

Commonwealth of Pennsylvania

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 : 20180067		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST						
Name of Filing Committee, Candidate or Lobbyist: SANTARSIERO, STEVE FOR STATE SENATE											
Street Address: PO BOX 671											
City: NEWTOWN			State: PA	Zip Code: 18940-0671							
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. X	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2020	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
				MO	DAY	YEAR					
				11	3	2020	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	19	2020	TO	6	22	2020			
A. Amount Brought Forward From Last Report				\$		71,388.81					
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		1,018.00					
C. Total Funds Available (Sum Of Lines A and B)				\$		72,406.81					
D. Total Expenditures (From Schedule III)				\$		19,054.17					
E. Ending Cash Balance (Subtract Line D From Line C)				\$		53,352.64					
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
SANTARSIERO, STEVE FOR STATE SENATE	From: <u>5/19/2020</u> To: <u>6/22/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 18.00

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)	\$ 0.00
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
All Other Contributions (Part D)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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.)	\$ 1,018.00
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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
	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 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)**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

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

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

PAGE TOTAL
\$ 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: To:

	DATE			AMOUNT			
Full Name of Contributing Committee	MO	DAY	YEAR				
Mailing Address				\$ 0.00			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">City</td> <td style="width: 20%; padding: 5px;">State</td> <td style="width: 50%; padding: 5px;">Zip Code (Plus 4)</td> </tr> </table>	City	State	Zip Code (Plus 4)				
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 SANTARSIERO, STEVE FOR STATE SENATE	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Joseph F Franlin					
Mailing Address PO Box 290				\$ 1,000.00	
City Bedminster	6	19	2020		
State PA					
Zip Code (Plus 4) 189100290					
Employer Name Not Employed				Occupation Not Employed	
Employer Mailing Address/Principal Place of Business PO Box 290	City Bedminster		State PA	Zip Code (Plus 4) 189100290	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1,000.00

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:	

Full Name	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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 SANTARSIERO, STEVE FOR STATE SENATE	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</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: _____
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				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
SANTARSIERO, STEVE FOR STATE SENATE	From <u>5/19/2020</u> To: <u>6/22/2020</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
ActBlue	6	9	2020	\$ 2.23
Mailing Address PO Box 441146				
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure ActBlue business to business fee	
To Whom Paid AweberCommunications	5	26	2020	\$ 464.00
Mailing Address 1100 Manor Dr				
City Chalfont	State PA	Zip Code (Plus 4) 189142252	Description of Expenditure Monthly Email Vendor Charge	
To Whom Paid Cappelletti for Pa	5	20	2020	\$ 5,000.00
Mailing Address PO Box 498				
City Norristown	State PA	Zip Code (Plus 4) 194040498	Description of Expenditure contribution made	
To Whom Paid Family and Friends of Janet Diaz	6	18	2020	\$ 2,500.00
Mailing Address 1653 Lititz Pike # 207				
City Lancaster	State PA	Zip Code (Plus 4) 176016507	Description of Expenditure contribution made	
To Whom Paid Friends of Anne Marie Mitchell	6	18	2020	\$ 500.00
Mailing Address PO Box 261				
City Richboro	State PA	Zip Code (Plus 4) 189540261	Description of Expenditure contribution made	

To Whom Paid Friends of Julie Slomski			MO	DAY	YEAR	
Mailing Address 5510 Mill St			6	18	2020	
City Erie	State PA	Zip Code (Plus 4) 165092922	Description of Expenditure contribution made			
To Whom Paid Friends of Pam Iovino			MO	DAY	YEAR	
Mailing Address PO Box 14532			6	18	2020	
City Pittsburgh	State PA	Zip Code (Plus 4) 152340532	Description of Expenditure Contribution			
To Whom Paid Friends of Shanna Danielson			MO	DAY	YEAR	
Mailing Address 170 Martel Cir			6	18	2020	
City Dillsburg	State PA	Zip Code (Plus 4) 170198717	Description of Expenditure contribution made			
To Whom Paid George Scott for PA 15			MO	DAY	YEAR	
Mailing Address PO Box 1063			6	18	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 171081063	Description of Expenditure contribution made			
To Whom Paid Google G Suite			MO	DAY	YEAR	
Mailing Address 1600 Amphitheatre Pkwy			6	3	2020	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Email Marketing			
To Whom Paid Kane for Senate			MO	DAY	YEAR	
Mailing Address 209 Harding Ave			6	18	2020	
City Havertown	State PA	Zip Code (Plus 4) 190833409	Description of Expenditure contribution made			

To Whom Paid NGP VAN, Inc.			MO	DAY	YEAR	
Mailing Address 1101 15th St NW Ste 500			5	22	2020	\$ 60.00
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure Database Charge			
To Whom Paid Sage Payment Solutions			MO	DAY	YEAR	
Mailing Address 12120 Sunset Hills Rd Ste 500			6	1	2020	\$ 2.50
City Reston	State VA	Zip Code (Plus 4) 201905858	Description of Expenditure Bank card merchant fees			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 19,054.17

