# **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 :	i <b>on</b> 2000	)190			Repor Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	late or Lo	obbyist:	4	AFT-PE	NNSY	LVANIA							-
Street Address:	3031 WALTO	N RD, BL	JILDING A	, STE 3	340									
City:	PLYMOUTH M	EETING					State:	PA		Zip Co	<b>de:</b> 19	462		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 D. PRIM		POST-	3.	AMENDN REPORT		Yes	Nc	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-	- 5. <b>X</b>	30 D. ELEC	AY F TION	POST- 6	5.	TERMIN REPORT		Yes	Nc	· 🗸
report type)	ANNUAL REPORT	7.	<b>Year</b> 2021				NG METHO CHECK O			PAPER		$\checkmark$	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEAR					
							11		2 2021		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		9 14	20	)21 <b>T</b>	0	10	18	8 2021					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$		1	37,551.80					
B. Total Monetary Contributions And Receipts (From Schedule I)							5		852.83					
C. Total Funds Available (Sum Of Lines A and B)						\$	5	1	38,404.63					
D. Total Expenditures (From Schedule III)					\$	;		600.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$	;	13	37,804.63	4				
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedule	e II)	\$	5		0.00	-				
G. Unpaid Debt	ts And Obligations	(From S	chedule IV	()		\$	5		0.00					
				AFFI	IDAVI	t se	CTION							
	s a Committee rep		-					• •		-				
I swear (or affirm correct and comple	) that this report, inc ete.	luding the	attached sc	hedules	filed on	paper	or by elect	ronic mee	lium, are to	the best o	of my knov	vledge	and beli	ef, true
Sworn to and subs	cribed before me thi day of	S	20						Signatur	e of Perso	n Submitt	ing Rep	oort	
	Signatu	ire				_				Prin	ited Name			
My Commission Ex	xpires					_				Ema	il			
	мо	DA	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee, C	andic	late shall	sign hei	re.					
I swear (or affirm) No 320) as amende	that to the best of ı ed.	ny knowle	dge and beli	ef this p	political	comn	nittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subso	ribed before me this day of		20						5	Signature	of Candida	ite		
						_				Printe	ed Name			
My Commission Exp	Signature bires					-				Ema	il			
	мо	DA	AY	YR		-		Area C	ode	D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** AFT-PENNSYLVANIA From: <u>9/14/2021</u> To: 10/18/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 852.83 **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)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 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 \$ 852.83 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 Committee or Candi	Name of Filing Committee or Candidate				Reporting Period					
				rom: To:						
					DATE			AMOUNT		
Full Name of Contributing Committee	3			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.							\$	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 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	)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00	

# 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:					
					DATE AMOUNT			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
					PAGE TOTAL				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Secti							\$	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.)

ame of Filing Committee or Candidate				Reporting Period					
Fro				om:			To:		
			DATE AMOU				OUNT		
Full Name of Contributor				DAY	YEAR	\$	0.00		
State	Zip Code (Plu	s 4)							
•			Occupation						
Employer Name 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.							<b>GE TOTAL</b> 0.00		
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA From: DA MO State Zip Code (Plus 4) Coccupat ce of Business City	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From:     To       DATE       MO     DAY     YEAR       State     Zip Code (Plus 4)     Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code		

## 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	Reporting Period						
			From:	n: To:						
				DATE				AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
Inter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.						\$		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								
AFT-PENNSYLVANIA	From:	<u>9/14/2021</u> <b>то:</b>	<u>10/18/2021</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 PART F)									
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	Name of Filing Committee or Candidate			Period	·							
			From:			То:						
	DATE				AMOUNT							
Full Name of Contributor			мо	DAY	YEAR							
Mailing Address		_				<b>7</b> \$		0.00				
City	State	Zip Code (Plus 4)										
Description of Contribution:			1									
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	ame of Filing Committee or Candidate			Reporting Period						
						То:				
					DATE AMOUN					
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							<b>\$</b> 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						<b>PAGE TOTAL</b> 0.00				

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporting Period					
AFT-PENNSYLVANIA				<u>9/14/2021</u> <b>To:</b>			<u>10/18/2021</u>	
				DATE AMO				
To Whom Paid				DAY	YEAR			
Labor PAC AFL-CIO								
Mailing Address 3031 Walto	on RD BLDG C Suite 300		10	11	2021	\$	600.00	
City Plymouth Meeting	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19462	Contrib	ution				
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							600.00	