

# 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.	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	DISKETTE <input checked="" type="checkbox"/>	
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code
					MO	DAY	YEAR		
					3	17	2020	(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY
		1	1	2020		3	2	2020	
A. Amount Brought Forward From Last Report					\$ 86,562.91				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 411.00				
C. Total Funds Available (Sum Of Lines A and B)					\$ 86,973.91				
D. Total Expenditures (From Schedule III)					\$ 12,088.49				
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 74,885.42				
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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
SANTARSIERO, STEVE FOR STATE SENATE	From: <u>1/1/2020</u> To: <u>3/2/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 61.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 100.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 350.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 411.00
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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.**

<b>Name of Filing Committee or Candidate</b>  SANTARSIERO, STEVE FOR STATE SENATE	<b>Reporting Period</b>  From: <u>1/1/2020</u> To: <u>3/2/2020</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
Newtown Democrats						
Mailing Address			1	10	2020	
33 Meridian Cir						
City	Newtown	State				
		PA				
		Zip Code (Plus 4)				
		189401741				

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

<b>PAGE TOTAL</b>
\$ 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
SANTARSIERO, STEVE FOR STATE SENATE	<b>From:</b> <u>1/1/2020</u> <b>To:</b> <u>3/2/2020</u>

DATE				AMOUNT
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
David P Moore				
<b>Mailing Address</b> 467 S Norwood Ave				\$ 100.00
<b>City</b> Newtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189401834		

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

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

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

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

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> <b>To:</b>

				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.**

<b>PAGE TOTAL</b>	
\$	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
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

			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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
SANTARSIERO, STEVE FOR STATE SENATE		From: <u>1/1/2020</u> To: <u>3/2/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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.						<b>PAGE TOTAL</b>  \$ 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	\$ 0.00
Mailing Address							
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
SANTARSIERO, STEVE FOR STATE SENATE	From <u>1/1/2020</u> To: <u>3/2/2020</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ActBlue				
<b>Mailing Address</b> PO Box 441146	1	8	2020	\$ 15.27
<b>City</b> West Somerville	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> ActBlue percentage fees	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ActBlue				
<b>Mailing Address</b> PO Box 441146	1	9	2020	\$ 30.20
<b>City</b> West Somerville	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> ActBlue percentage fees	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ActBlue				
<b>Mailing Address</b> PO Box 441146	2	11	2020	\$ 2.25
<b>City</b> West Somerville	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> ActBlue business to business fee	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AweberCommunications				
<b>Mailing Address</b> 1100 Manor Dr	1	23	2020	\$ 464.00
<b>City</b> Chalfont	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189142252	<b>Description of Expenditure</b> Monthly Email Vendor Charge	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AweberCommunications				
<b>Mailing Address</b> 1100 Manor Dr	2	24	2020	\$ 464.00
<b>City</b> Chalfont	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189142252	<b>Description of Expenditure</b> Monthly Email Vendor Charge	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Bucks County Democratic Committee				
<b>Mailing Address</b> 123 N Broad St Ste B	1	6	2020	\$ 2,500.00
<b>City</b> Doylestown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189013716	<b>Description of Expenditure</b> contribution made- 1/7/20 Bucks fundraiser	

To Whom Paid			MO	DAY	YEAR	\$ 500.00
Bucks County tour of Honor			2	2	2020	
Mailing Address PO Box 689			2	2	2020	
City Doylestown	State PA	Zip Code (Plus 4) 189010689	Description of Expenditure contribution made			

To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
Cappelletti for Pa			2	25	2020	
Mailing Address PO Box 498			2	25	2020	
City Norristown	State PA	Zip Code (Plus 4) 194040498	Description of Expenditure contribution made			

To Whom Paid			MO	DAY	YEAR	\$ 750.00
Commonwealth Compliance Solutions, LLC			2	10	2020	
Mailing Address PO Box 748			2	10	2020	
City Mechanicsburg	State PA	Zip Code (Plus 4) 170550748	Description of Expenditure compliance firm fee			

To Whom Paid			MO	DAY	YEAR	\$ 1,500.00
Friends of Farnese			2	2	2020	
Mailing Address PO Box 22596			2	2	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191102596	Description of Expenditure contribution made			

To Whom Paid			MO	DAY	YEAR	\$ 500.00
Friends of Harold M Hayes			2	25	2020	
Mailing Address 2148 Andrea Dr			2	25	2020	
City Bensalem	State PA	Zip Code (Plus 4) 190202911	Description of Expenditure contribution made			

To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
Friends of Wendy Ullman			1	23	2020	
Mailing Address 5747 Ridgeview Dr			1	23	2020	
City Doylestown	State PA	Zip Code (Plus 4) 189021344	Description of Expenditure contribution made			

To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
George Scott for PA 15			1	9	2020	
Mailing Address PO Box 1063			1	9	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 171081063	Description of Expenditure contribution made			

To Whom Paid			MO	DAY	YEAR	\$ 500.00
George Scott for PA 15			2	25	2020	
Mailing Address PO Box 1063			2	25	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 171081063	Description of Expenditure contribution made			

To Whom Paid			MO	DAY	YEAR	\$ 25.44
Google G Suite						
Mailing Address 1600 Amphitheatre Pkwy			1	1	2020	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Email Marketing			

To Whom Paid			MO	DAY	YEAR	\$ 25.44
Google G Suite						
Mailing Address 1600 Amphitheatre Pkwy			2	3	2020	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Email Marketing			

To Whom Paid			MO	DAY	YEAR	\$ 25.44
Google G Suite						
Mailing Address 1600 Amphitheatre Pkwy			3	2	2020	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Email Marketing			

To Whom Paid			MO	DAY	YEAR	\$ 1,140.00
NGP VAN, Inc.						
Mailing Address 1101 15th St NW Ste 500			2	2	2020	
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure Database Charge			

To Whom Paid			MO	DAY	YEAR	\$ 2.50
Sage Payment Solutions						
Mailing Address 12120 Sunset Hills Rd Ste 500			1	3	2020	
City Reston	State VA	Zip Code (Plus 4) 201905858	Description of Expenditure Bank card merchant fees			

To Whom Paid			MO	DAY	YEAR	\$ 2.50
Sage Payment Solutions						
Mailing Address 12120 Sunset Hills Rd Ste 500			2	3	2020	
City Reston	State VA	Zip Code (Plus 4) 201905858	Description of Expenditure Bank card merchant fees			

To Whom Paid			MO	DAY	YEAR	\$ 2.50
Sage Payment Solutions						
Mailing Address 12120 Sunset Hills Rd Ste 500			3	2	2020	
City Reston	State VA	Zip Code (Plus 4) 201905858	Description of Expenditure Bank card merchant fees			

To Whom Paid			MO	DAY	YEAR	\$ 500.00
Steamfitter's L.U. 420 Wish						
Mailing Address 4031 Freemansburg Ave			2	2	2020	
City Easton	State PA	Zip Code (Plus 4) 180455520	Description of Expenditure contribution for charity fundraiser event			

<b>To Whom Paid</b> United States Postal Service			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 4.95
<b>Mailing Address</b> 20 Terry Dr			1	31	2020	
<b>City</b> Newtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189405014	<b>Description of Expenditure</b> postage			

  

<b>To Whom Paid</b> United States Postal Service			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 134.00
<b>Mailing Address</b> 20 Terry Dr			2	26	2020	
<b>City</b> Newtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189405014	<b>Description of Expenditure</b> Renew P O Box fee			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 12,088.49

