Campaign Finance Report

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

Filer Identificat Number :	ion 2019	0307			Repor Filed E		CANDI	DATE		СОМІ	MITTEE	✓	LOB	BYIST		
Name of Filing	Committee, Candid	ate or L	obbyist:		Cappell	-	or PA									
Street Address:	412 Stony Wa	ау														
City:	East Norriton						State:	PA			Zip Co	de: 19	403			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	2. X	30 DA PRIM		POST- 3.		AMENDMENT REPORT?		Yes	N	D I	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE-	- 5.	30 DA		POST-	6.		TERMIN REPORT		Yes	N	C I	\checkmark
report type)	ANNUAL REPORT	7.	Year 2021				NG METHO				PAPER		\checkmark	DISK	ETTE	
Name of Office	L Sought by Candida	te:					DATE O	FELE	СТІС	N	District Number	Office Code	Par	ty Code	Coun	
							мо	DAY	YI	EAR			I		1	
							11		2	2021		(SEE INS	STRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	L 20)21 T	0	5		3	2021						
A. Amount Bro	ought Forward From	n Last R	eport			\$			12,	336.79						
B. Total Monet	tary Contributions	And Rec	eipts (Fror	n Scheo	dule I)	\$			4	451.33						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			12,	788.12						
D. Total Expen	ditures (From Sch	edule II	I)			\$			2,5	569.98						
E. Ending Cash	n Balance (Subtract	t Line D	From Line	C)		\$			10,2	218.14						
F. Value Of In-	-Kind Contributions	s Receiv	ed (From S	Schedul	e II)	\$				0.00	4					
G. Unpaid Deb	ts And Obligations	(From S	Schedule I	V)		\$				0.00		,				
				AFF:	IDAVI	T SE	CTION									
	s a Committee rep		-								-					
I swear (or affirm correct and compl	i) that this report, incl lete.	luding the	e attached so	chedules	filed on	paper	or by elect	ronic m	edium	, are to	the best o	of my knov	vledge	and bel	ief , tru	ıe'
Sworn to and sub	scribed before me this day of	5	20						5	Signaturo	e of Perso	n Submitt	ing Rep	oort		-
	Signatu	re				_					Prin	ted Name				-
My Commission E	xpires					_					Ema	il				-
	мо	D	AY	YR				Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cano	didate's	authorized	l Comm	ittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and bel	lief this	political	comm	ittee has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 1333	i,
Sworn to and subse	cribed before me this day of		20							s	ignature	of Candida	ite			-
						_					Printe	ed Name				-
My Commission Ex	Signature pires					-					Ema	il				-
	мо	D	AY	YR		-		Area	Code		D	aytime Te	elephor	e Numl	per	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>1/1/2021</u> **To:** <u>5/3/2021</u> Cappelletti for PA 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 351.33 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 100.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 100.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 451.33 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Commit	Name of Filing Committee or Candidate						
			Reporting From:	i cirioù	То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

Use this Part	\$5 to itemize all o \$50.01 to \$2	PART B R CONTRIE 50.01 TO \$250.00 ther contribution 50.00 in the repo om political comm	s with an orting per	aggreg iod.			rom
Name of Filing Committee or C	Candidate		Reporting P	eriod			
Cappelletti for PA			From:	<u>1/1/</u>	2021 To	:	<u>5/3/2021</u>
				DATE			AMOUNT
Full Name of Contributor Jeff Kowalski			мо	DAY	YEAR		
Mailing Address 129 Hasting	js Ave State PA	Zip Code (Plus 4) 190832429	1	15	2021	\$	25.00
Full Name of Contributor Jeff Kowalski			мо	DAY	YEAR		
Mailing Address 129 Hasting	js Ave State PA	Zip Code (Plus 4) 190832429	2	15	2021	\$	25.00
Full Name of Contributor Jeff Kowalski			мо	DAY	YEAR		
Mailing Address 129 Hasting	js Ave State PA	Zip Code (Plus 4) 190832429	3	15	2021	\$	25.00
Full Name of Contributor Jeff Kowalski			мо	DAY	YEAR		
Mailing Address 129 Hasting	js Ave State PA	Zip Code (Plus 4) 190832429		15	2021	\$	25.00
Enter Grand Total of Par	t A on Schedule I D	l Detailed Summary Pag	e Section 2	,		\$	PAGE TOTAL 100.00

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

100.00

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 Candic	late		Reporting	J Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detail	led Summary Pa	age, Sectio	n 3.			\$	0.00

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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Report	ing Perio	d				
Fro			From:	From: To:					
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	Section				\$		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		
Cappelletti for PA	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	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period				
	Fr				From:			
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

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

Name of Filing Committee or Candid	lame of Filing Committee or Candidate				Re	porting P	eriod			
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(Pl	lus 4)						
Employer of Contributor	I					Occupat	tion		•	
Employer Mailing Address/Principal Business	Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	of Contribution
				_						PAGE TOTAL

		1		
Enter Grand Total of Part G on Schedule II Summary Page, Section 3.	, In-Kind Contribu	itions Detailed	P	AGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
Cappelletti for PA			From	<u>1/</u>	<u>1/2021</u>	То:	<u>5/3/2021</u>		
				DATE			AMOUNT		
To Whom Paid ACT BLUE			мо	DAY	YEAR				
Mailing Address PO Box 441146			1	6	2021	\$	5.69		
City West Somerville	State MA	Zip Code (Plus 4) 021440031		Description of Expenditure Actblue Fees					
To Whom Paid ACT BLUE			мо	DAY	YEAR				
Mailing Address PO Box 441146			1	11	2021	\$	27.15		
City West Somerville State Zip Code (Plus 4) MA 021440031			Descrip Actblue	otion of Exp e fees	penditure	2			
To Whom Paid ACT BLUE			мо	DAY	YEAR				
Mailing Address PO Box 441146			2	3	2021	\$	2.99		
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Descrip Actblue	otion of Exp	penditure	2			
To Whom Paid ACT BLUE			мо	DAY	YEAR				
Mailing Address PO Box 441146			2	9	2021	\$	18.71		
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Descrip Actblue	otion of Exp e fees	penditure)			
To Whom Paid ACT BLUE			мо	DAY	YEAR				
Mailing Address PO Box 441146	Mailing Address PO Box 441146			3	2021	\$	1.69		
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Descrip Actblue	otion of Exp e fees	penditure				

To Whom Paid ACT BLUE				мо	DAY	YEAR		
Mailing Address PO Box 441146				3	9	2021	\$	14.25
City West Som	onvillo	State Zip Code (Plus 4)		Descri	tion of Ex	Denditure		
west som		MA 021440031				Jenuiture		
To Whom Paid ACT BLUE				мо	DAY	YEAR		
Mailing Address PO Box 441146			4	5	2021	\$	1.22	
City West Som	erville	State	Zip Code (Plus 4)	Descrip	tion of Ex	, Denditure		
		МА	021440031	Actblue				
To Whom Paid ACT BLUE				мо	DAY	YEAR		
Mailing Address PO Box 441146			4	9	2021	\$	12.72	
City West Some	erville	State	Zip Code (Plus 4)	Descrip	tion of Ex	Denditure		
		MA	021440031	Actblue				
To Whom Paid Montgomery County Democratic Committee								
	nty Democratic Comm	ittee		мо	DAY	YEAR		
	nty Democratic Comm 21 E Airy St	ittee		мо 3	DAY 24	YEAR 2021	\$	250.00
Montgomery Cour	21 E Airy St	ittee State	Zip Code (Plus 4)	3	24	2021		250.00
Montgomery Cour	21 E Airy St		Zip Code (Plus 4) 194014815	3 Descrip		2021 penditure		250.00
Montgomery Cour	21 E Airy St	State		3 Descrip	24 otion of Exp	2021 penditure		250.00
Montgomery Cour Mailing Address City Norristowr To Whom Paid	21 E Airy St	State PA		3 Descrip Event s	24 ption of Exp ponsorshi	2021 penditure		250.00 334.40
Montgomery Cour Mailing Address City Norristowr To Whom Paid NGPVAN, Inc. Mailing Address	21 E Airy St	State PA		3 Descrip Event s MO 1	24 ption of Exp ponsorshi DAY 11	2021 penditure yEAR 2021	\$	
Montgomery Cour Mailing Address City Norristowr To Whom Paid NGPVAN, Inc. Mailing Address	21 E Airy St	State PA NW Ste 200	194014815	3 Descrip Event s MO 1 Descrip	24 btion of Exp sponsorship DAY	2021 penditure yEAR 2021 penditure	\$	
Montgomery Cour Mailing Address City Norristowr To Whom Paid NGPVAN, Inc. Mailing Address	21 E Airy St	State PA NW Ste 200 State	194014815 Zip Code (Plus 4)	3 Descrip Event s MO 1 Descrip	24 Prion of Exp ponsorshi DAY 11	2021 penditure yEAR 2021 penditure	\$	
Montgomery Cour Mailing Address City Norristowr To Whom Paid NGPVAN, Inc. Mailing Address City Washingto To Whom Paid	21 E Airy St	State PA NW Ste 200 State DC	194014815 Zip Code (Plus 4)	3 Descrip Event s MO 1 Descrip NGP Op	24 pointion of Exp ponsorship DAY 11 potion of Exp poerating Fe	2021 Denditure D YEAR 2021 Denditure ee	\$	
Montgomery Cour Mailing Address City Norristowr To Whom Paid NGPVAN, Inc. Mailing Address City Washingto To Whom Paid NGPVAN, Inc.	21 E Airy St n 1445 New York Ave on 1445 New York Ave	State PA NW Ste 200 State DC	194014815 Zip Code (Plus 4)	3 Descrip Event s MO 1 Descrip NGP Op 2	24 pointion of Exp ponsorship DAY 11 potion of Exp potion of Exp DAY	2021 Denditure D YEAR 2021 Denditure See YEAR 2021	\$	334.40

To Whom Paid NGPVAN, Inc.				мо	DAY	YEAR		
Mailing Address 1445 New York Ave NW Ste 200			3	2	2021	\$	334.40	
City Washingt	State Zip Code (Plus 4) DC 200052158			Description of Expenditure NGP Operating Fees				
To Whom Paid NGPVAN, Inc.				мо	DAY	YEAR		
Mailing Address 1445 New York Ave NW Ste 200			4	2	2021	\$	334.40	
City Washingt	on State Zip Code (Plus 4) DC 200052158			Description of Expenditure NGP Operating Fees				
To Whom Paid NGPVAN, Inc.			мо	DAY	YEAR			
Mailing Address 1445 New York Ave NW Ste 200			5	3	2021	\$	334.40	
City Washingt	on	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure NGP Operating Fees				
To Whom Paid Team 4 Whitpain								
				мо	DAY	YEAR		
	121 Gillin Rd			мо 4	DAY 21	YEAR 2021	\$	500.00
Team 4 Whitpain		State PA	Zip Code (Plus 4) 190025708	4	21 otion of Exp	2021		500.00
Team 4 Whitpain Mailing Address				4 Descrip	21 otion of Exp	2021		500.00
Team 4 Whitpain Mailing Address City Ambler To Whom Paid				4 Descrip Contrib	21 ption of Exp ution	2021 penditure		500.00
Team 4 Whitpain Mailing Address City Ambler To Whom Paid Zoom Account	121 Gillin Rd 55 Almaden Blvd			4 Descrip Contrib MO 1 Descrip	21 otion of Exp ution DAY	2021 penditure YEAR 2021 penditure	\$	
Team 4 Whitpain Mailing Address City Ambler To Whom Paid Zoom Account Mailing Address	121 Gillin Rd 55 Almaden Blvd	PA	190025708	4 Descrip Contrib MO 1 Descrip	21 Ption of Exp ution DAY 7 Ption of Exp	2021 penditure YEAR 2021 penditure	\$	
Team 4 Whitpain Mailing Address City Ambler To Whom Paid Zoom Account Mailing Address City San Jose To Whom Paid	121 Gillin Rd 55 Almaden Blvd	PA	190025708	4 Descrip Contrib MO 1 Descrip Video c	21 otion of Exp ution DAY 7 otion of Exp onferencir	2021 penditure YEAR 2021 penditure	\$	

To Whom Paid Zoom Account			мо	DAY	YEAR		
Mailing Address 55 Almaden Blvd			3	5	2021	\$	15.89
City San Jose	State	Zip Code (Plus 4)	Description of Expenditure Video conferencing services				
	CA	951131608					
To Whom Paid Zoom Account			мо	DAY	YEAR		
Mailing Address 55 Almaden Blvd		4	5	2021	\$	15.89	
City San Jose	State CA	Zip Code (Plus 4) 951131608	Description of Expenditure video conference services				
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	2,569.98	