# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :		Repo Filed		CAND	DATE	CC	OMMITTEE	<ul> <li>✓</li> </ul>	LOB	BYIST				
	Committee, Candida	ate or Lo	bbyist:			-	RO, STEVI	E FOR S	STATE SE	ENATE				
Street Address:	PO BOX 671													
City:	NEWTOWN						State:	PA		Zip C	ode: 18	8940-0	671	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	3.	AMENE REPOR		Yes	V No	)
(place X to the right of	6TH TUESDAY PRE-ELECTION		2ND FRIDA ELECTION	y pre	≣- 5.	30 D ELEC	AY TION	POST-	6. <b>X</b>		TERMINATION Yes No REPORT?			· •
report type)	ANNUAL REPORT	7.	<b>Year</b> 2020				NG METH CHECK O			PAPER	2	$\checkmark$	DISKE	TTE
Name of Office	Sought by Candidat	te:			-		DATE C	OF ELEC	CTION	Distric Numbe		Pa	rty Code	County Code
							мо	DAY	YEAR					
							11		_	)20			ONS FOR	CODES)
Summary of Expenditures	Receipts and s from:	мо	DAY	YEAR		•••	мо	DAY	YEAR		OR OFFIC	CE USE	ONLY	
. 10 20 2020						то	11	. 2	23 20	020				
	ought Forward From		-			\$			42,441.					
	ary Contributions A			1 Sche	dule 1)	4	5		7,750.	.00				
	Available (Sum Of		-			4			50,191.					
-	ditures (From Sche	-	-			4	5		12,574.					
	Balance (Subtract			-					37,617.4					
	Kind Contributions		•		le II)		\$ 0.00 \$ 0.00							
				-										
DADT I - If this i	s a Committee repo	ort troop	uror sign						andidate	sign borg				
I swear (or affirm	) that this report, inclu		-					• •		-		wledge	and beli	ief , true
correct and compl	ere. scribed before me this day of		20						Signa	ture of Pers	on Submit	ting Re	port	
						_				Pr	inted Name	2		
My Commission E	Signatur xpires	re								Em	ail			
-	мо	DAY	Y	YR				Are	a Code		me Teleph	ione Nu	mber	
Part II- If this is	a report of a cand	lidate's a	uthorized	Comn	nittee,	Candio	late shall	sign he	re.					
I swear (or affirm) No 320) as amend	) that to the best of m ed.	ıy knowled	lge and beli	ef this	politica	l comn	nittee has r	not violat	ed any pro	ovisions of t	he act of J	une 3,1	937 (P.I	1333,
Sworn to and subs	cribed before me this day of		20							Signature	e of Candida	ate		
			20							Prin	ted Name			
My Commission Ex	Signature					_				Em	nail			
	мо	DAY	Y	YR	2			Area (	Code		Daytime To	elephoi	ne Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** SANTARSIERO, STEVE FOR STATE SENATE From: <u>10/20/2020</u> **To:** <u>11/23/2020</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **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)** 250.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 250.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 7,500.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 7,500.00 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 \$ 7,750.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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# 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				Period			
	From: To:						
		·		DATE			AMOUNT
Full Name of Contributing Com	nittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4	)				
						Г	PAGE TOTAL

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

0.00

\$

Use this Part to ite	emize all othe 0.01 to \$250.	1 TO \$250.00 r contribution 00 in the repo	s w ortir	ith an 1g peri	aggrega iod.			rom
Name of Filing Committee or Candida	te		Rep	orting Po	eriod			
SANTARSIERO, STEVE FOR STATE S	Fro	rom: <u>10/20/2020</u> To:			:	<u>11/23/2020</u>		
					DATE			AMOUNT
Full Name of Contributor Allen B Mason				мо	DAY	YEAR		
Mailing Address PO Box 775					10		\$	125.00
City Montgomeryville	<b>State</b> PA	Zip Code (Plus 4) 189360775		11	12	2020		
Full Name of Contributor Matthew Garber				мо	DAY	YEAR		
Mailing Address 97 Byers Rd							\$	125.00
City Ottsville	<b>State</b> PA	Zip Code (Plus 4) 189429631		11	12	2020		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								<b>PAGE TOTAL</b> 250.00

# 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	g Period				
SANTARSIERO, STEVE FOR STATE SENA	ΛTE		From:	<u>10/2</u>	<u>0/2020</u>	То:	<u>11/23/2020</u>	
				DA	TE		AMOUNT	
Full Name of Contributing Committee GGR Inc PAC				мо	DAY	YEAR		
Mailing Address 212 Locust St Ste 3	00						<b>\$</b> 500.00	
City Harrisburg	<b>State</b> PA	<b>Zip Code</b> 171011	<b>e (Plus 4)</b> 510	11	12	2020		
Full Name of Contributing Committee Independence Blue Cross PAC				мо	DAY	YEAR		
Mailing Address 1901 Market St City Philadelphia	<b>State</b> PA	<b>Zip Code</b> 191031	<b>e (Plus 4)</b> 480	11	12	2020	\$ 500.00	
Full Name of Contributing Committee				МО	DAY	YEAR		
Mailing Address 212 N 3rd St Ste 10 City Harrisburg	1 State PA	<b>Zip Code</b> 171011	<b>e (Plus 4)</b> 505	11	12	2020	\$ 1,000.00	
Full Name of Contributing Committee PA-THA-PAC				мо	DAY	YEAR		
Mailing Address PO Box 300 City Bensalem	<b>State</b> PA	<b>Zip Code</b> 190200	<b>e (Plus 4)</b> 300	11	19	2020	\$ 500.00	
Full Name of Contributing Committee PAA-PAC				мо	DAY	YEAR		
Mailing Address 1925 N Front St P.O	. Box 2955 <b>State</b> PA	<b>Zip Code</b> 171022	<b>e (Plus 4)</b> 214	11	12	2020	<b>\$</b> 500.00	

Full Name of Contributing Comm	ittee		мо	DAY	YEAR		
Pennsylvania Optometric Politica	al Action Committee						
Mailing Address 218 North St						\$	500.00
City Harrisburg	State	Zip Code (Plus 4)	11	12	2020		
lanosarg	PA	171011124					
Full Name of Contributing Comm	ittee					È	
PPL People for Good Governmer	nt		мо	DAY	YEAR		
Mailing Address 2 N 9th St						\$	500.00
City Allentown	State	Zip Code (Plus 4)	11	12	2020		
Allentown	PA	181011179					
Full Name of Contributing Comm	ittee	I		DAY	VEAD	İ.	
APSCUF/CAP-PA			мо	DAY	YEAR		
Mailing Address 319 N Front S	St P.O. Box 11995					\$	1,500.00
City Harrisburg	State	Zip Code (Plus 4)	11	12	2020		
	PA	171011203					
Full Name of Contributing Committee				DAY	YEAR		
Crisci Associates PAC			мо				
Mailing Address 204 State St						\$	500.00
City Harrisburg	State	Zip Code (Plus 4)	10	22	2020		
5	PA	171011132					
Full Name of Contributing Comm	ittee	· ·	мо	DAY	YEAR		
Merck & Co PAC			140	DAI	TEAK		
Mailing Address 601 Pennsylv	ania Ave NW Ste 1200	0				\$	1,000.00
City Washington	State	Zip Code (Plus 4)	10	27	2020		
-	DC	200042601					
Full Name of Contributing Comm	ittee	•	мо	DAY	YEAR		
FirstEnergy Political Action Com	mittee		MO		TLAK		
Mailing Address 76 S Main St						\$	500.00
City Akron	State	Zip Code (Plus 4)	10	27	2020		
	ОН	443081812					
			•		[		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	d Summary Page, Sectio	n 3.			\$	7,500.00
					L		

# 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:	То:

				D	ATE		АМО	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code (	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I, Deta	iled Sumr	nary Page, Secti	on 3.		Γ	PAG	E TOTAL
	·						\$	0.00

I

## 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	ing Perio	d				
			From:	From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description									
Enter Grand Total of Part E on Schedu	le T. Detailed Summ	nary Page	Section	4				PAGE TO	ΓAL
		iiai y i uge,	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 Peri	od	
SANTARSIERO, STEVE FOR STATE SENATE	From:	<u>10/20/2020</u> <b>то:</b>	<u>11/23/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	ł	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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, 3		\$	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					
	F					То:		
				DATE		АМС	DUNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

### PAGE 11

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Re	porting F	Period			
					From: 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 Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions D				ons De	taile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
SANTARSIERO, STEVE FOR STATE SEN	IATE		From	<u>10/20</u>	<u>0/2020</u>	То:	<u>11/23/2020</u>
				DATE			AMOUNT
<b>To Whom Paid</b> ActBlue			мо	DAY	YEAR		
Mailing Address PO Box 441146			11	4	2020	\$	3.94
City West Somerville	State MA	Zip Code (Plus 4) 021440031		otion of Exp e percenta			
<b>To Whom Paid</b> ActBlue			мо	DAY	YEAR		
Mailing Address PO Box 441146			11	10	2020	\$	9.23
CityWest SomervilleStateZip Code (Plus 4)MA021440031				otion of Exp			
To Whom Paid AweberCommunications			мо	DAY	YEAR		
Mailing Address 1100 Manor Dr			10	23	2020	\$	464.00
City Chalfont	State PA	Zip Code (Plus 4) 189142252		<b>otion of Exp</b> y Email Ve			
<b>To Whom Paid</b> Google G Suite			мо	DAY	YEAR		
Mailing Address 1600 Amphitheatre	Pkwy		11	2	2020	\$	25.44
City Mountain View	State CA	<b>Zip Code (Plus 4)</b> 940431351		<b>otion of Exp</b> larketing	penditure		
To Whom Paid NGP VAN, Inc.			мо	DAY	YEAR		
Mailing Address 1101 15th St NW Ste 500			11	5	2020	\$	1,208.40
City Washington	State DC	<b>Zip Code (Plus 4)</b> 200055006		<b>se</b> Charge			

						1		
To Whom Paid Pennsylvania Senate Democratic Campaign Committee					DAY	YEAR		
Mailing Address PO Box 59358					29	2020	\$	5,000.0
City Phila		State Zip Code (Plus 4)			tion of Exr	anditure		
Fillia		РА	191029358	Description of Expenditure contribution made				
<b>To Whom Paid</b> Pennsylvania Senate Democratic Campaign Committee				мо	DAY	YEAR		
Mailing Address PO Box 59358			10	30	2020	\$	5,000.0	
City Phila	State Zip Code (Plus 4)			Descrip	tion of Exp	oenditure		
11110		РА	191029358	Description of Expenditure contribution made				
To Whom Paid Steve Santarsiero				мо	DAY	YEAR		
Mailing Address 530 Southridge Cir			10	22	2020	\$	263.0	
City Yardley		State Zip Code (F				, penditure		
,		РА	190674771	Description of Expenditure Reimbursement for cost of beer for virtual beer tasting fundraiser.				
To Whom Paid Staples								
				мо	DAY	YEAR		
	10 West Rd Unit S			<b>мо</b> 10	<b>DAY</b> 29	<b>YEAR</b> 2020	\$	11.6
Staples Mailing Address	10 West Rd Unit S	State	Zip Code (Plus 4)	10	29	2020		11.6
Staples Mailing Address	10 West Rd Unit S	State PA	<b>Zip Code (Plus 4)</b> 189404301	10 Descrip		2020 Denditure		11.6
Staples Mailing Address	10 West Rd Unit S			10 Descrip	29 otion of Exp	2020 Denditure		11.6
Staples Mailing Address City Newtown To Whom Paid	10 West Rd Unit S			10 Descrip office s	29 <b>otion of Exp</b> upplies- er	2020 penditure nvelopes		11.6
Staples Mailing Address City Newtown To Whom Paid Wells Fargo Mailing Address	1420 E Lincoln Hwy			10 Descrip office s MO	29 btion of Exp upplies- er DAY 20	2020 penditure nvelopes YEAR 2020	\$	
Staples Mailing Address City Newtown To Whom Paid Wells Fargo Mailing Address	1420 E Lincoln Hwy	РА	189404301	10 Descrip office s MO 10 Descrip	29 btion of Exp upplies- er DAY	2020 enditure tvelopes YEAR 2020 enditure	\$	
Staples Mailing Address City Newtown To Whom Paid Wells Fargo Mailing Address	1420 E Lincoln Hwy	PA	189404301	10 Descrip office s MO 10 Descrip	29 ption of Exp upplies- er DAY 20 ption of Exp	2020 enditure tvelopes YEAR 2020 enditure	\$	
Staples Mailing Address City Newtown To Whom Paid Wells Fargo Mailing Address City Langhorne To Whom Paid	1420 E Lincoln Hwy	PA	189404301	10 Descrip office s MO 10 Descrip Stop Pa	29 ption of Exp upplies- er DAY 20 ption of Exp ayment fee	2020 enditure tvelopes YEAR 2020 enditure e check #	\$	
Staples Mailing Address City Newtown To Whom Paid Wells Fargo Mailing Address City Langhorne To Whom Paid Wells Fargo	1420 E Lincoln Hwy 9 1420 E Lincoln Hwy	PA	189404301	10 Descrip office s MO 10 Descrip Stop Pa MO	29 ption of Exp upplies- er DAY 20 ption of Exp ayment fee DAY	2020 enditure velopes YEAR 2020 enditure e check # YEAR 2020	\$ #1224	31.0

To Whom Paid Wells Fargo	мо	DAY	YEAR				
Mailing Address 1420 E Lincoln Hwy				29	2020	\$	30.00
City Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190473007	Description of Expenditure wire transfer service charge				
To Whom Paid Wells Fargo				DAY	YEAR		
Mailing Address 1420 E Lincoln Hwy				30	2020	\$	30.00
City Langhorne	<b>State</b> PA	Zip Code (Plus 4) 190473007	Description of Expenditure wire transfer service charge				
To Whom Paid Sage Payment Solutions				DAY	YEAR		
Mailing Address 12120 Sunset Hills Rd			11	2	2020	\$	2.50
City Reston	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 20190	Description of Expenditure Bank card merchant fees				
To Whom Paid AweberCommunications				DAY	YEAR		
Mailing Address 1100 Manor Dr				23	2020	\$	464.00
City Chalfont	<b>State</b> PA	Zip Code (Plus 4) 189142252	Description of Expenditure Monthly email vendor charge				
Enter Grand Total of Expenditures	\$	<b>PAGE TOTAL</b> 12,574.16					