### **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 20	)170298			Repo Filed			CANDI	DATE		сомі	MITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Can	didate or L	obbyist:	F	FRIEN	DS 0	F S	SUMMER	LEE								
Street Address:	PO BOX 82	2501															
City:	PITTSBURG	GH					•	State:	PA			Zip Cod	de: 15	5218			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	2.	30 I PRI			POST-	3. <b>X</b>		AMENDM REPORT		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE-	- 5.	30 I ELE			POST-	6.		TERMINA REPORT		Yes	No		<b>\</b>
report type)	ANNUAL REPO	<b>RT</b> 7.	<b>Year</b> 2021					G METHO CHECK O				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	- Sought by Cand	idate:	•					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
DEDDECEMENT	VE IN THE CE	UEDAL ACC	EMBLV					МО	DAY	YE	AR	34	STH	DEN	1	02	
REPRESENTATI	VE IN THE GE	NEKAL ASS	EMBLY					11		2	2021		(SEE IN	STRUCTI	ONS FOR (	CODES	)
Summary of		МО	DAY YE	EAR				мо	DAY	YI	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	trom:		5 4	20	)21	то		6		7	2021						
A. Amount Bro	ught Forward F	rom Last R	eport				\$			51,3	313.31						
B. Total Moneta	ary Contributio	ns And Rec	eipts (From So	chec	lule I	)	\$			1	130.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			51,4	143.31						
D. Total Expend	ditures (From S	Schedule II	I)				\$			4	06.20						
E. Ending Cash	Balance (Subt	ract Line D	From Line C)				\$			51,0	37.11						
F. Value Of In-	Kind Contributi	ons Receiv	ed (From Sche	edul	e II)		\$				0.00						
G. Unpaid Debt	ts And Obligation	ons (From S	Schedule IV)				\$				0.00			•			
			А	\FFI	[DΑ\	IT S	EC	CTION									
PART I - If this is	s a Committee	report, trea	surer sign her	re. I	f this	is a C	and	didate re	port, e	candi	date sig	gn here.					
I swear (or affirm) correct and comple		including the	e attached sched	lules	filed o	n pape	er o	r by elect	ronic m	edium	, are to	the best o	f my kno	wledge	and beli	ef , tru	ue
Sworn to and subs	cribed before me day of	this	20							S	ignature	e of Perso	n Submit	ting Rep	ort		_
	— ————————————————————————————————————	ature				_						Prin	ted Name	e			_
My Commission Ex	cpires											Ema	il				_
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized Co	mm	ittee,	Cand	ida	te shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief	this	politic	al com	mit	tee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		his									s	ignature o	of Candid	ate			-
	day of —— ———					_						Printe	ed Name				-
	Signatu	ıre				_											_
My Commission Exp	oires											Ema	il				
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF SUMMER LEE	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)	\$	30.00
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)			\$	100.00
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
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 Pa			\$	130.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•			•	•		PAGE TOTAL

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

**PAGE TOTAL \$**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)

**Reporting Period** Name of Filing Committee or Candidate

FRIENDS OF SUMMER LEE

From: <u>5/4/2021</u> **To:** 6/7/2021

		•		DATE		AMOUNT
Full Name of Contributor STUART HASTINGS			мо	DAY	YEAR	
Mailing Address 307 S DITHRIDO	GE ST					<b>\$</b> 100.00
City PITTSBURGH	State	Zip Code (Plus 4)	5	5	2021	
	PA	152133520				

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

PAGE TOTAL 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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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.)

Name of Filing Committee or Candi	date			Rep	orting Pe	eriod			
				Fron	n:		To	<b>)</b> :	
			_		D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•				Occupa	tion	•	•	
Employer Mailing Address/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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		
FRIENDS OF SUMMER LEE	From:	<u>5/4/2021</u> <b>To:</b>	<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 PAR	T 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 Candida	te		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sci Section 2.	nedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
occuon 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									<b>\$</b>	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

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod		
FRIENDS OF SUMMER LEE	From	5/4/2021	То:	6/7/2021

			DATE			AMOUNT
		мо	DAY	YEAR		
		5	5	2021	\$	4.58
State MA	<b>Zip Code (Plus 4)</b> 021440031	1	-	penditure		
		МО	DAY	YEAR		
		6	3	2021	\$	1.96
State MA	<b>Zip Code (Plus 4)</b> 021440031			penditure		
		МО	DAY	YEAR		
RE PKWY		6	2	2021	\$	38.52
<b>State</b> CA	<b>Zip Code (Plus 4)</b> 940431351					
		МО	DAY	YEAR		
N AVE NE STE 5000		6	1	2021	\$	44.93
<b>State</b> GA	<b>Zip Code (Plus 4)</b> 303082172	1	-			
		МО	DAY	YEAR		
FL 2		6	1	2021	\$	35.90
<b>State</b> CA	<b>Zip Code (Plus 4)</b> 900712600	1	-			
	State MA  RE PKWY  State CA  N AVE NE STE 5000  State GA  FL 2  State	State   Zip Code (Plus 4)   021440031	State   Zip Code (Plus 4)   Descrip   SERVIC	MO	MO	MO

To Whom Paid NGP VAN, INC			МО	DAY	YEAR		
Mailing Address 48 GROVE ST STE 202			6	2	2021	\$	262.08
City SOMERVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
	MA	021442500	CAMPAIGN DATABASE				
To Whom Paid PNC BANK			МО	DAY	YEAR		
Mailing Address 1701 S BRADDOCK AVE			6	1	2021	\$	6.00
<b>City</b> PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	152181865	BANKING SERVICE CHARGE				
To Whom Paid VANTIV, LLC			МО	DAY	YEAR		
Mailing Address 8500 GOVERNORS HILL DR			5	11	2021	\$	12.23
City SYMMES TWP	State	Zip Code (Plus 4)	Description of Expenditure ONLINE PROCESSING FEE				
	ОН	452491384					
Enter Crond Total of Francis	itures on Dogo 1. Do	anaut Cavar Daga Itana D	-				PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	eport Cover Page, Item D	•			\$	406.20