### **Campaign Finance Report**

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

| Filer Identificati<br>Number :  | on                        | 20120      | 419         |                      |            | Rep<br>File |       |        | CAI           | NDII     | IDIDATE COMMITTEE LOBBYIST |        |            |                        |                |          |          |          |          |
|---|---------------------------|------------|-------------|----------------------|------------|-------------|-------|--------|---------------|----------|----------------------------|--------|------------|------------------------|----------------|----------|----------|----------|----------|
| Name of Filing C  | ommittee, C               | Candida    | te or Lo    | bbyist:              |            | Cam         | pai   | gn for | Com           | pas      | sion C                     | omm    | ittee      |                        |                |          |          |          |          |
| Street Address:   | P.O. Box                  | x 3023     | 4           |                      |            |             |       |        |               |          |                            |        |            |                        |                |          |          |          |          |
| City:   | Elkins Pa                 | ark        |             |                      |            |             |       |        | State         | <b>:</b> | PA                         |        |            | <b>Zip Code:</b> 19027 |                |          |          |          |          |
| TYPE OF<br>REPORT   | 6TH TUESDA<br>PRE-PRIMAR  |            | 1.          | 2ND FRID<br>PRIMARY  | AY PRE     | - :         | 2.    | 30 DA  |               | Р        | POST- 3.                   |        |            | AMENDMENT<br>REPORT?   |                | Yes      | N        | 0        | <b>√</b> |
| (place X to<br>the right of   | 6TH TUESDA<br>PRE-ELECTIO |            | 4.          | 2ND FRID<br>ELECTION |            | E- !        | 5.    | 30 DA  |               | Р        | OST-                       | 6.     |            | TERMINA<br>REPORT?     |                | Yes      | N        | 0        | <b>√</b> |
| report type)  | ANNUAL RE                 | PORT       | 7. <b>X</b> | Year 201             | 9          |             |       |        | IG ME<br>CHEC |          |                            |        |            | PAPER                  |                | <b>√</b> | DISK     | ETTE     |          |
| Name of Office S  | ought by Ca               | ndidate    | e:          |                      |            |             |       |        | DAT           | E O      | F ELE                      | CTIC   | )N         | District<br>Number     | Office<br>Code | Pai      | rty Code | Cour     |          |
|   |                           |            |             |                      |            |             |       |        | МО            |          | DAY                        | YI     | EAR        |                        | •              | •        |          |          |          |
|   |                           |            |             |                      |            |             |       |        |               | 11       |                            | 5      | 2019       |                        | (SEE INS       | TRUCTI   | ONS FOR  | CODES    | )        |
| Summary of  |                           | nd         | МО          | DAY                  | YEAF       | 2           |       |        | МО            |          | DAY                        | Y      | EAR        | FO                     | R OFFIC        | E USE    | ONLY     |          |          |
| Expenditures  | Trom:                     |            |             | 1                    | 1 2        | 019         | Т     | 0      |               | 12       | :                          | 31     | 2019       |                        |                |          |          |          |          |
| A. Amount Brought Forward From Last Report                                  |                           |            |             |                      |            |             |       | \$     |               |          |                            | 9,     | 785.02     |                        |                |          |          |          |          |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 16,838.00 |                           |            |             |                      |            |             |       |        |               |          |                            |        |            |                        |                |          |          |          |          |
| C. Total Funds Available (Sum Of Lines A and B) \$ 26,623.02                |                           |            |             |                      |            |             |       |        |               |          |                            |        |            |                        |                |          |          |          |          |
| D. Total Expenditures (From Schedule III)                                   |                           |            |             |                      |            | \$          |       |        |               | 22,0     | )57.63                     |        |            |                        |                |          |          |          |          |
| E. Ending Cash Balance (Subtract Line D From Line C)                        |                           |            |             |                      |            | \$          |       |        |               | 4,5      | 65.39                      |        |            |                        |                |          |          |          |          |
| F. Value Of In-   | Kind Contrib              | utions     | Receive     | ed (From             | Schedu     | le II       | )     | \$     |               |          |                            |        | 0.00       |                        |                |          |          |          |          |
| G. Unpaid Debt  | s And Obliga              | ations (   | From S      | chedule 1            | (V)        |             |       | \$     |               |          |                            | 2,0    | 00.00      |                        | •              |          |          |          |          |
|   |                           |            |             |                      | AFF        | FIDA        | \VI   | ΓSE    | CTIC          | N        |                            |        |            |                        |                |          |          |          |          |
| PART I - If this is   | a Committe                | ee repo    | rt, trea    | surer sigi           | here.      | If th       | is is | a Car  | ndidat        | e re     | port, o                    | andi   | date sig   | ın here.               |                |          |          |          |          |
| I swear (or affirm) correct and comple                                      |                           | ort, inclu | ding the    | attached s           | chedule    | s filed     | d on  | paper  | or by e       | electr   | onic m                     | edium  | , are to t | he best of             | my knov        | vledge   | and bel  | ief , tr | ue       |
| Sworn to and subs   | cribed before<br>day of   | me this    |             | 20                   |            |             |       |        |               |          |                            | 9      | Signature  | of Persoi              | n Submitt      | ing Re   | port     |          | _        |
|   | - <u> </u>                | Signature  | •           |                      |            |             |       | -      |               |          |                            |        |            | Print                  | ted Name       |          |          |          | _        |
| My Commission Ex  |                           |            |             |                      |            |             |       |        |               |          |                            |        |            | Emai                   | I              |          |          |          |          |
|   | мо                        |            | D/          | <b>\</b> Υ           | YR         |             |       |        |               |          | Arc                        | ea Coo | le         | Daytim                 | e Teleph       | one Nu   | mber     |          |          |
| Part II- If this is   | a report of               | a candi    | date's      | authorize            | d Comr     | nitte       | e, C  | andid  | ate sł        | nall s   | sign he                    | ere.   |            |                        |                |          |          |          |          |
| I swear (or affirm)<br>No 320) as amende                                    |                           | est of my  | / knowle    | dge and be           | elief this | s polit     | ical  | comm   | ittee h       | as no    | ot viola                   | ted ar | ıy provisi | ions of the            | e act of Ju    | ine 3,1  | 937 (P.  | L. 133   | 3,       |
| Sworn to and subsc  |                           | ne this    |             |                      |            |             |       |        |               |          |                            |        | Si         | ignature o             | f Candida      | ite      |          |          | -        |
| -   | day of<br>— —             |            |             | - —                  |            |             |       | -      |               |          |                            |        |            | Printe                 | d Name         |          |          |          | -        |
|   | Sign                      | nature     |             |                      |            |             |       | -      |               |          |                            |        |            |                        |                |          |          |          | _        |
| My Commission Exp   | ires                      |            |             |                      |            |             |       |        |               |          |                            |        |            | Emai                   | I              |          |          |          |          |
|   | -                         | МО         | DA          | λΥ                   | YF         | 2           |       | •      |               |          | Area                       | Code   |            | Da                     | ytime Te       | elephor  | ne Num   | ber      | _        |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| -  |           |          |              |            |  |  |  |  |
|--|-----------|----------|--------------|------------|--|--|--|--|
| Name of Filing Committee or Candidate  | Reporting | g Period |              |            |  |  |  |  |
| Campaign for Compassion Committee  | From:     | 1/1/201  | <u>9</u> To: | 12/31/2019 |  |  |  |  |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |          |              |            |  |  |  |  |
| TOTAL for the Reporting  | ) Period  | (1)      | \$           | 225.00     |  |  |  |  |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)  |           |          |              |            |  |  |  |  |
| Contributions Received From Political Committees (Part A)  |           |          | \$           | 250.00     |  |  |  |  |
| All Other Contributions (Part B)   |           |          | \$           | 1,863.00   |  |  |  |  |
| TOTAL for the Reporting  | ) Period  | (2)      | \$           | 2,113.00   |  |  |  |  |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |          |              |            |  |  |  |  |
| Contributions Received From Political Committees (Part C)  |           |          | \$           | 14,000.00  |  |  |  |  |
| All Other Contributions (Part D)   |           |          | \$           | 500.00     |  |  |  |  |
| TOTAL for the Reporting  | ) Period  | (3)      | \$           | 14,500.00  |  |  |  |  |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |          |              |            |  |  |  |  |
| TOTAL for the Reporting  | j 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 |           |          | \$           | 16,838.00  |  |  |  |  |

#### **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 |          |     |            |  |  |
|---------------------------------------|------------------|----------|-----|------------|--|--|
| Campaign for Compassion Committee     | From:            | 1/1/2019 | То: | 12/31/2019 |  |  |
|                                       |                  | DATE     |     | AMOUNT     |  |  |

| Full Name of Contri         | full Name of Contributing Committee |       |    |                   |      | DAY | YEAR |   |
|-----------------------------|-------------------------------------|-------|----|-------------------|------|-----|------|---|
| Boilermakers Local Pac Fund |                                     |       | МО | DAT               | TEAK |     |      |   |
| Mailing Address             | 2300 New Falls R                    | ld    |    |                   | 12   | 3   | 2019 | ! |
| <b>City</b> Levittown       |                                     | State |    | Zip Code (Plus 4) |      |     | 2013 |   |
| l                           |                                     | PA    |    | 190563235         |      |     |      |   |

**PAGE TOTAL** 250.00

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

### 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 Candida       | te          |                  | Rep | oorting P | eriod |                 |            |            |
|---|-------------|------------------|-----|-----------|-------|-----------------|------------|------------|
| Campaign for Compassion Committe          | ee          |                  | Fro | m:        | 1/1/2 | 2019 <b>T</b> o | <b>)</b> : | 12/31/2019 |
|   |             |                  |     |           | DATE  |                 |            | AMOUNT     |
| Full Name of Contributor                  |             |                  |     | мо        | DAY   | YEAR            |            |            |
| Paul Beach                                |             |                  |     |           |       |                 |            |            |
| Mailing Address 527 Carpenter Ln          | 1           | ,                |     |           |       |                 | \$         | 12.00      |
| <b>City</b> Philadelphia                  | State       | Zip Code (Plus 4 | )   | 1         | 10    | 2019            |            |            |
|   | PA          | 191193402        |     |           |       |                 |            |            |
| Full Name of Contributor Paul Beach       |             |                  |     |           | DAY   | YEAR            |            |            |
| Mailing Address 527 Carpenter Ln          |             |                  |     |           |       |                 | \$         | 12.00      |
| City Philadelphia State Zip Code (Plus 4) |             |                  |     | 2         | 10    | 2019            | *          | 12.00      |
| Timadelpina                               | PA          | 191193402        | ,   |           |       |                 |            |            |
| Full Name of Contributor                  |             |                  |     |           |       |                 |            |            |
| Paul Beach                                |             |                  |     | МО        | DAY   | YEAR            |            |            |
| Mailing Address 527 Carpenter Ln          |             |                  |     |           |       |                 | \$         | 12.00      |
| City Philadelphia                         | State       | Zip Code (Plus 4 | )   | 3         | 10    | 2019            |            |            |
|   | PA          | 191193402        |     |           |       |                 |            |            |
| Full Name of Contributor Paul Beach       |             |                  |     | мо        | DAY   | YEAR            |            |            |
| Mailing Address 527 Carpenter Ln          |             |                  |     |           |       |                 | \$         | 12.00      |
| City Philadelphia                         | State       | Zip Code (Plus 4 | )   | 4         | 10    | 2019            |            | 12.00      |
|   | PA          | 191193402        | -   |           |       |                 |            |            |
| Full Name of Contributor Paul Beach       | •           |                  |     | мо        | DAY   | YEAR            |            |            |
| Mailing Address 527 Carpenter Ln          |             |                  |     |           |       |                 | \$         | 12.00      |
| <b>City</b> Philadelphia                  | State       | Zip Code (Plus 4 | )   | 5         | 10    | 2019            |            |            |
| ·   | PA          | 191193402        |     |           |       |                 |            |            |
| Full Name of Contributor                  | <del></del> |                  |     | МО        | DAY   | YEAR            |            |            |
| Paul Beach                                |             |                  |     | MO        | DAY   | TEAK            |            |            |
| Mailing Address 527 Carpenter Ln          |             |                  |     |           |       |                 | \$         | 12.00      |
| <b>City</b> Philadelphia                  | State       | Zip Code (Plus 4 | )   | 6         | 10    | 2019            |            |            |
|   | PA          | 191193402        |     |           |       |                 |            |            |

| Full Na            | me of Contributor        |                    |                                       | МО        | DAY | YEAR |                  |
|--------------------|--------------------------|--------------------|---------------------------------------|-----------|-----|------|------------------|
| Paul Be            | each                     |                    |                                       |           |     |      |                  |
| Mailing            | Address 527 Carpenter    | Ln                 |                                       |           |     |      | <b>\$</b> 12.00  |
| City               | Philadelphia             | State              | Zip Code (Plus 4)                     | 7         | 10  | 2019 |                  |
|                    |                          | PA                 | 191193402                             |           |     |      |                  |
| Full Na            | me of Contributor        |                    |                                       | МО        | DAY | YEAR |                  |
| Paul Be            | each                     |                    |                                       |           |     |      |                  |
| Mailing            | Address 527 Carpenter    | Ln                 |                                       | 4         |     |      | <b>\$</b> 12.00  |
| City               | Philadelphia             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191193402 | 8         | 10  | 2019 |                  |
| Full Na            | me of Contributor        | -                  |                                       | мо        | DAY | YEAR |                  |
| Paul Be            | each                     |                    |                                       | 140       | DAI | ILAK |                  |
| Mailing            | Address 527 Carpenter    | Ln                 |                                       |           |     |      | <b>\$</b> 12.00  |
| City               | Philadelphia             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191193402 | 9         | 10  | 2019 |                  |
| Full Na<br>Paul Be | me of Contributor        | -                  |                                       | мо        | DAY | YEAR |                  |
| Mailing            | Address 527 Carpenter    | Ln                 |                                       |           |     |      | <b>\$</b> 12.00  |
| City               | Philadelphia             | State              | Zip Code (Plus 4)                     | 10        | 10  | 2019 |                  |
|                    |                          | PA                 | 191193402                             |           |     |      |                  |
| Full Na            | me of Contributor        | -                  |                                       | мо        | DAY | YEAR |                  |
| Paul Beach         |                          |                    |                                       |           |     | ILAK |                  |
| Mailing            | Address 527 Carpenter    | Ln                 |                                       |           |     |      | <b>\$</b> 12.00  |
| City               | Philadelphia             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191193402 | 11        | 10  | 2019 |                  |
| Full Na            | me of Contributor        | •                  | ·                                     | мо        | DAY | YEAR |                  |
| Paul Be            | each                     |                    |                                       |           |     |      |                  |
| Mailing            | Address 527 Carpenter    | Ln                 |                                       |           |     |      | <b>\$</b> 12.00  |
| City               | Philadelphia             | State              | Zip Code (Plus 4)                     | 12        | 10  | 2019 |                  |
|                    |                          | PA                 | 191193402                             |           |     |      |                  |
| Full Na            | me of Contributor        |                    |                                       | мо        | DAY | YEAR |                  |
| David I            | Brooks                   |                    |                                       |           |     |      |                  |
| Mailing            | Address 101 N Easton F   | Rd Ste 101         |                                       | 4         |     |      | <b>\$</b> 250.00 |
| City               | Glenside                 | State              | Zip Code (Plus 4)                     | 10        | 18  | 2019 |                  |
|                    |                          | PA                 | 190384729                             |           |     |      |                  |
| Full Na            | me of Contributor        |                    |                                       | МО        | DAY | YEAR |                  |
| Rosalin            | nd Holtzman              |                    |                                       |           |     |      |                  |
| Mailing            | Address 539 Bethan Rd    |                    |                                       | _         |     |      | \$ 20.00         |
| City               | Elkins Park              | State              | Zip Code (Plus 4)                     | 1         | 20  | 2019 |                  |
|                    |                          | PA                 | 190271930                             |           |     |      |                  |
| Full Na            | Full Name of Contributor |                    |                                       |           | DAY | YEAR |                  |
| Rosalin            | Rosalind Holtzman        |                    |                                       |           |     | AN   |                  |
| Mailing            | Address 539 Bethan Rd    |                    |                                       |           |     |      | \$ 20.00         |
| City               | Elkins Park              | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190271930 | 2 20 2019 |     | 9    |                  |
|                    |                          |                    |                                       | <u> </u>  | ı   | ı    | 1                |

| Full Na        | ame of Contributor             |               |                   | МО | DAY     | YEAR |                  |
|----------------|--------------------------------|---------------|-------------------|----|---------|------|------------------|
| Rosali         | nd Holtzman                    |               |                   | МО | DAT     | ILAK |                  |
| Mailin         | <b>g Address</b> 539 Bethan Ro | d             |                   |    |         |      | \$ 20.00         |
| City           | Elkins Park                    | State         | Zip Code (Plus 4) | 3  | 20      | 2019 |                  |
|                |                                | PA            | 190271930         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | мо | DAY     | YEAR |                  |
| Rosali         | nd Holtzman                    |               |                   |    |         |      |                  |
| Mailin         | <b>g Address</b> 539 Bethan Ro | 1             |                   | _  |         |      | <b>\$</b> 35.00  |
| City           | Elkins Park                    | State         | Zip Code (Plus 4) | 10 | 21      | 2019 |                  |
|                |                                | PA            | 190271930         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | МО | DAY     | YEAR |                  |
| David          | L Hyman                        |               |                   |    |         |      |                  |
| Mailin         | g Address 413 W Merma          | id Ln         |                   | _  |         |      | <b>\$</b> 100.00 |
| City           | Philadelphia                   | State         | Zip Code (Plus 4) | 1  | 7       | 2019 |                  |
|                |                                | PA            | 191184203         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | МО | DAY     | YEAR |                  |
| Sandr          | a Jenkins                      |               |                   |    |         |      |                  |
| Mailin         | g Address 1903 Mather \        | Vay           |                   | 4  |         |      | <b>\$</b> 50.00  |
| City           | Elkins Park                    | State         | Zip Code (Plus 4) | 2  | 4       | 2019 |                  |
|                |                                | PA            | 190271022         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | МО | DAY     | YEAR |                  |
| Sandra Jenkins |                                |               |                   |    |         |      |                  |
| Mailin         | g Address 1903 Mather \        | Vay           |                   |    |         |      | \$ 20.00         |
| City           | Elkins Park                    | State         | Zip Code (Plus 4) | 3  | 6       | 2019 |                  |
|                |                                | PA            | 190271022         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | МО | DAY     | YEAR |                  |
| Tiffan         | y Kim                          |               |                   |    |         |      |                  |
| Mailin         | g Address 10 Druim Moir        | Ln            |                   |    |         |      | \$ 100.00        |
| City           | Philadelphia                   | State         | Zip Code (Plus 4) | 10 | 17      | 2019 |                  |
|                |                                | PA            | 191184134         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | мо | DAY     | YEAR |                  |
| Nancy          | ' Kleinberg                    |               |                   |    |         |      |                  |
| Mailin         | g Address 506 Conshoho         | cken State Rd |                   |    |         |      | \$ 50.00         |
| City           | Penn Valley                    | State         | Zip Code (Plus 4) | 10 | 12      | 2019 |                  |
|                |                                | PA            | 190721436         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | мо | DAY     | YEAR |                  |
| Nancy          | Kleinberg                      |               |                   | МО | DAT     | ILAK |                  |
| Mailin         | g Address 506 Conshoho         | cken State Rd |                   |    |         |      | <b>\$</b> 50.00  |
| City           | Penn Valley                    | State         | Zip Code (Plus 4) | 10 | 19      | 2019 |                  |
|                |                                | PA            | 190721436         |    |         |      |                  |
| Full Na        | ame of Contributor             |               |                   | мо | DAY     | VEAD |                  |
| Ahsan          | ahsan Nasratullah              |               |                   |    | DAY     | YEAR |                  |
| Mailin         | g Address 405 E Gowen          | Ave           |                   |    |         |      | <b>\$</b> 100.00 |
| City           | Philadelphia                   | State         | Zip Code (Plus 4) | 10 | 22      | 2019 |                  |
| ·              |                                | PA            | 191191025         |    | .0   22 |      |                  |
|                |                                |               | <del></del>       | -  | -       | -    |                  |

| Full Name of Cont  |  |                    |   |            |               |                     | FAGI      |        |
|--|--|--------------------|---|------------|---------------|---------------------|-----------|--------|
| 1  | ributor  |                    |   | МО         | DAY           | YEAR                |           |        |
| Hal & Sue R  | osenthal   |                    |   |            | 57.1          |                     |           |        |
| Mailing Address  | 1343 Ascot Pl  |                    |   | <u> </u>   |               |                     | \$        | 100.00 |
| <b>City</b> Philadelph   | ia   | State              | Zip Code (Plus 4)   | 10         | 12            | 2019                |           |        |
|  |  | PA                 | 191161501   |            |               |                     |           |        |
| Full Name of Cont  | ributor  |                    |   | МО         | DAY           | YEAR                |           |        |
| Hal n Sue Rosent   | nal  |                    |   |            |               |                     |           |        |
| Mailing Address  | 1343 Ascot Pl  |                    | _   | 1          |               |                     | \$        | 100.00 |
| <b>City</b> Philadelph   | ia   | State              | Zip Code (Plus 4)   | 4          | 15            | 2019                |           |        |
|  |  | PA                 | 191161501   |            |               |                     |           |        |
| Full Name of Cont  |  |                    |   | МО         | DAY           | YEAR                |           |        |
| Hal n Sue Rosent   | nal  |                    |   |            |               |                     |           |        |
| Mailing Address  | 1343 Ascot Pl  | T                  |   | 4          |               |                     | \$        | 50.00  |
| <b>City</b> Philadelph   | ia   | State              | Zip Code (Plus 4)   | 10         | 20            | 2019                |           |        |
|  |  | PA                 | 191161501   |            |               |                     |           |        |
| Full Name of Cont  | МО   | DAY                | YEAR  |            |               |                     |           |        |
| dina schlossberg   |  |                    |   |            |               |                     |           |        |
| Mailing Address  | 4331 Boone St  | T                  |   | 4          |               |                     | \$        | 54.00  |
| <b>City</b> Philadelph   | ia   | State              | Zip Code (Plus 4)   | 11         | 4             | 2019                |           |        |
|  |  | PA                 | 191284904   |            |               |                     |           |        |
| Full Name of Cont  | ributor  |                    |   | МО         | DAY           | YEAR                |           |        |
| Peter Schneider  |  |                    |   | 1-10       | DAI           | ILAK                |           |        |
| Mailing Address  | 501 Carpenter Ln   |                    |   |            |               |                     | <b>\$</b> | 100.00 |
| City Dhiledel  |  |                    |   |            |               |                     | i .       | 100.00 |
| <b>City</b> Philadelph   | ia   | State              | Zip Code (Plus 4)   | 12         | 31            | 2019                |           | 100.00 |
| Philadelph   | ia   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191193402                     | 12         | 31            | 2019                |           | 100.00 |
| Full Name of Cont  |  |                    |   |            |               |                     |           | 100.00 |
|  | ributor  |                    |   | 12<br>MO   | 31 DAY        | 2019<br>YEAR        |           |        |
| Full Name of Cont  | ributor  |                    |   |            |               |                     | \$        | 250.00 |
| Full Name of Cont<br>Bernice Schwartz  | ributor<br>1044 Claire Ave   |                    |   |            |               |                     |           |        |
| Full Name of Cont<br>Bernice Schwartz<br>Mailing Address   | ributor<br>1044 Claire Ave   | PA                 | 191193402   | МО         | DAY           | YEAR                |           |        |
| Full Name of Cont<br>Bernice Schwartz<br>Mailing Address   | ributor<br>1044 Claire Ave<br>on Valley  | PA State           | 191193402  Zip Code (Plus 4)                              | мо 4       | <b>DAY</b> 28 | <b>YEAR</b> 2019    |           |        |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  | ributor<br>1044 Claire Ave<br>on Valley  | PA State           | 191193402  Zip Code (Plus 4)                              | МО         | DAY           | YEAR                |           |        |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  | ributor<br>1044 Claire Ave<br>on Valley  | PA State           | 191193402  Zip Code (Plus 4)                              | мо 4       | <b>DAY</b> 28 | <b>YEAR</b> 2019    |           |        |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  Full Name of Cont Laura Siena   | 1044 Claire Ave on Valley ributor 626 W Upsal St   | PA State           | 191193402  Zip Code (Plus 4)                              | мо 4       | <b>DAY</b> 28 | <b>YEAR</b> 2019    | \$        | 250.00 |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  Full Name of Cont Laura Siena Mailing Address   | 1044 Claire Ave on Valley ributor 626 W Upsal St   | State<br>PA        | 191193402  Zip Code (Plus 4) 190068603                    | MO 4       | DAY 28        | YEAR 2019 YEAR      | \$        | 250.00 |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  Full Name of Cont Laura Siena Mailing Address   | ributor  1044 Claire Ave on Valley  ributor  626 W Upsal St ia                           | State PA  State    | 191193402  Zip Code (Plus 4) 190068603  Zip Code (Plus 4) | MO 4 MO 11 | DAY 28 DAY 18 | YEAR 2019 YEAR 2019 | \$        | 250.00 |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  Full Name of Cont Laura Siena Mailing Address City Philadelph                                   | ributor  1044 Claire Ave on Valley  ributor  626 W Upsal St ia                           | State PA  State    | 191193402  Zip Code (Plus 4) 190068603  Zip Code (Plus 4) | MO 4       | DAY 28        | YEAR 2019 YEAR      | \$        | 250.00 |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  Full Name of Cont Laura Siena Mailing Address City Philadelph  Full Name of Cont                | ributor  1044 Claire Ave on Valley  ributor  626 W Upsal St ia                           | State PA  State PA | 191193402  Zip Code (Plus 4) 190068603  Zip Code (Plus 4) | MO 4 MO 11 | DAY 28 DAY 18 | YEAR 2019 YEAR 2019 | \$        | 250.00 |
| Full Name of Cont Bernice Schwartz Mailing Address City Huntingdo  Full Name of Cont Laura Siena Mailing Address City Philadelph  Full Name of Cont William Wilson | ributor  1044 Claire Ave on Valley  ributor  626 W Upsal St ia  ributor  4747 S Broad St | State PA  State PA | 191193402  Zip Code (Plus 4) 190068603  Zip Code (Plus 4) | MO 4 MO 11 | DAY 28 DAY 18 | YEAR 2019 YEAR 2019 | \$        | 250.00 |

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

**PAGE TOTAL \$** 1,863.00

#### **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 Rep                             |  |                           |                          | Period |        |      |             |
|---|--|---------------------------|--------------------------|--------|--------|------|-------------|
| Campaign for Compassion Committee                                     |  |                           | From:                    | 1/     | 1/2019 | То:  | 12/31/2019  |
|   |  |                           |                          | DA     | TE     |      | AMOUNT      |
| Full Name of Contributing Committee  AFSCME Council 13                |  |                           |                          | МО     | DAY    | YEAR | \$ 500.00   |
| Mailing Address 4031 Executive Park                                   | Dr   |                           |                          | 6      | 12     | 2019 |             |
| <b>City</b> Harrisburg  | <b>State</b><br>PA                             | <b>Zip Code</b><br>171111 | <b>e (Plus 4)</b><br>507 |        |        |      |             |
| <b>Full Name of Contributing Committee</b> APSCUF                     |  |                           |                          | мо     | DAY    | YEAR | \$ 500.00   |
| Mailing Address 319 N Front St  | <u>,                                      </u> |                           |                          | 6      | 12     | 2019 |             |
| <b>City</b> Harrisburg  | <b>State</b><br>PA                             | <b>Zip Code</b><br>171011 | <b>e (Plus 4)</b><br>203 |        |        |      |             |
| Full Name of Contributing Committee  Aqua America, Inc. H20 PAC       |  |                           |                          |        | DAY    | YEAR | \$ 1,000.00 |
| Mailing Address 762 W Lancaster Ave                                   |  |                           |                          |        | 27     | 2019 | _,          |
| City Bryn Mawr  | <b>State</b><br>PA                             | <b>Zip Code</b> 190103    | <b>4</b> 02              | 6      |        |      |             |
| <b>Full Name of Contributing Committee</b> Aqua America, Inc. H20 PAC |  |                           |                          | мо     | DAY    | YEAR | \$ 500.00   |
| Mailing Address 762 W Lancaster Ave                                   |  |                           |                          | 12     | 3      | 2019 |             |
| <b>City</b> Bryn Mawr   | <b>State</b><br>PA                             | <b>Zip Code</b> 190103    | <b>e (Plus 4)</b><br>402 |        |        |      |             |
| Full Name of Contributing Committee Citizens for Hughes               |  |                           |                          | мо     | DAY    | YEAR | \$ 3,000.00 |
| Mailing Address 4950 Parkside Ave A                                   | pt 106   |                           |                          | 1      | 10     | 2019 |             |
| <b>City</b> Philadelphia  | <b>State</b><br>PA                             | <b>Zip Code</b><br>191314 | <b>Plus 4)</b>           |        |        |      |             |
| Full Name of Contributing Committee CUPAC                             |  |                           |                          | мо     | DAY    | YEAR | \$ 500.00   |
| Mailing Address 4309 N Front St                                       |  |                           |                          | 6      | 27     | 2019 | ]           |
| <b>City</b> Harrisburg  | <b>State</b><br>PA                             | <b>Zip Code</b> 171101    | e (Plus 4)<br>618        | _      |        |      |             |

|  |   |              |                   |      |      |      | PAGL     | 9        |
|--|---|--------------|-------------------|------|------|------|----------|----------|
| Full Name of Cont                        | ributing Committee                          |              |                   | МО   | DAY  | YEAR |          |          |
| Democracy Fund                           |   |              |                   | 1-10 |      | ILAN | <b> </b> | 1,500.00 |
| Mailing Address                          | 208 N 3rd St Ste 31                         | 0            |                   | 6    | 19   | 2019 | ]        | 2,000.00 |
| City Harrisburg                          | ]   | State        | Zip Code (Plus 4) |      | 19   | 2019 |          |          |
|  |   | PA           | 171011513         |      |      |      |          |          |
| Full Name of Cont                        | tributing Committee                         |              |                   | МО   | DAY  | YEAR |          |          |
| HIGHMARK PAC                             |   |              |                   | 140  | DAI  | ILAK | <b> </b> | 500.00   |
| Mailing Address                          | 1800 Center St                              |              |                   | 6    | 12   | 2019 | ]        |          |
| City Camp Hill                           |   | State        | Zip Code (Plus 4) | 1 "  | 12   | 2019 |          |          |
|  |   | PA           | 170111702         |      |      |      |          |          |
| Full Name of Cont                        | ributing Committee                          |              |                   | МО   | DAY  | YEAR |          |          |
| IBC PAC (Indepe                          | endent Blue Cross)                          |              |                   |      |      |      | <b> </b> | 500.00   |
| Mailing Address                          | 1901 Market St                              |              |                   | 12   | 3    | 2019 |          |          |
| <b>City</b> Philadelph                   | ia  | State        | Zip Code (Plus 4) | ]    |      |      |          |          |
|  |   | PA           | 191031480         |      |      |      |          |          |
| Full Name of Cont                        | ributing Committee                          |              |                   | МО   | DAY  | YEAR |          |          |
| LAWPAC                                   |   |              |                   |      |      |      | <b> </b> | 500.00   |
| Mailing Address                          | 800 N 3rd St Ste 20                         | 3            |                   | 12   | 3    | 2019 |          |          |
| City Harrisburg                          | ]   | State        | Zip Code (Plus 4) | ]    |      |      |          |          |
|  |   | PA           | 171022025         |      |      |      |          |          |
| Full Name of Cont                        | ributing Committee                          |              |                   | мо   | DAY  | YEAR |          |          |
| Merck Employees                          | Political Action Comm                       | nittee       |                   | МО   | DAT  | TEAR | <b> </b> | 500.00   |
| Mailing Address                          | 601 Pennsylvania Av                         | e NW Ste 120 |                   | 12   | 3    | 2019 | ]        | 300.00   |
| <b>City</b> Washingto                    | on  | State        | Zip Code (Plus 4) | 1 ** |      | 2013 |          |          |
|  |   | DC           | 200042601         |      |      |      |          |          |
| Full Name of Cont                        | ributing Committee                          | -            | -                 | МО   | DAY  | YEAR |          |          |
| PA Realtors Politi                       | cal Action Committee                        |              |                   | МО   | DAT  | TEAR | <b> </b> | 500.00   |
| Mailing Address                          | 500 N 12th St                               |              |                   | 6    | 12   | 2019 | ]        |          |
| City Lemoyne                             |   | State        | Zip Code (Plus 4) |      | 12   | 2019 |          |          |
|  |   | PA           | 170431241         |      |      |      |          |          |
| Full Name of Cont                        | ributing Committee                          |              |                   | МО   | DAY  | YEAR |          |          |
| PAA PAC (Pennsy                          | Ivania Automotive Ass                       | ociation)    |                   |      |      |      | <b> </b> | 1,000.00 |
| Mailing Address                          | 1925 N Front St                             |              |                   | 6    | 12   | 2019 |          |          |
| City Harrisburg                          | ]   | State        | Zip Code (Plus 4) |      |      |      |          |          |
|  |   | PA           | 171022214         |      |      |      |          |          |
| Full Name of Contributing Committee      |   |              |                   |      | DAY  | YEAR |          |          |
| Pennsylvania Ass                         | Pennsylvania Association of Retail Druggist |              |                   | МО   |      |      | <b> </b> | 500.00   |
| Mailing Address 2200 Michener St Ste 10  |   |              | 6                 | 19   | 2019 |      |          |          |
| City Philadelphia State Zip Code (Plus 4 |   |              |                   |      |      |      |          |          |
|  |   | PA           | 191154374         |      |      |      |          |          |
|  |   |              |                   |      |      |      |          |          |

| Full Name of Contributing Committee  | -           |                                    |                  |               |                  |           |          |
|--|-------------|------------------------------------|------------------|---------------|------------------|-----------|----------|
| Pennsylvania SEIU COPE   |             |                                    | МО               | DAY           | YEAR             | <b>\$</b> | 500.00   |
| Mailing Address 1500 N 2nd St Ste 1  | 1           |                                    | 12               | 3             | 2019             |           | 555.55   |
| City Harrisburg  | State       | Zip Code (Plus 4)                  | 12               |               | 2013             |           |          |
|  | PA          | 171022527                          |                  |               |                  |           |          |
| Full Name of Contributing Committee  | мо          | DAY                                | YEAR             |               |                  |           |          |
| Pennsylvania SEIU COPE   |             |                                    |                  | \$            | 500.00           |           |          |
| Mailing Address 1500 N 2nd St Ste 1  | 12          | 3                                  | 2019             |               |                  |           |          |
| City Harrisburg  | State       | Zip Code (Plus 4)                  | ]                |               |                  |           |          |
|  | PA          | 171022527                          |                  |               |                  |           |          |
|  |             |                                    |                  | 1             |                  |           |          |
| Full Name of Contributing Committee  |             |                                    | МО               | DAY           | YEAR             |           |          |
| Full Name of Contributing Committee PSEA PACE  |             |                                    | мо               | DAY           | YEAR             | \$        | 500.00   |
|  |             |                                    |                  |               |                  | \$        | 500.00   |
| PSEA PACE  | State       | Zip Code (Plus 4)                  | <b>MO</b><br>. 6 | <b>DAY</b> 12 | <b>YEAR</b> 2019 | \$        | 500.00   |
| PSEA PACE  Mailing Address 400 N 3rd St  | State<br>PA | <b>Zip Code (Plus 4)</b> 171011346 |                  |               |                  | \$        | 500.00   |
| PSEA PACE  Mailing Address 400 N 3rd St  |             | , , ,                              | . 6              | 12            | 2019             | \$        | 500.00   |
| PSEA PACE  Mailing Address 400 N 3rd St  City Harrisburg   |             | , , ,                              |                  |               |                  |           |          |
| PSEA PACE  Mailing Address 400 N 3rd St  City Harrisburg  Full Name of Contributing Committee                  | PA          | , , ,                              | 6<br><b>MO</b>   | 12            | 2019<br>YEAR     | \$        | 1,000.00 |
| PSEA PACE  Mailing Address 400 N 3rd St  City Harrisburg  Full Name of Contributing Committee  UFCW Local 1776 | PA          | , , ,                              | . 6              | 12            | 2019             |           |          |

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

**PAGE TOTAL \$** 14,000.00

### 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 Candidate                     | ne of Filing Committee of Candidate |     |            |         | Reporting Period |                   |                            |        |             |  |  |
|---|-------------------------------------|-----|------------|---------|------------------|-------------------|----------------------------|--------|-------------|--|--|
| Campaign for Compassion Committee                         |                                     |     |            | Fror    | n:               | 1/1/2             | <u>1/1/2019</u> <b>To:</b> |        | 12/31/2019  |  |  |
|   |                                     |     |            |         | D                | ATE               |                            |        | AMOUNT      |  |  |
| Full Name of Contributor                                  |                                     |     |            |         | мо               | DAY               | YEAR                       | \$     | 250.00      |  |  |
| Dwight Lewis  |                                     |     |            |         |                  | 2711              | 1                          | ] *    | 250.00      |  |  |
| Mailing Address 1608 E Willow Grov                        | e Ave                               |     |            |         | 10               | 20                | 2019                       |        |             |  |  |
| City Laverock   | State                               | Zip | Code (Plus | 4)      |                  |                   |                            |        |             |  |  |
|   | PA 190387250                        |     |            |         |                  |                   |                            |        |             |  |  |
| Employer Name Senate of Pennsylvania                      |                                     |     |            | Occupat | ion              | Chief of          | Staff                      |        |             |  |  |
| Employer Mailing Address/Principal Place of Business City |                                     |     | State      |         |                  | Zip Code (Plus 4) |                            |        |             |  |  |
|   |                                     |     |            |         |                  |                   |                            |        |             |  |  |
| Full Name of Contributor                                  |                                     |     |            |         |                  |                   |                            |        |             |  |  |
| <br>  Dwight Lewis  |                                     |     |            |         | МО               | DAY               | YEAR                       | \$     | 250.00      |  |  |
| Mailing Address 1608 E Willow Grov                        | e Ave                               |     |            |         | 10               | 22                | 2019                       |        |             |  |  |
| City Laverock   | State                               | Zip | Code (Plus | 4)      | 1 10             | 22                | 2019                       |        |             |  |  |
|   | PA                                  | 19  | 0387250    |         | 1                |                   |                            |        |             |  |  |
| Employer Name Senate of Pennsylvani                       | a                                   |     |            |         | Occupat          | ion               | Chief of                   | Staff  |             |  |  |
| Employer Mailing Address/Principal Plac                   | e of Business                       |     | City       |         |                  | State             |                            | Zip Co | de (Plus 4) |  |  |
|   |                                     |     |            |         |                  |                   |                            |        |             |  |  |
|   |                                     |     |            |         |                  | •                 |                            |        | PAGE TOTAL  |  |  |
| <b>Enter Grand Total of Part C on Sche</b>                | dule I, Detailed S                  | umm | nary Page, | Section | on 3.            |                   |                            |        | I AGE TOTAL |  |  |
|   |                                     |     |            |         |                  |                   | \$                         | •      | 500.00      |  |  |
|   |                                     |     |            |         |                  |                   |                            |        |             |  |  |

## 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 Candidate              |                | Report  | ing Peri | od  |      |            |
|---------------------------|---------------------------|----------------|---------|----------|-----|------|------------|
|                           |                           |                | From:   |          |     | To:  |            |
|                           |                           |                |         | D        | ATE |      | AMOUNT     |
| Full Name                 |                           |                |         | мо       | DAY | YEAR | \$<br>0.00 |
| Mailing Address           |                           |                |         |          |     |      |            |
| City                      | State                     | Zip Code (I    | Plus 4) |          |     |      |            |
| Receipt Description       | •                         | •              |         |          | •   |      |            |
| Futor Count Total of Doub | For Cabadula I Batailad   | Commence Dance | Castian | 4        |     |      | PAGE TOTAL |
| Enter Grand Total of Part | e on Schedule 1, Detailed | Summary Page,  | Section | 4.       |     |      | \$<br>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 |                            |            |
|--|------------------|----------------------------|------------|
| Campaign for Compassion Committee  | From:            | <u>1/1/2019</u> <b>To:</b> | 12/31/2019 |
| 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, 1 |                  | \$                         | 0.00       |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

|                               |                      |                        |         | Reporting Period |      |             |            |      |  |
|-------------------------------|----------------------|------------------------|---------|------------------|------|-------------|------------|------|--|
|                               | From: To:            |                        |         |                  |      |             |            |      |  |
|                               |                      |                        |         | 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:  | •                    |                        | •       | •                |      | •           |            |      |  |
|                               |                      |                        |         |                  | -    |             |            |      |  |
| Enter Grand Total of Part F o | n Schedule II, In-Ki | nd Contributions Detai | led Sun | mary Pa          | ge,  |             | PAGE TOTAL | •    |  |
| Section 2.                    |                      |                        |         |                  |      | \$          | (          | 0.00 |  |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate   |                  |      |                  | Re     | portin | ng Pe  | riod        |       |     |               |          |
|---|------------------|------|------------------|--------|--------|--------|-------------|-------|-----|---------------|----------|
|   |                  |      |                  | Fro    | m:     |        |             | To:   |     |               |          |
|   |                  |      |                  |        |        |        | DATE        |       |     | АМО           | UNT      |
| Full Name of Contributor                |                  |      |                  |        | мо     |        | DAY         | YEAR  |     |               |          |
| Mailing Address                         |                  |      |                  |        |        |        |             |       |     | \$            | 0.00     |
| City                                    | State            |      | Zip Code(Plus 4) |        |        |        |             |       |     |               |          |
| Employer of Contributor                 |                  |      |                  |        | Оссі   | upati  | ion         |       |     |               |          |
| Employer Mailing Address/Principal Plac | e of Business    | Cit  | ty               | Stat   | e Z    | Zip Co | ode(Plus 4) | Descr | ipt | tion of Contr | ribution |
| Enter Grand Total of Part G on Sch      | edule II, In-Kir | nd ( | Contributions D  | etaile | ed     |        | -           |       |     | PAG           | E TOTAL  |
| Summary Page, Section 3.                | ,                |      |                  |        |        |        |             |       |     |               | 0.00     |

#### **SCHEDULE III STATEMENT OF EXPENDITURES**

| Name of Filing Committee or Cand  | Name of Filing Committee or Candidate |  |                   | Reporting Period                     |             |          |        |        |  |  |
|-----------------------------------|---------------------------------------|--|-------------------|--------------------------------------|-------------|----------|--------|--------|--|--|
| Campaign for Compassion Committee |                                       |  |                   | From <u>1/1/2019</u> To: <u>12/3</u> |             |          |        |        |  |  |
|                                   |                                       |  | •                 |                                      | DATE        |          |        | AMOUNT |  |  |
| To Whom Paid                      |                                       |  |                   | мо                                   | DAY         | YEAR     |        |        |  |  |
| Abington Police Department        |                                       |  |                   |                                      |             |          |        |        |  |  |
| Mailing Address                   |                                       |  |                   | 7                                    | 9           | 2019     | \$     | 250.00 |  |  |
| City                              | State                                 |  | Zip Code (Plus 4) | Description of Expenditure           |             |          |        |        |  |  |
|                                   |                                       |  |                   | Abingto                              | n National  | Night Ou | it     |        |  |  |
| To Whom Paid                      |                                       |  |                   | мо                                   | DAY         | YEAR     |        |        |  |  |
| Abington Rockledge Democrats      |                                       |  |                   | MO                                   |             | ILAK     |        |        |  |  |
| Mailing Address                   |                                       |  | 4                 | 15                                   | 2019        | \$       | 500.00 |        |  |  |
| City State Zip Code (Plus 4)      |                                       |  |                   | Descrip                              | tion of Exp | enditure |        |        |  |  |

|  |                  |                   | Abiligio | ii ivationai | Night Ou  |          |        |
|--|------------------|-------------------|----------|--------------|-----------|----------|--------|
| <b>To Whom Paid</b> Abington Rockledge Democrats | ,                |                   | МО       | DAY          | YEAR      |          |        |
| Mailing Address                                  | •                |                   | 1        | 1.5          | 2010      | \$       | 500.00 |
| mailing Address                                  |                  |                   | 4        | 15           | 2019      | <u> </u> | 300.00 |
| City   | State            | Zip Code (Plus 4) | Descrip  | tion of Exp  | enditure  |          |        |
|  |                  |                   | Abingto  | n Dems       |           |          |        |
| To Whom Paid                                     |                  |                   | МО       | DAY          | YEAR      |          |        |
| Amazon   |                  |                   | 1-10     |              | 12711     |          |        |
| Mailing Address                                  |                  |                   | 7        | 11           | 2019      | \$       | 62.88  |
| City   | State            | Zip Code (Plus 4) | Descrip  | tion of Exp  | enditure  |          |        |
|  |                  |                   | Office s | upplies      |           |          |        |
| To Whom Paid                                     |                  |                   | МО       | DAY          | YEAR      |          |        |
| Black Democratic Women of Mo                     | ontgomery County |                   | 1-10     |              | 12711     |          |        |
| Mailing Address PO Box 115                       | 3                |                   | 10       | 29           | 2019      | \$       | 250.00 |
| <b>City</b> Roslyn                               | State            | Zip Code (Plus 4) | Descrip  | tion of Exp  | enditure  |          |        |
|  | PA               | 190019153         | Breakfa  | st sponsor   | ship      |          |        |
| To Whom Paid                                     |                  |                   |          |              |           |          |        |
| Canaan Baptist Church                            |                  |                   | МО       | DAY          | YEAR      |          |        |
| Mailing Address 5430 Pulask                      | ki Ave           |                   | 12       | 2            | 2019      | \$       | 300.00 |
| <b>City</b> Philadelphia                         | State            | Zip Code (Plus 4) | Descrip  | tion of Exp  | enditure  |          |        |
|  | PA               | 191443926         | Sponsor  | rship of gu  | n buy bad | ck event |        |
| To Whom Paid                                     |                  |                   | МС       | DAY          | VEAD      |          |        |
| Cheltenham NAACP                                 |                  |                   | МО       | DAT          | YEAR      |          |        |
| Mailing Address                                  |                  |                   | 7        | 11           | 2019      | \$       | 590.00 |
|  | I                |                   |          |              |           |          |        |

| To Whom Paid     |       |                   | мо       | DAY        | YEAR     |              |
|------------------|-------|-------------------|----------|------------|----------|--------------|
| Cheltenham NAACP |       |                   | 110      | JA.        | ILAK     |              |
| Mailing Address  |       |                   | 7        | 11         | 2019     | \$<br>590.00 |
| City             | State | Zip Code (Plus 4) | Descript | ion of Exp | enditure |              |
|                  |       |                   | Annual I | Dinner Bar | auet     |              |

|                                      |                             |                   |          |             |           | 1 / (0)                      | - 1/   |
|--------------------------------------|-----------------------------|-------------------|----------|-------------|-----------|------------------------------|--------|
| To Whom Paid                         |                             |                   | мо       | DAY         | YEAR      |                              |        |
| David P richardson Foundation        |                             |                   |          |             |           |                              |        |
| Mailing Address                      |                             |                   | 8        | 23          | 2019      | \$                           | 500.00 |
| City                                 | State                       | Zip Code (Plus 4) | Descript | tion of Exp | enditure  |                              |        |
|                                      |                             |                   | Annual   | Fundraiser  | /Celebrat | ion                          |        |
| To Whom Paid                         |                             |                   | мо       | DAY         | YEAR      |                              |        |
| Democratic Party of Cheltenham Towns | ship                        |                   |          |             |           |                              |        |
| Mailing Address 300 Maple Ave        |                             |                   | 4        | 15          | 2019      | \$                           | 800.00 |
| <b>City</b> Wyncote                  | State                       | Zip Code (Plus 4) | Descript | tion of Exp | enditure  |                              |        |
|                                      | PA                          | 190951523         |          |             |           | crats' Buffet<br>Table of 10 | &      |
| To Whom Paid                         |                             |                   |          |             |           |                              |        |
| Ducky Birts foundation               |                             |                   | МО       | DAY         | YEAR      |                              |        |
| Mailing Address 8200 Gilbert St      |                             |                   | 4        | 29          | 2019      | \$                           | 150.00 |
| <b>City</b> Philadelphia             | State                       | Zip Code (Plus 4) | Descript | tion of Exp | enditure  |                              |        |
|                                      | PA                          | 191502803         | Banques  | st          |           |                              |        |
| To Whom Paid                         |                             |                   | МО       | DAY         | YEAR      |                              |        |
| Dwight Evans for Congress            |                             |                   |          |             |           |                              |        |
| Mailing Address                      |                             |                   | 3        | 26          | 2019      | \$                           | 250.00 |
| City                                 | State Zip Code (Plus 4)     |                   |          |             | enditure  |                              |        |
|                                      |                             |                   | Donatio  | n           |           |                              |        |
| To Whom Paid                         |                             |                   | мо       | DAY         | YEAR      |                              |        |
| Eastern Montgomery County Chamber    | of Commerce                 |                   |          |             |           |                              |        |
| Mailing Address 550 Pinetown Rd St   | e 236                       |                   | 10       | 15          | 2019      | \$                           | 30.00  |
| <b>City</b> Fort Washington          | State                       | Zip Code (Plus 4) | Descript | tion of Exp | enditure  |                              |        |
|                                      | PA                          | 190342607         | Event ti | cket purch  | ase       |                              |        |
| To Whom Paid                         |                             |                   | мо       | DAY         | YEAR      |                              |        |
| Eventbrite                           |                             |                   |          |             |           |                              |        |
| Mailing Address                      |                             |                   | 1        | 11          | 2019      | \$                           | 300.00 |
| City                                 | State                       | Zip Code (Plus 4) | Descript | tion of Exp | enditure  |                              |        |
|                                      |                             |                   | Event ti | cket        |           |                              |        |
| To Whom Paid                         |                             |                   | мо       | DAY         | YEAR      |                              |        |
| Friends of Jason Salus               |                             |                   |          |             |           |                              |        |
| Mailing Address PO Box 1214          |                             |                   | 10       | 7           | 2019      | \$                           | 250.00 |
| <b>City</b> Norristown               | State                       | Zip Code (Plus 4) | Descript | tion of Exp | enditure  |                              |        |
|                                      | PA                          | 194041214         | Donatio  | n<br>•      |           |                              |        |
| To Whom Paid                         |                             |                   | мо       | DAY         | YEAR      |                              |        |
| Friends of Val Arkoosh               |                             |                   | 4        |             |           | _                            | F00.00 |
| Mailing Address PO Box 1177          | Mailing Address PO Box 1177 |                   |          | 16          | 2019      | \$                           | 500.00 |
| <b>City</b> Norristown               | State                       | Zip Code (Plus 4) | Descript | tion of Exp | enditure  |                              |        |
|                                      | PA                          | 194041177         |          |             |           |                              |        |

|   |   |                   |                               |                         |           |            | - 10       |
|---|---|-------------------|-------------------------------|-------------------------|-----------|------------|------------|
| To Whom Paid                                  |   |                   | МО                            | DAY                     | YEAR      |            |            |
| GODADDY.com                                   |   |                   | МО                            | DAY                     | YEAK      |            |            |
| Mailing Address                               |   |                   | 10                            | 30                      | 2019      | \$         | 179.94     |
| City  | State                                     | Zip Code (Plus 4) | Descrip                       | tion of Exp             | enditure  |            |            |
|   |   |                   |                               | l purchase<br>sraznovde |           |            |            |
| To Whom Paid                                  |   |                   | МО                            | DAY                     | YEAR      |            |            |
| GODADDY.com                                   |   |                   | М                             |                         | ILAK      |            |            |
| Mailing Address                               |   |                   | 11                            | 8                       | 2019      | \$         | 82.43      |
| City  | State                                     | Zip Code (Plus 4) | Descrip                       | tion of Exp             | enditure  |            |            |
| To Whom Paid                                  |   |                   | МО                            | DAY                     | YEAR      |            |            |
| Arthur Haywood                                |   |                   | 110                           |                         | 1 Z/IIX   |            |            |
| Mailing Address 443 Rices Mill Rd Ric         | ces Mill Rd                               |                   | 1                             | 7                       | 2019      | \$         | 3,000.00   |
| City Wyncote                                  | State                                     | Zip Code (Plus 4) | Descrip                       | tion of Exp             | enditure  |            |            |
|   | PA  | 19095             | Partial F                     | Repayment               | of Loan   | from 201   | 4 Campaign |
| To Whom Paid                                  |   |                   | МО                            | DAY                     | YEAR      |            |            |
| Arthur Haywood                                |   |                   | МО                            | DAT                     | TEAR      |            |            |
| Mailing Address 443 Rices Mill Rd Ric         | ces Mill Rd                               |                   | 7                             | 26                      | 2019      | \$         | 5,000.00   |
| City Wyncote                                  | State                                     | Zip Code (Plus 4) | 4) Description of Expenditure |                         |           |            |            |
|   | PA  | 19095             | Repaym                        | ent of Car              | npaign lo | an         |            |
| To Whom Paid                                  |   |                   | мо                            | DAY                     | YEAR      |            |            |
| JP Tees                                       |   |                   | 110                           |                         | i Zaux    |            |            |
| Mailing Address                               |   |                   | 8                             | 7                       | 2019      | \$         | 186.00     |
| City  | State                                     | Zip Code (Plus 4) | Descrip                       | tion of Exp             | enditure  |            |            |
|   |   |                   | Haywoo                        | d T-Shirts              |           |            |            |
| To Whom Paid                                  |   |                   | мо                            | DAY                     | YEAR      |            |            |
| Tiffany Kim  Mailing Address 10 Druim Moir Ln |   |                   | 11                            | 4                       | 2019      | \$         | 350.00     |
|   | Γ   | ī                 |                               |                         |           | т          |            |
| <b>City</b> Philadelphia                      | State                                     | Zip Code (Plus 4) |                               | tion of Exp             |           |            |            |
| <u> </u>                                      | PA  | 191184134         | Reimbu                        | rsement fo              | r campai  | gn event   | supplies   |
| <b>To Whom Paid</b> Tiffany Kim               |   |                   | МО                            | DAY                     | YEAR      |            |            |
| Mailing Address 10 Druim Moir Ln              |   |                   | 11                            | 7                       | 2019      | \$         | 277.75     |
| <b>City</b> Philadelphia                      | State                                     | Zip Code (Plus 4) | Descrip                       | tion of Exp             | enditure  |            |            |
|   | PA  | 191184134         | Reimbu                        | rsement fo              | r campai  | gn event   | supplies   |
| To Whom Paid                                  |   |                   | МО                            | DAY                     | YEAR      |            |            |
| Nancy Kleinberg                               |   | 1-10              |                               | ILAK                    |           |            |            |
| Mailing Address 506 Conshohocken              | Mailing Address 506 Conshohocken State Rd |                   |                               | 29                      | 2019      | \$         | 250.00     |
| City Penn Valley                              | State                                     | Zip Code (Plus 4) | Descrip                       | tion of Exp             | enditure  |            |            |
|   | PA  | 190721436         | Montco                        | and Delco               | Stand to  | gether - ( | Co-Host    |
|   |   |                   |                               |                         |           |            |            |

| To Whom Paid                           |                              |                   | МО                            | DAY              | YEAR          |           |           |
|--|------------------------------|-------------------|-------------------------------|------------------|---------------|-----------|-----------|
| Donna Lewis                            |                              |                   |                               |                  |               |           |           |
| Mailing Address                        |                              |                   | 3                             | 1                | 2019          | \$        | 77.00     |
| City                                   | State                        | Zip Code (Plus 4) | Descript                      | tion of Exp      | enditure      |           |           |
|  |                              |                   | PO Box                        | reimburse        | ment - 9/     | /1/2018-2 | 2/28/2019 |
| To Whom Paid                           |                              |                   | мо                            | DAY              | YEAR          |           |           |
| Donna Lewis                            |                              |                   | MO                            |                  | ILAK          |           |           |
| Mailing Address                        |                              |                   | 3                             | 1                | 2019          | \$        | 77.00     |
| City                                   | State                        | Zip Code (Plus 4) | Descript                      | tion of Exp      | enditure      |           |           |
|  |                              |                   | PO Box                        | reimburse        | ment - 3/     | /1-8/31/2 | 019       |
| To Whom Paid                           |                              | <u> </u>          | М0                            | DAY              | VEAD          |           |           |
| MONTCO AFL-CIO                         |                              |                   | МО                            | DAY              | YEAR          |           |           |
| Mailing Address                        |                              |                   | 10                            | 7                | 2019          | \$        | 250.00    |
| City                                   | State                        | Zip Code (Plus 4) | Descript                      | l<br>tion of Exp | enditure      |           |           |
|  |                              |                   | 41st An                       | nual COPE        | Event - 1     | 10/2019   |           |
| To Whom Paid                           | <u> </u>                     |                   |                               | l <sub>DAV</sub> | VEAD          |           |           |
| Montgomery County Democratic Committee |                              |                   | МО                            | DAY              | YEAR          |           |           |
| Mailing Address                        |                              |                   | 4                             | 16               | 2019          | \$        | 500.00    |
| City                                   | City State Zip Code (Plus 4) |                   |                               | l<br>tion of Exp | L<br>enditure |           |           |
|  |                              |                   |                               | ·                |               |           |           |
| To Whom Paid                           | <u> </u>                     |                   |                               | DAY              | VEAD          |           |           |
| Montgomery County Democratic Comm      | nittee                       |                   | МО                            | DAY              | YEAR          |           |           |
| Mailing Address                        |                              |                   | 10                            | 21               | 2019          | \$        | 1,000.00  |
| City                                   | State                        | Zip Code (Plus 4) | Descript                      | tion of Exp      | enditure      |           |           |
|  |                              |                   | Montco                        | Victory - 6      | 510-272-2     | 2000      |           |
| To Whom Paid                           |                              | <del></del>       | М0                            | DAY              | VEAD          |           |           |
| Mt Airy COGIC                          |                              |                   | МО                            | DAY              | YEAR          |           |           |
| Mailing Address 6401 Ogontz Ave        |                              |                   | 11                            | 25               | 2019          | \$        | 600.00    |
| <b>City</b> Philadelphia               | State                        | Zip Code (Plus 4) | Descript                      | tion of Exp      | enditure      |           |           |
| ·                                      | PA                           | 191263406         | Golf tou                      | rnament s        | ponsorsh      | ip        |           |
| To Whom Paid                           |                              |                   | MO                            | DAY              | YEAR          |           |           |
| NGPVAN                                 |                              |                   | МО                            | DAT              | TEAK          |           |           |
| Mailing Address                        |                              |                   | 1                             | 3                | 2019          | \$        | 250.00    |
| City                                   | State                        | Zip Code (Plus 4) | Descript                      | tion of Exp      | enditure      | <u> </u>  |           |
|  |                              |                   |                               |                  |               |           |           |
| To Whom Paid                           |                              |                   | MO                            | DAY              | VEAR          |           |           |
| NGPVAN                                 |                              |                   | МО                            | DAY              | YEAR          |           |           |
| Mailing Address                        |                              |                   | 2                             | 4                | 2019          | \$        | 250.00    |
| City                                   | State                        | Zip Code (Plus 4) | 4) Description of Expenditure |                  |               |           |           |
| -                                      |                              |                   | Monthly                       | auto dedu        |               | online NO | GP        |
|  | 1                            | 1                 | contribu                      |                  |               |           |           |

|                 |                 |                   |                     |                          |            | PAGL               | 20     |
|-----------------|-----------------|-------------------|---------------------|--------------------------|------------|--------------------|--------|
| To Whom Paid    |                 |                   | мо                  | DAY                      | YEAR       |                    |        |
| NGPVAN          |                 |                   |                     |                          |            |                    |        |
| Mailing Address |                 |                   | 3                   | 4                        | 2019       | \$                 | 250.00 |
| City            | State           | Zip Code (Plus 4) | Descript            | tion of Exp              | enditure   |                    |        |
|                 |                 |                   | Monthly<br>contribu |                          | uction for | online NGP         |        |
| To Whom Paid    |                 |                   | мо                  | DAY                      | YEAR       |                    |        |
| NGPVAN          |                 |                   | 140                 |                          | ILAK       |                    |        |
| Mailing Address |                 |                   | 4                   | 2                        | 2019       | \$                 | 250.00 |
| City            | State           | Zip Code (Plus 4) | Descript            | tion of Exp              | enditure   |                    |        |
|                 | <u> </u>        |                   | Monthly<br>contribu |                          | uction for | online NGP         |        |
| To Whom Paid    |                 |                   | мо                  | DAY                      | YEAR       |                    |        |
| NGPVAN          |                 |                   |                     |                          |            |                    |        |
| Mailing Address |                 |                   | 4                   | 15                       | 2019       | \$                 | 250.00 |
| City            | State           | Zip Code (Plus 4) | Descript            | tion of Exp              | enditure   |                    |        |
|                 |                 |                   |                     | auto dedu<br>itions (May |            | online NGP<br>ent) |        |
| To Whom Paid    |                 |                   | МО                  | DAY                      | YEAR       |                    |        |
| NGPVAN          |                 |                   | 140                 |                          | ILAK       |                    |        |
| Mailing Address |                 |                   | 6                   | 3                        | 2019       | \$                 | 250.00 |
| City            | State           | Zip Code (Plus 4) | Descript            | tion of Exp              | enditure   |                    |        |
|                 |                 |                   | Monthly<br>contribu |                          | uction for | online NGP         |        |
| To Whom Paid    |                 |                   | МО                  | DAY                      | YEAR       |                    |        |
| NGPVAN          |                 |                   | 140                 |                          | ILAK       |                    |        |
| Mailing Address |                 |                   | 7                   | 2                        | 2019       | \$                 | 250.00 |
| City            | State           | Zip Code (Plus 4) | Descript            | tion of Exp              | enditure   |                    |        |
|                 |                 |                   | Monthly<br>contribu |                          | uction for | online NGP         |        |
| To Whom Paid    |                 |                   | мо                  | DAY                      | YEAR       |                    |        |
| NGPVAN          |                 |                   | 140                 |                          | ILAK       |                    |        |
| Mailing Address |                 |                   | 8                   | 2                        | 2019       | \$                 | 250.00 |
| City            | State           | Zip Code (Plus 4) | Descript            | tion of Exp              | enditure   | •                  |        |
|                 |                 |                   | Monthly<br>contribu |                          | uction for | online NGP         |        |
| To Whom Paid    |                 |                   | МО                  | DAY                      | YEAR       |                    |        |
| NGPVAN          |                 |                   | MO                  | DA I                     | ILAK       |                    |        |
| Mailing Address | Mailing Address |                   | 9                   | 3                        | 2019       | \$                 | 250.00 |
| City            | State           | Zip Code (Plus 4) | Descript            | tion of Exp              | enditure   |                    |        |
|                 |                 |                   |                     |                          | uction for | online NGP         |        |
|                 | <u> </u>        | <u> </u>          | contribu            | itions                   |            |                    |        |

| To Whom Paid                                   |                 |                   |                               |             | \          |               |        |  |  |
|--|-----------------|-------------------|-------------------------------|-------------|------------|---------------|--------|--|--|
| NGPVAN   |                 |                   | МО                            | DAY         | YEAR       |               |        |  |  |
| Mailing Address                                |                 |                   | 10                            | 2           | 2019       | \$            | 250.00 |  |  |
| City   | State           | Zip Code (Plus 4) | Descript                      | tion of Exp | enditure   |               |        |  |  |
|  |                 |                   | Monthly<br>contribu           |             | uction for | online NGP    |        |  |  |
| To Whom Paid                                   |                 |                   | мо                            | DAY         | YEAR       |               |        |  |  |
| NGPVAN   |                 |                   |                               |             |            |               |        |  |  |
| Mailing Address                                |                 |                   | 11 5 2019 \$ 250.0            |             |            |               |        |  |  |
| City   | State           | Zip Code (Plus 4) | Descript                      | tion of Exp | enditure   |               |        |  |  |
|  |                 |                   | Monthly<br>contribu           |             | uction for | online NGP    |        |  |  |
| To Whom Paid                                   |                 |                   | МО                            | DAY         | YEAR       |               |        |  |  |
| NGPVAN   |                 |                   | МО                            |             | ILAK       |               |        |  |  |
| Mailing Address                                |                 |                   | 12                            | 2           | 2019       | \$            | 250.00 |  |  |
| City   | State           | Zip Code (Plus 4) | Descript                      | tion of Exp | enditure   |               |        |  |  |
|  |                 |                   | Monthly<br>contribu           |             | uction for | online NGP    |        |  |  |
| To Whom Paid                                   |                 |                   | МО                            | DAY         | YEAR       |               |        |  |  |
| PA Senate Democratic Campaign Comr             | nittee          |                   | МО                            | DAT         | TEAR       |               |        |  |  |
| Mailing Address 123 S Broad St Ste             | 1920            |                   | 3                             | 12          | 2019       | \$            | 500.00 |  |  |
| <b>City</b> Philadelphia                       | State           | Zip Code (Plus 4) | 4) Description of Expenditure |             |            |               |        |  |  |
|  | PA              | 191091025         | Donatio                       |             |            |               |        |  |  |
| To Whom Paid                                   | •               |                   |                               |             |            |               |        |  |  |
| <br>  Philadelphia Interfaith Hospitality Netw | ork             |                   | МО                            | DAY         | YEAR       |               |        |  |  |
| Mailing Address 7047 Germantown                | Ave             |                   | 10                            | 22          | 2019       | \$            | 140.00 |  |  |
| <b>City</b> Philadelphia                       | State           | Zip Code (Plus 4) | Descript                      | tion of Exp | enditure   |               |        |  |  |
|  | PA              | 191191865         | donatio                       | n for 5K w  | alk/run fu | ındraiser     |        |  |  |
| To Whom Paid                                   |                 |                   | мо                            | DAY         | YEAR       |               |        |  |  |
| Regular Fellows Foundation                     |                 |                   |                               |             |            |               |        |  |  |
| Mailing Address                                |                 |                   | 3                             | 11          | 2019       | \$            | 300.00 |  |  |
| City   | State           | Zip Code (Plus 4) | Descript                      | tion of Exp | enditure   |               |        |  |  |
|  |                 |                   | Donatio                       | n to suppo  | rt the Re  | port Card Eve | ent    |  |  |
| To Whom Paid                                   |                 |                   | МО                            | DAY         | YEAR       |               |        |  |  |
| Santander Bank Fees                            |                 |                   |                               |             |            |               |        |  |  |
| Mailing Address                                |                 |                   | 1                             | 3           | 2019       | \$            | 5.36   |  |  |
| City   | State           | Zip Code (Plus 4) | Descript                      | tion of Exp | enditure   |               |        |  |  |
| To Whom Paid                                   |                 |                   |                               | DAY         | VEAS       |               |        |  |  |
| Santander Bank Fees                            |                 |                   | МО                            | DAY         | YEAR       |               |        |  |  |
| Mailing Address                                | Mailing Address |                   |                               | 4           | 2019       | \$            | 9.94   |  |  |
| City   | State           | Zip Code (Plus 4) | Descript                      | tion of Exp | enditure   |               |        |  |  |
|  |                 |                   | Bank Ca                       | rd Mercha   | nt Fees    |               |        |  |  |

|                              |                              |                   |                            |                             |      |    | GL ZZ |  |  |
|------------------------------|------------------------------|-------------------|----------------------------|-----------------------------|------|----|-------|--|--|
| To Whom Paid                 |                              |                   |                            | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   | МО                         |                             |      |    |       |  |  |
| Mailing Address              |                              |                   | 3                          | 4                           | 2019 | \$ | 5.88  |  |  |
| City                         | City State Zip Code (Plus 4) |                   |                            | Description of Expenditure  |      |    |       |  |  |
|                              |                              |                   | Bank Card Merchant Fees    |                             |      |    |       |  |  |
| To Whom Paid                 |                              |                   | мо                         | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   | МО                         |                             | ILAK |    |       |  |  |
| Mailing Address              |                              |                   | 4                          | 1                           | 2019 | \$ | 5.24  |  |  |
| City                         | State                        | Zip Code (Plus 4) | Description of Expenditure |                             |      |    |       |  |  |
|                              |                              |                   | Bank Card Merchant Fees    |                             |      |    |       |  |  |
| To Whom Paid                 |                              |                   | мо                         | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   | МО                         |                             | ILAK |    |       |  |  |
| Mailing Address              |                              |                   | 5                          | 2                           | 2019 | \$ | 22.34 |  |  |
| City                         | State                        | Zip Code (Plus 4) | Description of Expenditure |                             |      |    |       |  |  |
|                              |                              |                   | Bank Card Merchant Fees    |                             |      |    |       |  |  |
| To Whom Paid                 |                              |                   | МО                         | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   | МО                         | DAI                         | ILAK |    |       |  |  |
| Mailing Address              |                              |                   | 6                          | 3                           | 2019 | \$ | 3.92  |  |  |
| City State Zip Code (Plus 4) |                              |                   | Description of Expenditure |                             |      |    |       |  |  |
|                              |                              |                   |                            | Bank Card Merchant Fees     |      |    |       |  |  |
| To Whom Paid                 |                              |                   | мо                         | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   | 1-10                       |                             |      |    |       |  |  |
| Mailing Address              |                              |                   | 6                          | 3                           | 2019 | \$ | 15.00 |  |  |
| City                         | State Zip Code (Plus 4)      |                   | Description of Expenditure |                             |      |    |       |  |  |
|                              |                              |                   |                            | monthly fee - 5/1-5/31/2019 |      |    |       |  |  |
| To Whom Paid                 |                              |                   | мо                         | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   |                            |                             |      |    |       |  |  |
| Mailing Address              |                              |                   | 7                          | 1                           | 2019 | \$ | 3.54  |  |  |
| City                         | State                        | Zip Code (Plus 4) | Description of Expenditure |                             |      |    |       |  |  |
|                              |                              |                   | Bank Card Merchant Fees    |                             |      |    |       |  |  |
| To Whom Paid                 |                              |                   | мо                         | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   | rio                        |                             | IZAK |    |       |  |  |
| Mailing Address              |                              |                   | 8                          | 2                           | 2019 | \$ | 3.54  |  |  |
| City State Zip Code (Plus 4) |                              | Descrip           | tion of Exp                | enditure                    | •    |    |       |  |  |
|                              |                              |                   | Bank Card Merchant Fees    |                             |      |    |       |  |  |
| To Whom Paid                 |                              |                   | мо                         | DAY                         | YEAR |    |       |  |  |
| Santander Bank Fees          |                              |                   | 1-10                       | DAI                         | ILAN |    |       |  |  |
| Mailing Address              |                              |                   | 9                          | 3                           | 2019 | \$ | 3.54  |  |  |
| City State Zip Code (Plus 4) |                              | Descrip           | tion of Exp                | enditure                    | •    |    |       |  |  |
|                              |                              |                   | Bank Card Merchant Fees    |                             |      |    |       |  |  |
|                              |                              |                   | Dank Co                    | ard Picicina                |      |    |       |  |  |

|                                       |                                     |                            |   |  |          |    | AGE 23   |  |  |
|---------------------------------------|-------------------------------------|----------------------------|---|--|----------|----|----------|--|--|
| To Whom Paid                          |                                     |                            | мо  | DAY  | YEAR     |    |          |  |  |
| Santander Bank Fees                   |                                     |                            |   |  |          |    |          |  |  |
| Mailing Address                       |                                     |                            | 10  | 1  | 2019     | \$ | 15.00    |  |  |
| State Zip Code (Plus 4)               |                                     |                            | Description of Expenditure                                |  |          |    |          |  |  |
|                                       |                                     |                            | Monthly Fee from 9/1-9/30/2019                            |  |          |    |          |  |  |
| To Whom Paid                          |                                     |                            | МО  | DAY  | YEAR     |    |          |  |  |
| Santander Bank Fees                   |                                     |                            | MO  | DAT  | ILAK     |    |          |  |  |
| Mailing Address                       |                                     |                            | 10  | 2  | 2019     | \$ | 98.29    |  |  |
| City                                  | City State Zip Code (Plus 4)        |                            |   | Description of Expenditure                 |          |    |          |  |  |
|                                       |                                     |                            |   | Bank Card Merchant Fees                    |          |    |          |  |  |
| To Whom Paid                          |                                     |                            | мо  | DAY  | YEAR     |    |          |  |  |
| Santander Bank Fees                   |                                     |                            | МО  | DAT  | TEAR     |    |          |  |  |
| Mailing Address                       |                                     |                            | 11  | 4  | 2019     | \$ | 68.86    |  |  |
| City                                  | State                               | Zip Code (Plus 4)          | Description of Expenditure                                |  |          |    |          |  |  |
|                                       |                                     |                            | Bank Card Merchant Fees                                   |  |          |    |          |  |  |
| To Whom Paid                          |                                     |                            |   | DAY  | VEAD     |    |          |  |  |
| Santander Bank Fees                   |                                     |                            | МО  | DAY  | YEAR     |    |          |  |  |
| Mailing Address                       |                                     |                            | 12  | 2  | 2019     | \$ | 11.75    |  |  |
| City State Zip Code (Plus 4)          |                                     |                            | Description of Expenditure                                |  |          |    |          |  |  |
|                                       |                                     |                            | Bank Card Merchant Fees                                   |  |          |    |          |  |  |
| To Whom Paid                          |                                     |                            | МО  | DAY  | YEAR     |    |          |  |  |
| Santander Bank Fees                   |                                     |                            | 110   | J  | 1 = Aux  |    |          |  |  |
| Mailing Address                       |                                     |                            | 12  | 3  | 2019     | \$ | 15.00    |  |  |
| City                                  | State                               | Zip Code (Plus 4)          | Description of Expenditure                                |  |          |    |          |  |  |
|                                       |                                     |                            |   | Monthly fee from 11/1-11/13/2019           |          |    |          |  |  |
| To Whom Paid                          |                                     |                            | МО  | DAY  | YEAR     |    |          |  |  |
| Steven Land Attire                    |                                     |                            | MO  | DAT  | TEAR     |    |          |  |  |
| Mailing Address                       |                                     |                            | 10  | 16   | 2019     | \$ | 86.42    |  |  |
| <b>City</b> Brooklyn                  | ty Brooklyn State Zip Code (Plus 4) |                            |   | Description of Expenditure                 |          |    |          |  |  |
| ·                                     | NY                                  |                            |   | Advanced payment of fees -to be reimbursed |          |    |          |  |  |
| To Whom Paid                          |                                     |                            | MO  | DAY  | VEAD     |    |          |  |  |
| The Campaign Workshop, Inc            |                                     |                            | МО  | DAY  | YEAR     |    |          |  |  |
| Mailing Address                       |                                     |                            | 10  | 22   | 2019     | \$ | 1,000.00 |  |  |
| City State Zip Code (Plus 4)          |                                     | Description of Expenditure |   |  |          |    |          |  |  |
|                                       |                                     |                            | Consulting Services; McDonald's RTW Campaign/Negotiations |  |          |    |          |  |  |
| To Whom Paid                          |                                     |                            | Campai  | gii/ivegotia<br>                           | LIONS    |    |          |  |  |
| The UPS Store                         |                                     |                            | МО  | DAY  | YEAR     |    |          |  |  |
| Mailing Address 2471 W Cheltenham Ave |                                     |                            | 2   | 4  | 2019     | \$ | 27.01    |  |  |
|                                       |                                     |                            |   |  |          | -  |          |  |  |
| <b>City</b> Wyncote                   | ,                                   |                            |   | tion of Exp                                | enditure |    |          |  |  |
| PA 190952959                          |                                     |                            | Shipping costs  |  |          |    |          |  |  |

| To Whom Paid  |  |  | мо                         | DAY | YEAR |           |            |
|---|--|--|----------------------------|-----|------|-----------|------------|
| USPS  |  |  | MO                         |     | ILAK |           |            |
| Mailing Address   |  |  | 8                          | 30  | 2019 | \$        | 154.00     |
| City State Zip Code (Plus 4)  |  |  | Description of Expenditure |     |      |           |            |
| PO BOx fee  |  |  |                            |     |      |           |            |
|   |  |  |                            |     |      |           | PAGE TOTAL |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. |  |  |                            |     | \$   | 22,057.63 |            |
|   |  |  |                            |     |      |           |            |
|   |  |  |                            |     |      |           |            |
|   |  |  |                            |     |      |           |            |
|   |  |  |                            |     |      |           |            |

## STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

| Name of Filing Committee or Candidate                                   |       |             | Reporting Period                      |   |          |      |          |                                |  |
|---|-------|-------------|---------------------------------------|---|----------|------|----------|--------------------------------|--|
| Campaign for Compassion Committee                                       |       |             | From:                                 |   | 1/1/2019 | То:  |          | 12/31/2019                     |  |
| <u>.</u>  |       |             |                                       |   | DATE     |      |          | Outstanding<br>Balance of Debt |  |
| Name of Creditor Arthur Haywood   |       |             |                                       |   | DAY      | YEAR |          |                                |  |
| Mailing Address 443 Rices Mill Rd Rices Mill Rd                         |       |             |                                       | 5 | 3        | 2014 | \$       | 2,000.00                       |  |
| City Wyncote  | State | Zip Code (P | Zip Code (Plus 4) Description of Debt |   |          |      |          |                                |  |
| PA 19095 Amendment: The candid \$30,000                                 |       |             |                                       |   |          |      | ate Ic   | aned the campaign              |  |
|   |       |             |                                       |   |          |      |          | PAGE TOTAL                     |  |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. |       |             |                                       |   |          | \$   | 2,000.00 |                                |  |