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 2021	.0207				port		CANDI	DATE		СОМ	ITTEE	✓	LOB	BYIST	
Name of Filing C	Committee, Candid	ate or L	obbyist:		ZAM	1A F	OR PA	\								
Street Address:	PO BOX 343															
City:	EAST STROU	OSBURG						State:	PA			Zip Cod	le: 18	3301		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3. X		AMENDMENT REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣- !	5.	30 DA ELECT		POST-	6.		TERMINATION Yes No REPORT?			>	
report type)	ANNUAL REPORT	7.	Year 2021			FILING METHOD () CHECK ONE					PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								мо	DAY	YE	AR			ļ		
								11		2	2021		(SEE IN	ISTRUCTI	ONS FOR (CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR	2	_	_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
			5 4	2	021	T	0	6		7	2021					
A. Amount Bro	ught Forward Froi	m Last R	eport				\$				0.00					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	1)	\$			23,4	18.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			23,4	18.00					
D. Total Expend	ditures (From Sch	edule II	I)				\$			9,9	79.60					
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$			13,4	38.40					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Se	chedu	le II	()	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$			20,0	00.00			•		
				AFF	IDA	\VI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here.	If th	is is	a Can	didate re	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached scl	nedule	s filed	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	s	20							S	ignature	of Perso	n Submit	ting Re	ort	
	Signatu						- -					Prin	ted Name	e		
My Commission Ex	_	ii e										Emai	il			
	МО	D	AY	YR			_		Are	ea Cod	e	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of						-					Printe	d Name			
	Signature						-									
My Commission Exp	-											Ema	il			
	МО	D	AY	YR	!		•		Area	Code		Da	aytime T	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

betailed Sammary 1 age								
Name of Filing Committee or Candidate	Reporting	g Period						
ZAMA FOR PA	From:	<u>5/4/202</u>	<u>1</u> To:	6/7/2021				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting) Period	(1)	\$	250.00				
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)			\$	3,318.00				
TOTAL for the Reporting	\$	3,318.00						
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)			\$	19,850.00				
TOTAL for the Reporting	Period	(3)	\$	19,850.00				
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			\$	23,418.00				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Reporting Period					
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE TOTAL

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.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Can	didate		Repo	orting Pe	eriod			
ZAMA FOR PA			From	1:	<u>5/4/2</u>	2021 T o):	6/7/2021
			1		DATE			AMOUNT
Full Name of Contributor SUZANNA BUCK				мо	DAY	YEAR		
Mailing Address PO BOX 77							\$	100.00
City BUCK HILL FALLS	State PA	Zip Code (Plus 4) 18323)	5	21	2021		
Full Name of Contributor HECTOR RAMIREZ				мо	DAY	YEAR		
Mailing Address PO BOX 544 City EFFORT	State PA	Zip Code (Plus 4) 18330	•	5	21	2021	\$	100.00
Full Name of Contributor JOHN PAGLIA	·			мо	DAY	YEAR		
Mailing Address 6 HERON WAY City ANDOVER	State NJ	Zip Code (Plus 4) 07821		5	21	2021	\$	200.00
Full Name of Contributor MARGARET STEWART	•	<u>'</u>		мо	DAY	YEAR		
Mailing Address 3183 SHAFER City STROUDSBURG	SCHOOLHOUSE RD State PA	Zip Code (Plus 4) 18360)	5	21	2021	\$	200.00
Full Name of Contributor CASH	•	•		МО	DAY	YEAR		
Mailing Address PO BOX 343	Mailing Address PO BOX 343			_	_	·	\$	69.00
City EAST STROUDSBURG	State PA	Zip Code (Plus 4) 18301		5	21	2021		

Full Name of Cont	ributor						
KIMBERLY BROW	N			МО	DAY	YEAR	
Mailing Address	9299 COLUMBIA E)					\$ 100.00
City OLMSTED	1	State	Zip Code (Plus 4)	5	23	2021	
		ОН	44138				
Full Name of Cont	ributor			мо	DAY	YEAR	
Mailing Address	18 WHITTIER ST						\$ 100.00
City MELROSE		State	Zip Code (Plus 4)	5	24	2021	
MELKOSE		MA	02176				
Full Name of Contributor TRIDAUGH WINSTON					DAY	YEAR	
Mailing Address 420 MOUNT PLEASANT AVE							\$ 100.00
City WEST OR	ity WEST ORANGE State Zip Code (Plus 4)			5	26	2021	
		NJ	07052				
Full Name of Contributor ANDREA OGUNWUMI							
				мо	DAY	YEAR	
		Т		МО	DAY	YEAR	\$ 200.00
ANDREA OGUNWI Mailing Address	UMI	T S tate	Zip Code (Plus 4)	мо 5	DAY 30	YEAR 2021	\$ 200.00
ANDREA OGUNWI	UMI		Zip Code (Plus 4) 14901				\$ 200.00
ANDREA OGUNWI Mailing Address	UMI 5114 PRATT STREE	State					\$ 200.00
ANDREA OGUNWI Mailing Address City ELMIRA Full Name of Cont	UMI 5114 PRATT STREE	State NY		мо	JAY	2021 YEAR	\$ 200.00
ANDREA OGUNWI Mailing Address City ELMIRA Full Name of Cont ANN MCDONALD Mailing Address	UMI 5114 PRATT STREE cributor 5114 LAUREL LOOP	State NY		5	30	2021	
ANDREA OGUNWI Mailing Address City ELMIRA Full Name of Cont ANN MCDONALD Mailing Address	UMI 5114 PRATT STREE cributor 5114 LAUREL LOOP	State NY	14901	мо	JAY	2021 YEAR	
ANDREA OGUNWI Mailing Address City ELMIRA Full Name of Cont ANN MCDONALD Mailing Address	UMI 5114 PRATT STREE cributor 5114 LAUREL LOOP	State NY State	14901 Zip Code (Plus 4)	мо	JAY	2021 YEAR	
ANDREA OGUNWO Mailing Address City ELMIRA Full Name of Cont ANN MCDONALD Mailing Address City SWIFTWA	UMI 5114 PRATT STREE cributor 5114 LAUREL LOOP	State NY State PA	14901 Zip Code (Plus 4)	MO 5	30 DAY 31	2021 YEAR 2021	
ANDREA OGUNWO Mailing Address City ELMIRA Full Name of Cont ANN MCDONALD Mailing Address City SWIFTWA Full Name of Cont JOHN OSBORNE Mailing Address	UMI 5114 PRATT STREE tributor 5114 LAUREL LOOP TER tributor 712 WINDING RIDG	State NY State PA	14901 Zip Code (Plus 4)	MO 5	30 DAY 31	2021 YEAR 2021	\$ 250.00
ANDREA OGUNWO Mailing Address City ELMIRA Full Name of Cont ANN MCDONALD Mailing Address City SWIFTWA Full Name of Cont JOHN OSBORNE Mailing Address	UMI 5114 PRATT STREE tributor 5114 LAUREL LOOP TER tributor 712 WINDING RIDG	State NY State PA GE TRAIL	14901 Zip Code (Plus 4) 18370	мо 5	30 DAY 31	2021 YEAR 2021	\$ 250.00

Full Name of Contributor	MO	DAY	YEAR	
RUTH HANLIN	МО	DAY	TEAK	
Mailing Address 209 MAIN ST APT C				\$ 100.00
City HORSEHEADS State Zip Code (Plus 4)	5	28	2021	
NY 01485				
Full Name of Contributor JAMES YI	мо	DAY	YEAR	
Mailing Address 602 HAMPTON RD				\$ 249.00
City CLARKS SUMMIT State Zip Code (Plus 4)	5	21	2021	
PA 18411				
Full Name of Contributor DANIEL FERRANTI	мо	DAY	YEAR	
Mailing Address 4102 BIRCH DR				\$ 250.00
State Zin Code (Plus 4)	5	28	2021	
	5	28	2021	
City BETHELHEM State Zip Code (Plus 4)	5	DAY	2021	
City BETHELHEM State PA 18020 Full Name of Contributor				\$ 100.00
City BETHELHEM State Zip Code (Plus 4) 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY				\$ 100.00
City BETHELHEM State PA 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY	мо	DAY	YEAR	\$ 100.00
City BETHELHEM State PA 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY City HENRYVILLE State Zip Code (Plus 4) Zip Code (Plus 4)	мо	DAY	YEAR	\$ 100.00
City BETHELHEM PA State PA 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY City HENRYVILLE State PA 18332 Full Name of Contributor	мо 5	DAY 28	YEAR 2021 YEAR	\$ 100.00 \$ 250.00
City BETHELHEM PA State PA 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY City HENRYVILLE State PA 18332 Full Name of Contributor JOANNE LOPEZ Mailing Address 128 CARNBORNE COURT	мо 5	DAY 28	YEAR 2021	
City BETHELHEM Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY City HENRYVILLE Full Name of Contributor JOANNE LOPEZ Mailing Address 128 CARNBORNE COURT	мо 5	DAY 28	YEAR 2021 YEAR	
City BETHELHEM State PA 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY City HENRYVILLE State PA 2ip Code (Plus 4) 18332 Full Name of Contributor JOANNE LOPEZ Mailing Address 128 CARNBORNE COURT City BUSHKILL State Zip Code (Plus 4) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	мо 5	DAY 28	YEAR 2021 YEAR	
City BETHELHEM State PA 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY City HENRYVILLE State PA 18332 Full Name of Contributor JOANNE LOPEZ Mailing Address 128 CARNBORNE COURT City BUSHKILL State PA 2ip Code (Plus 4) 18332 Full Name of Contributor JOANNE LOPEZ	MO	DAY 28	YEAR 2021 2021	
City BETHELHEM State PA 18020 Full Name of Contributor MAUREEN MAULA Mailing Address 70 JONATHANS WAY City HENRYVILLE State PA 18332 Full Name of Contributor JOANNE LOPEZ Mailing Address 128 CARNBORNE COURT City BUSHKILL State PA 18324 Full Name of Contributor JOANNE LOPEZ	MO	DAY 28	YEAR 2021 2021	\$ 250.00

Full Name of Contributor UMESH DALA	1ESH DALA					
Mailing Address 370 TARA HILLS	OR					\$ 250.00
City STROUDSBURG	State			7	2021	
	PA 18360					
Full Name of Contributor SUMAN KATARA	МО	DAY	YEAR			
Mailing Address 135 LARSENS LAI	NE					\$ 250.00
City STROUDSBUBRG	State PA	Zip Code (Plus 4) 18360	6	7	2021	
Full Name of Contributor RACHEL MOYER			МО	DAY	YEAR	
Mailing Address PO BOX 249						\$ 250.00
City SHAWNEE ON DELAWARE	State	Zip Code (Plus 4)	6	3	2021	
PA 18356						

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

PAGE TOTAL \$ 3,318.00

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				
			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 Sche	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.)

lame of Filing Committee or Candidate Re				Rep	orting Pe	riod	porting Period				
ZAMA FOR PA				Fron	n:	<u>5/4/2</u>	<u>021</u> To	o:	6/7/2021		
					DA	ATE		AN	10UNT		
Full Name of Contributor WILSON YALE					МО	DAY	YEAR				
Mailing 1498 SHELBURNSE C	CT .							\$	350.00		
City ALLENTOWN	State	Zi	p Code (Plus	4)	6	7	2021	L			
, ALLENTO THE	PA	18	3104								
Employer Name MORGAN STANLEY		of City				tion \	WEALTH	I ADVISO	R		
Employer Mailing Address/Principal Plac Business	ce of		City		•	State		Zip Code	e (Plus 4)		
MORGAN STANLEY			ALLENTO	WN		PA		18104			
Full Name of Contributor FREDERICK BARNES					МО	DAY	YEAR				
Mailing 216 GREAT BEAR WA	ιΥ							\$	1,000.00		
City East Stroudsburg	State	Zi	p Code (Plus	(4)	6	3	2021	·			
	PA	18	3301								
Employer Name SELF EMPLOYED					Occupat	tion	SELF EM	1PLOYED			
Employer Mailing Address/Principal Place Business	ce of		City			State		Zip Code	e (Plus 4)		
SELF EMPLOYED			East Stro	udsbur	rg	PA		18301			
Full Name of Contributor MEREDITH STEMPEL					МО	DAY	YEAR				
Mailing 215 LEARN RD Address								\$	500.00		
City TANNERSVILLE	State	Zi	p Code (Plus	4)	6	3	2021				
	PA	18	3372								
Employer Name SELF EMPLOYED				Occupat	tion	SELF EM	IPLOYED				
Employer Mailing Address/Principal Plac Business	ce of		City		-	State		Zip Code (Plus 4)			
Business SELF EMPLOYED TANNERSVILLE			SVILLE	E PA 18372							

Full Name of Conf					мо	DAY	YEAR			
Mailing								4		
Address	105 BRINLEIGH DR							\$	500.00	
City EAST STE	ROUDSBURG	State	Zi	p Code (Plus 4)	6	3	2021	-		
		PA	18	3301						
Employer Name	SELF EMPLOYED				Occupat	Occupation SELF EMPLOYED				
Employer Mailing Business	Address/Principal Pla	ce of		City		State		Zip Code (Plus 4)	
SELF EMPLOYED				East Stroudsbu	-g	PA		18301		
Full Name of Contact SALAVATORE MA					МО	DAY	YEAR			
Mailing Address	PO BOX 181							\$	500.00	
City SHAWNE	E ON DELAWARE	State	Zi	p Code (Plus 4)	6	3	2021	-		
		PA	18	3356						
Employer Name SELF EMPLOYED					Occupation SELF EMPLOYED					
Employer Mailing Address/Principal Place of City Business					State Zip Code (Plus 4)					
SELF EMPLOYED				SHAWNEE ON DELAWARE	PA 18356					
Full Name of Con	tributor				МО	DAY	YEAR			
DOUGLAS YOUNG	<u> </u>									
Mailing Address	1457 KELLY RD							\$	500.00	
City STROUDS	SBUBRG	State	Zi	p Code (Plus 4)	6	3	2021	-		
		PA	18	3360						
Employer Name	SELF EMPLOYED				Occupat	ion	SELF EM	IPLOYED		
Employer Mailing Business	Address/Principal Pla	ce of		City	1	State		Zip Code (Plus 4)	
SELF EMPLOYED				STROUDSBURG		PA		18360		
Full Name of Cont					МО	DAY	YEAR			
Mailing Address	7544 CHERRY VALLE	Y RD						\$	1,000.00	
City STROUDS	City STROUDSBURG State Zip Code (Plus 4)				6	3	2021			
		PA	18	3360						
Employer Name SELF EMPLOYED			Occupation SELF EMPLOYED							
Employer Mailing Address/Principal Place of City			State Zip Code (Plus 4)				Plus 4)			
Business SELF EMPLOYED STROUDSBURG				PA		18301				
				<u> </u>		1	l]		

Full Name of Contributor PETER YASINSKI				МО	DAY	YEAR			
A4-11-11							4		
Mailing 1145 GREAT OAK DE	₹						\$	500.00	
City EAST STROUDSBURG	State	Zi	Code (Plus 4)	5	28	2021			
	PA	18	3301						
Employer Name SELF EMPLOYED				Occupat	Occupation DOCTOR				
Employer Mailing Address/Principal Pla Business	ce of		City		State		Zip Code (P	lus 4)	
SELF EMPLOYED			East Stroudsbur	rg	PA		18301		
Full Name of Contributor GEORGE PRIMIANO				МО	DAY	YEAR			
Mailing 27 CLUB COURT Address							\$	1,000.00	
City STROUDSBURG	State	Ziı	Code (Plus 4)	5	28	2021			
GGG2G2GG	PA	18	360						
Employer Name RETIRED					Occupation RETIRED				
Employer Mailing Address/Principal Place of City				State Zip Code (Plus			lus 4)		
Business RETIRED STROUDSBURG				5 PA 18			18360		
Full Name of Contributor				мо	DAY	YEAR			
MICHAEL KINSLOW				MO	אלו	ILAK			
Mailing 130 S. 18TH UNIT 9	03						\$	1,000.00	
City PHILADELPHIA	State	Zij	Code (Plus 4)	5	28	2021			
	PA	19	103						
Employer Name SELF EMPLOYED				Occupat	ion S	ELF EM	PLOYED		
Employer Mailing Address/Principal Pla Business	ce of		City		State		Zip Code (P	lus 4)	
SELF EMPLOYED			PHILADEPHIA		PA		19103		
Full Name of Contributor BIANCA OREAL BERARDI				мо	DAY	YEAR			
Mailing 325 S. BIDCAYNE BI	_VD						 \$	500.00	
City	State Zip Code (Plus 4)				28	2021			
FL 33131									
Employer Name SELF EMPLOYED				Occupation CPA					
Employer Mailing Address/Principal Place of City			City	State Zip Code (Plus 4)			lus 4)		
Business SELF EMPLOYED MIAMI				FL		33131			
SELI EMPLOTED MIAMI					1	l			

Full Name of Contributor KRUPA DANIEL		МО	DAY	YEAR				
Mailing 107 CLIFFWOOD RD							\$	1,000.00
City PHILADELPHIA	State	Zip	Code (Plus 4)	5	24	2021		
	PA	19	115					
Employer Name VA MEDICAL CENTER	1			Occupat	i on P	HYSICI	AN	
Employer Mailing Address/Principal Place Business	e of		City		State		Zip Code (Pl	us 4)
VA MEDICAL CENTER			PHILADEPHIA		PA		19115	
Full Name of Contributor BRIAN POWERS				МО	DAY	YEAR		
Mailing 1359 BUCK RIDGE DR	· ·						\$	1,000.00
City STROUDSBURG	State	Zip	Code (Plus 4)	5	21	2021		
STROODSBORG	PA	18	360					
Employer Name SELF EMPLOYED		Occupat	i on	ELF EM	PLOYED			
Employer Mailing Address/Principal Place of City Business					State Zip Code (Plus			us 4)
SELF EMPLOYED			STROUDSBURG	PA 1830			18360	
Full Name of Contributor		ı			<u>'</u>		II	
VINCENT FRANCESCANGELI				МО	DAY	YEAR		
Mailing 1122 PINE LANE Address							\$	1,000.00
City STROUDSBURG	State PA		Code (Plus 4)	5	21	2021		
Employer Name RETIRED				Occupat	ion			
RETIRED				-	R	ETIRED		
Employer Mailing Address/Principal Place Business	e of		City		State		Zip Code (Pl	us 4)
RETIRED			STROUDSBURG		PA		18360	
Full Name of Contributor ANTHONY NOSTRO				МО	DAY	YEAR		
Mailing 256 RISINGMEADOW	WAY						\$	1,000.00
City East Stroudsburg State Zip Code (Plus 4)				5	21	2021		
_	PA	18	301					
Employer Name SELF EMPLOYED				Occupation SELF EMPLOYED				
Employer Mailing Address/Principal Place of Business City			<u> </u>	State		Zip Code (Pl	us 4)	
SELF EMPLOYED East Stroudsbur				g	PA		18301	

Full Name of Con					мо	DAY	YEAR		
Mailing	50011							Ц	
Address	4305 CROSS WINDS	5 DR						\$	1,000.00
City EASTON		State	Zi	p Code (Plus 4)	5	21	2021		
		PA	18	3045					
Employer Name SELF EMPLOYED				Occupation SELF EMPLOYED					
Employer Mailing Business	Address/Principal Pla	ace of		City		State		Zip Code	(Plus 4)
SELF EMPLOYED				EASTON		PA		18045	
Full Name of Con					МО	DAY	YEAR		
MAURA ADORNO)							Ц	
Mailing Address	108 MANOR DR							\$	500.00
City EAST STI	ROUDSBURG	State	Zi	p Code (Plus 4)	5	21	2021		
		PA	18	3301					
Employer Name	SELF EMPLOYED		l <u> </u>		Occupat	i on	ELF EMI	PLOYED	
Employer Mailing Address/Principal Place of City Business						State	Zip Code	Zip Code (Plus 4)	
	SELF EMPLOYED East Stroudsbur				rg	g PA 18301			
Full Name of Con	tributor			•	МО	DAY	YEAR		
ELIZABETH MEN	IO				МО	DAT	TEAR		
Mailing Address	92 BRINLEIGH DR						2024	\$	500.00
City East Stro	udsburg	State	Zi	p Code (Plus 4)	5	5 21	2021		
		PA	18	3301					
Employer Name	SELF EMPLOYED				Occupat	ion S	ELF EMI	PLOYED	
Employer Mailing Business	Address/Principal Pla	ace of		City		State		Zip Code	(Plus 4)
SELF EMPLOYED				East Stroudsbu	rg	PA		18301	
Full Name of Con FREDERICK BAR					МО	DAY	YEAR		
Mailing Address	216 GREAT BEAR W	AY						\$	500.00
City East Stro	udsburg	State	Zi	p Code (Plus 4)	5	21	2021		
		PA	18	3301					
Employer Name SELF EMPLOYED			Occupat	i on	ELF EMI	PLOYED			
	Address/Principal Pla	ace of		City	1	State		Zip Code	(Plus 4)
Business SELF EMPLOYED				East Stroudsbu	rg	PA		18301	
				l		•			

Full Name of Con	Full Name of Contributor RANDY NOLF					DAY	YEAR		
Mailing Address	296 STONEHILL LANI							<u> </u> \$	500.00
City STROUDS		State	Zij	Code (Plus 4)	5	21	2021		
STROUDS	SBURG	PA		3360					
Employer Name SELF EMPLOYED				Occupation SELF EMPLOYED					
Employer Mailing Business	Address/Principal Plac	ce of		City		State		Zip Code (Plus	4)
SELF EMPLOYED STROUDSBURG					PA		18360		
Full Name of Contributor DRUPAD BHATT					мо	DAY	YEAR		
Mailing Address	202 SUMMIT DR							\$	500.00
City STROUDS	SBURG	State	Zij	p Code (Plus 4)	5	21	2021		
		PA	18	3360					
Employer Name SELF EMPLOYED					Occupation PHYSICIAN				
Employer Mailing Address/Principal Place of City				1	State		Zip Code (Plus	4)	
Business SELF EMPLOYED				STROUDSBURG	PA			18360	
Full Name of Con					мо	DAY	YEAR		
KHEMRAJ SEDAN								Ц	
Mailing Address	1375 BUCK RIDGE D	R						\$	500.00
City STROUDS	SBURG	State	Zij	Code (Plus 4)	5	21	2021		
		PA	18	3360					
Employer Name	LVHN				Occupation DOCTOR				
Employer Mailing Business	Address/Principal Plac	ce of		City	1	State		Zip Code (Plus	4)
LVHN				East Stroudsbur	rg	PA		18301	
Full Name of Con VIDYA PONNATH					мо	DAY	YEAR		
Mailing Address	991 SUMMIT DR							 \$	500.00
		State	Ziı	o Code (Plus 4)	5	21	2021		500.00
STROUDS	SBURG	PA		3360					
Employer Name ST. LUKES			Occupat	ion	ARDIOL	_OGIST			
	Address/Principal Plac	ce of		City	1	State		Zip Code (Plus	4)
Business ST. LUKES				STROUDSBURG		PA		18360	
				•			<u>'</u>		

							TAGE 15	
Full Name of Contributor DANIEL CARNEY					DAY	YEAR		
Mailing 1 WASHINGTON ST							\$ 1,000.00	
City EAST STROUDSBURG	State PA		O Code (Plus 4)	5	20	2021		
Employer Name SELF EMPLOYED					ion A	CCOUN	ITANT	
Employer Mailing Address/Principal Place of City Business					State		Zip Code (Plus 4)	
1 WASHINGTON ST East Stroudsbur				rg PA			18301	
Full Name of Contributor DARREL COVINGTON				МО	DAY	YEAR		
Mailing PO BOX 343							\$ 3,000.00	
City East Stroudsburg	State PA		O Code (Plus 4)	5	21	2021		
Employer Name SELF EMPLOYED)	•		Occupation SELF EMPLOYED				
Employer Mailing Address/Principal Place of City Business			I	State		Zip Code (Plus 4)		
SELF EMPLOYED East Stroudsburn			rg PA			18301		
Enter Grand Total of Part C on	Schedule I, Detaile	d Sumn	nary Page, Section	on 3.			PAGE TOTAL	

19,850.00

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 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 on Sche	dule T. Detaile	d Summary Page.	Section	4.			PAGE TOTAL
	auto 1, Betune	a cammary rage,		•			\$ 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							
ZAMA FOR PA	From:	<u>5/4/2021</u> To:	<u>6/7/2021</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate			Reporting Period				
			From:			To:	
				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 So	shedule II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	Aleudie II, III-Kii	ia Contributions Deta	neu Sum	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

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(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ıdidate		Reporting Period					
ZAMA FOR PA			From	<u>5/4</u>	То:	6/7/2021		
				DATE			AMOUNT	
To Whom Paid JONAH PAULHAMUS MEDIA	МО	DAY	YEAR					
Mailing Address 303 N DUKE ST				1	2021	\$	900.00	
City MILLERSVILLE State Zip Code (Plus 4) PA 17551				ption of Exp GRAPHY	penditure			
To Whom Paid JOSEPH CHANNELL	МО	DAY	YEAR					
Mailing Address 2119 N LINCOLN ST				1	2021	\$	1,500.00	
City BURBANK	State CA	Zip Code (Plus 4) 91504	1	Description of Expenditure WEB DESIGN				
To Whom Paid THOMAS WHITEHEAD	<u>'</u>		МО	DAY	YEAR			
Mailing Address 72 IROQUOIS			6	7	2021	\$ \$	7,500.00	
City ALBRIGHTSVILLE	State PA	Zip Code (Plus 4) 18210	1	Ption of Exp				
To Whom Paid WINRED			МО	DAY	YEAR			
Mailing Address 1776 WILSON	N BLVD		6	7	2021	\$	79.60	
City ARLINGTON	State VA	Zip Code (Plus 4) 22209		ption of Exp	penditure			
							PAGE TOTAL	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

9,979.60

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					
ZAMA FOR PA					<u>5/4/2021</u>	То:		6/7/2021	
					DATE			Outstanding Balance of Debt	
Name of Creditor NCHE ZAMA				мо	DAY	YEAR			
Mailing Address 170 FOX XH	ASE RD			6	1	2021	\$	20,000.00	
City STROUDSBURG	State PA	Zip Code (Plu 18360	(Plus 4) Description of Debt LOAN						
Enter Grand Total of Unpai	d Debts on Page 1	, Report Cover Pa	ge, Item	G.			\$	20,000.00	