

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 : 20180505		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: RICKY'S PRIDE PAC										
Street Address: PO BOX 312										
City: LANSDALE			State: PA		Zip Code: 19446					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. <input checked="" type="checkbox"/>	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				
				11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		5	4	2021		6	7	2021		
A. Amount Brought Forward From Last Report				\$		2,323.01				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		1,000.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		3,323.01				
D. Total Expenditures (From Schedule III)				\$		643.32				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		2,679.69				
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
RICKY'S PRIDE PAC	From: <u>5/4/2021</u> To: <u>6/7/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 150.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 250.00
All Other Contributions (Part B)	\$ 600.00
TOTAL for the Reporting Period (2)	\$ 850.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,000.00
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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
RICKY'S PRIDE PAC	From: <u>5/4/2021</u> To: <u>6/7/2021</u>
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE				
Mailing Address PO BOX 857	5	11	2021	\$ 250.00
City NORRISTOWN State PA Zip Code (Plus 4) 19404				

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

PAGE TOTAL
\$ 250.00

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
RICKY'S PRIDE PAC	From: <u>5/4/2021</u> To: <u>6/7/2021</u>

				DATE	AMOUNT
Full Name of Contributor			MO	DAY	YEAR
BRIT HANSEN					
Mailing Address 2 LEVERINGTON AVE UNIT 57					\$ 200.00
City PHILADELPHIA	State	Zip Code (Plus 4)	5	14	
	PA	19127			
Full Name of Contributor			MO	DAY	YEAR
JENNIFER SILVAN					
Mailing Address 2425 KAREN LANE					\$ 250.00
City HATBORO	State	Zip Code (Plus 4)	5	12	
	PA	19040			
Full Name of Contributor			MO	DAY	YEAR
ADAM ERICKSON					
Mailing Address 1676 N. OLDEN AVE EWING NJ 8638					\$ 150.00
City	State	Zip Code (Plus 4)	5	9	

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

PAGE TOTAL
\$ 600.00

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: To:

			DATE	AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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 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	\$
				0.00
Mailing Address				
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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
				\$	0.00
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					

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

PAGE TOTAL
\$ 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 RICKY'S PRIDE PAC	Reporting Period From: <u>5/4/2021</u> To: <u>6/7/2021</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
RICKY'S PRIDE PAC	From <u>5/4/2021</u> To: <u>6/7/2021</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
ACT BLUE FEE	5	5	2021	\$	8.26
Mailing Address					
City	State	Zip Code (Plus 4)	Description of Expenditure		
			FEE		
To Whom Paid	MO	DAY	YEAR		
FRIENDS OF NOAH MARLIER	5	7	2021	\$	75.00
Mailing Address					
City	State	Zip Code (Plus 4)	Description of Expenditure		
			DONATION		
To Whom Paid	MO	DAY	YEAR		
DOLLAR TREE	5	7	2021	\$	10.60
Mailing Address	557 S. BROAD STREET				
City	State	Zip Code (Plus 4)	Description of Expenditure		
LANSDALE	PA	19446	STATIONARY		
To Whom Paid	MO	DAY	YEAR		
DUNKIN DONUTS	5	8	2021	\$	34.96
Mailing Address	371 E BUTLER AVE				
City	State	Zip Code (Plus 4)	Description of Expenditure		
AMBLER	PA	19002	COFFEE AND DONUTS, AMBLER PRIDE FEST		
To Whom Paid	MO	DAY	YEAR		
FRANNY PAC	5	10	2021	\$	75.00
Mailing Address					
City	State	Zip Code (Plus 4)	Description of Expenditure		
			DONATION		
To Whom Paid	MO	DAY	YEAR		
SARCELLE DESIGN	5	10	2021	\$	325.00
Mailing Address	815 W. MT. VERNON STREET				
City	State	Zip Code (Plus 4)	Description of Expenditure		
LANSDALE	PA	19446	WEBSITE		

To Whom Paid LAMDA LEGAL			MO	DAY	YEAR	\$	50.00
Mailing Address PO BOX 7410167			5	11	2021		
City CHICAGO	State IL	Zip Code (Plus 4) 60674	Description of Expenditure DONATION				
To Whom Paid ACT BLUE FEE			MO	DAY	YEAR	\$	18.03
Mailing Address			5	11	2021		
City	State	Zip Code (Plus 4)	Description of Expenditure FEE				
To Whom Paid UNITED STATES POSTAL SERVICE			MO	DAY	YEAR	\$	7.20
Mailing Address 20 VINE ST			5	12	2021		
City LANSDALE	State PA	Zip Code (Plus 4) 19446	Description of Expenditure POSTAGE				
To Whom Paid ACT BLUE FEE			MO	DAY	YEAR	\$	14.27
Mailing Address			6	3	2021		
City	State	Zip Code (Plus 4)	Description of Expenditure FEE				
To Whom Paid NORTH PENN AREA DEMOCRATIC COMMITTEE			MO	DAY	YEAR	\$	25.00
Mailing Address			6	6	2021		
City	State	Zip Code (Plus 4)	Description of Expenditure DONATION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	
						\$	643.32

