MO	DAY	YEAR	\$ 500.00
Mailing Address 600 N. 3rd Street			3	29	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee Local 22 Philadelphia Fire Fighters & Paramedic Union FIRE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 415 North 5th Street			3	23	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 19123				
Full Name of Contributing Committee DUANE MORRIS GOVT COM			MO	DAY	YEAR	\$ 500.00
Mailing Address 30 SOUTH 17TH ST			3	23	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				
Full Name of Contributing Committee 1776 PAC (UFCW)			MO	DAY	YEAR	\$ 500.00
Mailing Address 3031-A WALTON RD STE 201			4	1	2021	
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4) 19462				
Full Name of Contributing Committee LAWPAC (PA ASSOC. FOR JUSTICE)			MO	DAY	YEAR	\$ 500.00
Mailing Address 212 North Third Street, Suite 101			3	19	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee JM Uliana & Associates, LLC			MO	DAY	YEAR	\$ 500.00
Mailing Address 2571 Baglyos Circle, Circle B20			3	3	2021	
City Bethlehem	State PA	Zip Code (Plus 4) 18020				
Full Name of Contributing Committee PAA PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1925 North Front Street, PO Box 2955			3	4	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17105				
Full Name of Contributing Committee DENTONS COHEN AND GRIGSBY PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 625 LIBERTY AVE			3	1	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222				
Full Name of Contributing Committee Pennsylvania Psychological PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 5925 Stevenson Avenue, Suite H			2	26	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17112				
Full Name of Contributing Committee Pennsylvania Psychological PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 5925 Stevenson Avenue, Suite H			3	12	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17112				
Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)			MO	DAY	YEAR	\$ 500.00
Mailing Address 319 N FRONT ST			2	25	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1800 CENTER ST			3	4	2021	
City CAMP HILL	State PA	Zip Code (Plus 4) 17089-0000				
Full Name of Contributing Committee Pennsylvania Optometric PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 218 North Street			3	3	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee AFSCME COUNCIL 13 POL & LEG ACCT			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 4031 EXECUTIVE PARK DRIVE			3	9	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111-1507				
Full Name of Contributing Committee OPERATORS FOR SKILL PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 343			3	10	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108				
Full Name of Contributing Committee PA Professional Firefighters PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 301 Chestnut Street, Suite 101			3	24	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee PA Fraternal Order of Police PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 898			3	16	2021	
City Mechanicsburg	State PA	Zip Code (Plus 4) 17055				

Full Name of Contributing Committee Pennsylvania AFL-CIO COPE			MO	DAY	YEAR	\$ 500.00
Mailing Address 600 North Second Street			3	16	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee WOJDAK FOR THE COMMONWEALTH PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 30 N THIRD ST, STE 950			3	24	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-1741				
Full Name of Contributing Committee PA ACADEMY OF AUDIOLOGY INC			MO	DAY	YEAR	\$ 500.00
Mailing Address 900 N 2ND ST			3	8	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102				

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

PAGE TOTAL
\$ 13,000.00

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	Reporting Period
	From: _____ To: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business	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 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 SCHLOSSBERG, MIKE FRIENDS OF	Reporting Period From: <u>1/1/2021</u> To: <u>5/3/2021</u>
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				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	
iZod			2	16	2021	\$ 83.60
Mailing Address 77 Sands Blvd.						
City Bethlehem	State PA	Zip Code (Plus 4) 18015				
Receipt Description Accidental Expense Reimbursed						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 83.60

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 SCHLOSSBERG, MIKE FRIENDS OF	Reporting Period From: <u>1/1/2021</u> To: <u>5/3/2021</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 RECEIVED - 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:

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
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
SCHLOSSBERG, MIKE FRIENDS OF	From <u>1/1/2021</u> To: <u>5/3/2021</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
McGrath's Pub	3	24	2021	\$ 620.00
Mailing Address 202 Locust Street				
City Harrisburg	State PA	Zip Code (Plus 4) 17101		Description of Expenditure Event Expense
To Whom Paid Mike Schlossberg	3	15	2021	\$ 216.92
Mailing Address 2905 West Highland				
City Allentown	State PA	Zip Code (Plus 4) 18104		Description of Expenditure Reimbursement
To Whom Paid AT&T	1	26	2021	\$ 219.45
Mailing Address 214 Lehigh Valley Mall				
City Whitehall	State PA	Zip Code (Plus 4) 18052		Description of Expenditure Phone
To Whom Paid AT&T	1	26	2021	\$ 53.49
Mailing Address 214 Lehigh Valley Mall				
City Whitehall	State PA	Zip Code (Plus 4) 18052		Description of Expenditure Phone Data
To Whom Paid AT&T	2	26	2021	\$ 219.45
Mailing Address 214 Lehigh Valley Mall				
City Whitehall	State PA	Zip Code (Plus 4) 18052		Description of Expenditure Phone

To Whom Paid AT&T			MO	DAY	YEAR	\$ 53.49
Mailing Address 214 Lehigh Valley Mall			2	26	2021	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Phone Data			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 219.45
Mailing Address 214 Lehigh Valley Mall			3	26	2021	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Phone			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 53.49
Mailing Address 214 Lehigh Valley Mall			3	26	2021	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Phone Data			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 53.49
Mailing Address 214 Lehigh Valley Mall			4	26	2021	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Phone Data			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 219.49
Mailing Address 214 Lehigh Valley Mall			4	27	2021	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Phone			
To Whom Paid Allentown School District Foundation			MO	DAY	YEAR	\$ 450.00
Mailing Address 31 South Penn Street			3	2	2021	
City Allentown	State PA	Zip Code (Plus 4) 18102	Description of Expenditure Contribution			

To Whom Paid Allentown School District Foundation			MO	DAY	YEAR	
Mailing Address 31 South Penn Street			4	15	2021	
City Allentown	State PA	Zip Code (Plus 4) 18102	Description of Expenditure Sponsorship			
To Whom Paid Midway Manor Community Association			MO	DAY	YEAR	
Mailing Address PO Box 4236			1	28	2021	
City Bethlehem	State PA	Zip Code (Plus 4) 18018	Description of Expenditure Membership Fees			
To Whom Paid Cohen For Judge			MO	DAY	YEAR	
Mailing Address 1620 Pond Road, Suite 200			2	22	2021	
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Contribution			
To Whom Paid Friends of Cynthia Mota			MO	DAY	YEAR	
Mailing Address PO Box 4807			3	8	2021	
City Allentown	State PA	Zip Code (Plus 4) 18105	Description of Expenditure Contribution			
To Whom Paid PA HDCC			MO	DAY	YEAR	
Mailing Address PO Box 555			3	31	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			
To Whom Paid Brace for Lehigh County			MO	DAY	YEAR	
Mailing Address 2249 West Allen			4	2	2021	
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Contribution			

To Whom Paid Clean Earth			MO	DAY	YEAR	\$ 250.00
Mailing Address 2591 Mitchell Avenue			4	7	2021	
City Allentown	State PA	Zip Code (Plus 4) 18103	Description of Expenditure Sponsorship: South Whitehall			
To Whom Paid Friends of Marty Flynn			MO	DAY	YEAR	\$ 250.00
Mailing Address PO Box 91			4	26	2021	
City Scranton	State PA	Zip Code (Plus 4) 18504	Description of Expenditure Contribution			
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 10.00
Mailing Address PO Box 441146			4	26	2021	
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure Service Fee			
To Whom Paid Tavern on Liberty			MO	DAY	YEAR	\$ 19.37
Mailing Address 2246 West Libert			4	30	2021	
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Meals			
To Whom Paid iZod			MO	DAY	YEAR	\$ 83.60
Mailing Address 77 Sands Blvd.			2	8	2021	
City Bethlehem	State PA	Zip Code (Plus 4) 18015	Description of Expenditure Accidental Expense			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 14,756.69

