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 202	10173			Repo			CAND	IDATE		СОМ	4ITTEE	✓	LOBE	YIST	
Name of Filing C	Committee, Candi	date or L	obbyist:	(COMI	٩IT	TEE 1	TO ELEC	T NATH	IAN C	OVING	TON FO	R STAT	E SENA	TE PA-	22
Street Address:	PO BOX 403															
City:	MOUTAINHO	ME		State:			PA			Zip Code: 18342-0403						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.		30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- ELECTION				30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPORT	7.						IG METH CHECK C				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candida	ate:	•			•		DATE (OF ELE	CTIO	N	District Number	Office Code	Part	ty Code	County Code
	,							МО	DAY	YE	AR	22	STS	LIB		45
SENATOR IN TH	HE GENERAL ASS	SEMBLY						5	5	18	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY YE	AR				МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	o ii Oili:		3 16	20)21	T	0	5	5	3	2021					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00					
B. Total Moneta	ary Contributions	And Rec	eipts (From Sc	hec	dule 1	()	\$			2	272.00					
C. Total Funds Available (Sum Of Lines A and B)							\$			2	272.00					
D. Total Expenditures (From Schedule III)							\$			5	21.84					
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$			(24	19.84)					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)		\$			2	49.84					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$				0.00			1		
			Al	13	[DA	/IT	SE	CTION								
	s a Committee rep		_								_					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached schedu	ıles	filed	on p	aper o	or by elec	tronic m	edium	, are to 1	the best o	f my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signat		_									Prin	ted Name	e		
My Commission Ex	_	uie										Ema	il			
	МО	D	AY '	YR			•		Ar	ea Cod	le	Daytim	e Telepi	none Nui	nber	
Part II- If this is	a report of a car	didate's	authorized Cor	nm	ittee	, Ca	ndida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his	politic	al d	commi	ittee has i	not viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L	1333,
Sworn to and subsc	ribed before me this	•									s	ignature o	of Candid	ate		
	day of											Dulm*-	d Name			
	Signature											Frinte	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO ELECT NATHAN COVINGTON FOR STATE SENATE PA-22	From:	3/16/202	2 <u>1</u> To:	<u>5/3/2021</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	70.00
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)			\$	202.00
TOTAL for the Reporting	Period	(2)	\$	202.00
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 Page 1, Page 2, 2,3,3,4,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5			\$	272.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm		Reporting Period						
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

0.00

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 Comm	nittee or Candidate		Rep	orting Pe	eriod			
COMMITTEE TO ELEC	CT NATHAN COVINGTON FOR STATE	SENATE PA-	Fror	m:	3/16/2	<u>2021</u> To) :	5/3/2021
					DATE			AMOUNT
Full Name of Contribut Patricia Nestor	or			МО	DAY	YEAR		
Mailing Address 93	4 Green Ridge Street			4	27	2021	\$	52.00
City Scranton	State PA	Zip Code (Plus 4) 18509		4	27	2021		
Full Name of Contribut Matthew Miller	Dr			МО	DAY	YEAR		
Mailing Address 33	7 Avon Circle			4	30	2021	\$	150.00
	Ctata	7in Codo (Dluc 4)		-7	JU	2021	ı	

Zip Code (Plus 4)

18466

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

State

PA

City

Tobyhanna

PAGE TOTAL 202.00

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 Candidate			Rep	orting Pe	riod			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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 C	Candidate		Report	ting 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 o	on Schedule I. Detailed	d Summary Page.	Section	4.			PAGE TOTA	ıL
		· • • • • • • • • • • • • • • • • • • •					\$ C	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	
COMMITTEE TO ELECT NATHAN COVINGTON FOR STATE SENATE PA-22	From:	3/16/2021 To:	<u>5/3/2021</u>
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)	\$	249.84
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,		\$	249.84

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Pe	riod	
COMMITTEE TO ELECT NATHAN COVINGTON FOR STATE SENATE PA- 22	From:	3/16/2021 To :	<u>5/3/2021</u>

				DATE		A	MOUNT
Full Name of Contributor Nathan Covington			МО	DAY	YEAR		
Mailing Address PO Box 403			4	28	2021	\$	249.84
City Mountainhome	State PA	Zip Code (Plus 4) 18342					
Description of Contribution: Ya	ard Signs						
Inter Grand Total of Part F on Section 2.	Schedule II, In-Kir	nd Contributions Detail	ed Sumi	mary Pag	je,	P.	AGE TOTAL
CCCIOII ZI					١.	\$	249.84

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

						DATE		4	AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)					
Employer of Contributor					Occupa	tion		l	
Employer Mailing Address/P Business	rincipal Place of	City	Stat	•	Zip 4)	Code(Plus	Descri	ption of C	ontribution
Enter Grand Total of Par Summary Page, Section		, In-Kind	Contributions I	etail	ed			ı	PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
COMMITTEE TO ELECT NATHAN COVINGTON FOR STATE SENATE PA-22	From	3/16/2021	То:	<u>5/3/2021</u>

			DATE				AMOUNT		
To Whom Paid Nathan Covington			мо	DAY	YEAR				
Mailing Address PO Box 403			4	22	2021	\$	250.92		
City Mountainhome	State PA	Zip Code (Plus 4) 18342	Description of Expenditure yard signs						
To Whom Paid Nathan Covington			МО	DAY	YEAR				
Mailing Address PO Box 403			4	28	2021	\$	250.9		
City Mountainhome	State PA	Zip Code (Plus 4) 18342	Description of Expenditure yard signs						
To Whom Paid Nathan Covington			МО	DAY	YEAR				
Mailing Address PO Box 403			5	3	2021	\$	6.0		
City Mountainhome	State PA	Zip Code (Plus 4) 18342	Description of Expenditure facebook ads						
To Whom Paid Nathan Covington			МО	DAY	YEAR				
Mailing Address PO Box 403			4	12	2021	\$	14.0		
City Mountainhome	State PA	Zip Code (Plus 4) 18342	Description of Expenditure postage						
Enter Grand Total of Expendi	tures on Page 1 De	nort Cover Page Item D					PAGE TOTAL		
Enter Granu rotal of Expendi	tures on Paye 1, Re	port cover Page, Item D	•			\$	521.84		

		PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	521.84		