Campaign Finance Report

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

Filer Identificati Number :	on 2019	90158				eport led B		CANDIDATE COMMITTEE \(\sqrt{LOBBYIST} \)									
Name of Filing C	Committee, Candid	late or L	obbyist:		KIN	NKEA	D, EM	IILY PEO	PLE FO	R							
Street Address:																	
City:	PITTSBURGH							State:	PA			Zip Cod	ie: 15	5212-2317			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	1	2.	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	≣-	5.	30 DA	'	POST-	6.		TERMINATION Yes NREPORT?				•	/
report type)	ANNUAL REPORT	7. X	Year 2021	FILING METHOD () CHECK ONE						PAPER DISKETT				TTE			
Name of Office S	Sought by Candida	ite:	-					DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	AR		10000	DEN	1	02	
								11		2	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES)	,
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		11 23	2	021	1 T	0	12	:	31	2021						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	-		11,0	035.11						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dul	le I)	\$			6,4	180.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 17,515.11																	
D. Total Expen	ditures (From Sch	edule II	I)				\$			3,2	221.50						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	:)			\$			14,2	93.61						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le I	II)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$			9,8	350.00			•			
				AFF	ID	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere.	If th	his is	a Can	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sch	edules	s file	ed on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe,
Sworn to and subs	cribed before me thi day of	s	20							5	Signature	of Perso	n Submit	ting Rep	ort		
	Signati	ıre					-					Prin	ted Name	e			
My Commission Ex	cpires						_					Ema	il				
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belie	ef this	pol	litical	commi	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						-					Ema					_
My Commission Exp	oires											Ema					
	МО	D	AY	YR	ł		-		Area	Code		Da	aytime T	elephon	e Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KINKEAD, EMILY PEOPLE FOR	From:	11/23/202	<u>1</u> To:	12/31/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	180.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	800.00
TOTAL for the Reporting) Period	(2)	\$	800.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,000.00
All Other Contributions (Part D)			\$	3,500.00
TOTAL for the Reporting) Period	(3)	\$	5,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	6,480.00

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 Ca	F	Reporting Period					
		F	From:		То	•	
				DATE			AMOUNT
Full Name of Contributing Commit	tee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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	Name of Filing Committee or Candidate				orting Po	eriod			
KINKEAD, EMI	LY PEOPLE FOR			Froi	m:	11/23/	2021 T o): <u>j</u>	12/31/2021
				·		DATE		AN	IOUNT
Full Name of Con	tributor				мо	DAY	YEAR		
Ellen Mazo									
Mailing Address		_	,					\$	250.00
City Pittsburg	h	State	Zip Code (Plus 4	+)	12	7	2021		
		PA	15212						
Full Name of Con	tributor				мо	DAY	YEAR		
Sara Segel							12/110		
Mailing Address		_						\$	250.00
City Pittsburg	h	State	Zip Code (Plus 4)	12	16	2021		
		PA	15217						
Full Name of Con	tributor				мо	DAY	YEAR		
Dale Hutchison					1-10	אלו	ILAK		
Mailing Address								\$	100.00
City Pittsburg	h	State	Zip Code (Plus 4	·)	12	29	2021		
		PA	15209						
Full Name of Con	tributor				мо	DAY	YEAR		
Anthony Ceoffe					140	DAI	ILAK		
Mailing Address								\$	100.00
City Pittsburg	h	State	Zip Code (Plus 4	·)	12	29	2021		
		PA	15201						
Full Name of Con	tributor				мо	DAY	YEAR		
Tara Czekaj						<i>D</i> A.	ILAN		
Mailing Address								\$	100.00
City Pittsburg	h	State	Zip Code (Plus 4	•)	12	29	2021		
		PA	15212						
									•

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

PAGE TOTAL \$ 800.00

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 Repor				ing Period				
KINK	EAD, EMILY PEOPLE FOR			From:	11/2	3/2021	То:	12/31/2021	
					DA	TE		AMOUNT	
Full N	lame of Contributing Committee				мо	DAY	YEAR		
Local	32BJ PA American Dream Fund					57.11		\$ 500.00	
Mailii	ng Address				12	21	2021		
City	New York	State	Zip Code	e (Plus 4)	12		2021		
		NY	10011						
Full N	lame of Contributing Committee				мо	DAY	YEAR		
Frien	ds of Joanna McClinton				110	5711	12/11	\$ 500.00	
Mailii	ng Address				12	9	2021		
City	Philadelphia	State	Zip Code	e (Plus 4)	12		2021		
		PA	19139						
Full N	lame of Contributing Committee				мо	DAY	YEAR		
Repre	esent PAC					5711	12/11	\$ 1,000.00	
Mailii	ng Address				12	28	2021	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
City	Philadelphia	State	Zip Code	e (Plus 4)	12		2021		
		PA	19103						

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

PAGE TOTAL \$ 2,000.00

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.)

Daniel McArdle Booker Mo DAY YEAR \$ 500.00 Mailing Address City Pittsburgh Bernstein-Burkley, P.C.	Full Name of Contributor Daniel McArdle Booker Mailing Address City Pittsburgh State Zip Code (Place)	us 4)	MO 12	DAY 2	YEAR	AMOUNT \$ 500.0		
Name of Contributor Daniel McArdle Booker State Mo Day VEAR State PA 15217	Daniel McArdle Booker Mailing Address City Pittsburgh State Zip Code (Plu		MO 12	DAY 2		\$ 500.0		
Mo	Daniel McArdle Booker Mailing Address City Pittsburgh State Zip Code (Plu		12	2		-		
Daniel McArdle Booker Mailing Address State Zip Code (Plus 4) 15217 2 2021 2021	Mailing Address City Pittsburgh State Zip Code (Plu		12	2		-		
City Pittsburgh State PA Zip Code (Plus 4) 15217 12 2 2 2021 2021 </td <td>City Pittsburgh State Zip Code (Plu</td> <td></td> <td></td> <td></td> <td>2021</td> <td></td>	City Pittsburgh State Zip Code (Plu				2021			
City Pittsburgh State PA Zip Code (Plus 4) 15217 Attorney Employer Name Bernstein-Burkley, P.C. City Pittsburgh State PA Zip Code (Plus 4) 15219 Full Name of Contributor Robert Creo Mailing Address State PA Zip Code (Plus 4) 15229 Total Pittsburgh Attorney Employer Name Self-Employed City Pittsburgh Occupation Attorney Employer Mailing Address/Principal Place of Business City Pittsburgh State PA Zip Code (Plus 4) 15222 Full Name of Contributor Nathaniel Yap MO DAY YEAR \$ 500.00 Mailing Address State PA Zip Code (Plus 4) 15222 \$ 500.00 Full Name of Contributor Nathaniel Yap MO DAY YEAR \$ 500.00 Mailing Address State PA Zip Code (Plus 4) Total Plus Plus Plus Plus Plus Plus Plus Plu	PA 15217				2021			
Employer Name Bernstein-Burkley, P.C. Employer Mailing Address/Principal Place of Business City Pittsburgh State PA State		h	Occupat	ion				
Employer Mailing Address/Principal Place of Business City Pittsburgh MO DAY YEAR \$ 500.00 Full Name of Contributor Robert Creo Mailing Address City Pittsburgh State Zip Code (Plus 4) 15219 \$ 500.00 City Pittsburgh Full Name of Contributor Nathaniel Yap Mo DAY YEAR Zip Code (Plus 4) 15222 Zip Code (Plus 4) 15222 Full Name of Contributor Nathaniel Yap Mo DAY YEAR Zip Code (Plus 4) 15222 Full Name of Contributor Nathaniel Yap Mo DAY YEAR State Zip Code (Plus 4) 15222 Full Name of Contributor Nathaniel Yap Mo DAY YEAR \$ 500.00	Employer Name Bernstein-Burkley, P.C.	h	Occupat	ion		1		
Full Name of Contributor Robert Creo Mailing Address City Pittsburgh State Zip Code (Plus 4) PA 15222 Employer Name Self-Employed Full Name of Contributor Robert Creo Mailing Address City Pittsburgh State Zip Code (Plus 4) PA 15222 City Pittsburgh PA 15222 City Pittsburgh PA 15222 Full Name of Contributor Rathaniel Yap Mo DAY YEAR Since Zip Code (Plus 4) 15222 Full Name of Contributor Rothaniel Yap Mo DAY YEAR Since Since Since Pittsburgh PA 15222 Full Name of Contributor Rathaniel Yap Mo DAY YEAR Since Since Since Pittsburgh PA 15232					Attorne	/		
Name of Contributor Robert Creo	Employer Mailing Address/Principal Place of Business City	h		State		Zip Code (Plus 4)		
Robert Creo Mailing Address City Pittsburgh State PA 15222 Employer Name Self-Employed City Pittsburgh PA 15222 Employer Mailing Address/Principal Place of Business City Pittsburgh PA 15222 Full Name of Contributor Nathaniel Yap Mailing Address City Pittsburgh PA 15232 MO DAY YEAR \$ 500.00	Pittsburg			PA		15219		
Robert Creo Mailing Address City Pittsburgh State PA 15222 Employer Name Self-Employed City Pittsburgh PA 15222 Employer Mailing Address/Principal Place of Business City Pittsburgh PA 15222 Full Name of Contributor Nathaniel Yap Mo DAY YEAR \$ 500.00 Mailing Address City Pittsburgh PA 15232	Full Name of Contributor			•				
Mailing Address City Pittsburgh State PA 15222 Employer Name Self-Employed Self-Employed City Pittsburgh PA 15222 Full Name of Contributor Nathaniel Yap Mailing Address City Pittsburgh PA 15232 Mo DAY YEAR \$ 500.00	Robert Creo		МО	DAY	YEAR	\$ 500.0		
City Pittsburgh State Zip Code (Plus 4) 15222 Employer Name Self-Employed City State Zip Code (Plus 4) PA 15222 Employer Mailing Address/Principal Place of Business City Pittsburgh PA 15222 Full Name of Contributor Nathaniel Yap Mo DAY YEAR \$ 500.00 Mailing Address City Pittsburgh State Zip Code (Plus 4) 12 10 2021				_		1		
Employer Name Self-Employed Occupation Attorney Employer Mailing Address/Principal Place of Business City Pittsburgh PA Touchation State PA Tip Code (Plus 4) 15222 Touchation PA Tip Code (Plus 4) 15222 Touchation PA Tip Code (Plus 4) 15222 Touchation PA Tip Code (Plus 4) 15232	T T	State Zip Code (Plus 4)			2021			
Employer Name Self-Employed Self-Employed State Zip Code (Plus 4) Pittsburgh PA 15222 Full Name of Contributor Nathaniel Yap State Zip Code (Plus 4) Pittsburgh PA 15232 Page PA 15232 State Zip Code (Plus 4) Pittsburgh PA 15232 Attorney Attorney Zip Code (Plus 4) PA 15232 Page								
Employer Mailing Address/Principal Place of Business City Pittsburgh PA State PA 15222 Full Name of Contributor Nathaniel Yap Mo DAY YEAR Mo DAY YEAR 500.00 Mailing Address City Pittsburgh PA 15232	Employer Name Self-Employed		Occupat	ion	Attorne	/		
Full Name of Contributor Nathaniel Yap Mo DAY YEAR \$ 500.00 Mailing Address City Pittsburgh State Zip Code (Plus 4) PA 15232			•	1				
Full Name of Contributor Nathaniel Yap Mo DAY YEAR \$ 500.00 Mailing Address City Pittsburgh State Zip Code (Plus 4) PA 15232	Pittsburg	h		PA		15222		
Nathaniel Yap Mo DAY YEAR \$ 500.00 Mailing Address City Pittsburgh State Zip Code (Plus 4) PA 15232								
Mailing Address City Pittsburgh State Zip Code (Plus 4) PA 15232 10 2021			МО	DAY	YEAR	\$ 500.0		
City Pittsburgh State Zip Code (Plus 4) 12 10 2021 PA 15232 <						1		
PA 15232	T T		12	10	2021			
	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	,						
Timployer Name (NA			Occupat	ion	l Inamni	oved		
Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4)			Госсирия	1	Onempi	•		
NA PA								
				IIA		-		
MO DAY YEAR \$ 1,000,00	Full Name of Contributor John J Betkowski		МО	DAY	YEAR	\$ 1,000.0		
Mailing Address	Mailing Address					1		
12 11 2021		s 4)	12	11	2021			
PA 15237		•						
	Employer Name Retired		Occupat	ion	Retired			
	,							
	NA NA		PA Lip code (I.			-		

Full N	ame of Contributor									
Nancy	/ Bernstein				МО	DAY	YEAR	\$	500.00	
Mailin	ig Address				12	28	2021	1		
City	Pittsburgh	State	Zi	p Code (Plus 4)	12	20	2021			
		l _{PA}	1 15	5217						
Emplo	Employer Name NA					ion (Unempl	oyed		
Emplo	imployer Mailing Address/Principal Place of Business City				State			Zip Code (Plus 4)		
	NA					l _{PA}				
				1 1071		1				
Full N	ame of Contributor			1	MO	l e	VEAD		500.00	
	ame of Contributor / Bernstein			1.00	МО	DAY	YEAR	\$	500.00	
Nancy						DAY		\$	500.00	
Nancy	/ Bernstein	State	Zi	p Code (Plus 4)	MO 12	l e	YEAR 2021	\$	500.00	
Nancy Mailin	/ Bernstein ng Address	State PA				DAY		\$	500.00	
Nancy Mailin City	/ Bernstein ng Address			p Code (Plus 4)		DAY 30			500.00	
Nancy Mailin City Emplo	y Bernstein ng Address Pittsburgh	PA		p Code (Plus 4)	12	DAY 30	2021	pyed	500.00 de (Plus 4)	

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

PAGE TOTAL \$ 3,500.00

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:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	4.			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Per	iod	
KINKEAD, EMILY PEOPLE FOR	From:	<u>11/23/2021</u> To:	12/31/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Ca	andidate		Reporting Period				
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						 	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	!	!				
Enter Grand Total of Dart E	on Schodulo II. In Vi	nd Contributions Dotai	ilad Sum	mary Ba	ao [DACE TOTAL
Enter Grand Total of Part F Section 2.	on Schedule II, In-Ki	na contributions Detai	ileu Sun	шагу Ра	ge,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	portin	g Period				
				Fro	m:			То:		
						DATE				AMOUNT
Full Name of Contributor					мо	DAY		YEAR		
Mailing Address				-					\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occu	ıpation	•			
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Z	ip Code(Plus	4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Scho	edule II. In-Kin	nd (Contributions D	etaile	ed					PAGE TOTAL
Summary Page, Section 3.					-					0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
KINKEAD, EMILY PEOPLE FOR	From	11/23/2021	То:	12/31/2021

			L								
					DATE		AMOUNT				
To Whom Paid				мо	DAY	YEAR					
Progressive Change Campaign Committee				П		1 = 2 1.10					
Mailing Address					1	2021	\$	250.00			
City	Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		DC	20006	Campai	gn Tool						
To Whom Paid				мо	DAY	YEAR					
Progre	ssive Change Campaign Commit	tee		М		ILAK					
Mailing Address					6	2021	\$	25.00			
City	Washington	State	Zip Code (Plus 4)	Description of Expenditure							
		DC 20006			Campaign Tool						
To Wh	om Paid			мо	DAY	YEAR					
Google Inc				М		IZAK					
Mailing Address				12	2	2021	\$	64.20			
City	City Mountain View State Zip Code (Plus 4)			Description of Expenditure							
CA 94043				Email/Cloud Storage							
To Whom Paid				мо	DAY	YEAR					
Google Inc				М		IZAK					
Mailing Address			12	2	2021	\$	13.31				
City	Mountain View	State	Zip Code (Plus 4)	Description of Expenditure							
		CA	94043	Additional Email/Cloud Storage							
To Whom Paid			МО	DAY	YEAR						
ActBlu	е			М		ILAK					
Mailing Address					3	2021	\$	9.60			
City	Somerville State Zip Code (Plus 4)		Zip Code (Plus 4)	Description of Expenditure							
	MA 02144				Processing Fee						
To Whom Paid				МО	DAY	YEAR					
ActBlue				1.10		LAK					
Mailing Address				12	31	2021	\$	22.83			
City	City Somerville State Zip Code (Plus 4) MA 02144			Description of Expenditure							
				Process	ing Fees (I	Misc)					

To Wh	om Paid			МО	DAY	YEAR						
Citizens Bank						ILAK						
Mailing Address					7	2021	\$	54.50				
City	Pittsburgh	ittsburgh State Zip Code (Plus 4)			Description of Expenditure							
		PA	PA 15213			Checks						
To Whom Paid				мо	DAY	YEAR						
Emerge Pennsylvania				МО		ILAK						
Mailing Address					8	2021	\$	250.00				
City	Philadelphia State Zip Code (Plus 4)		Description of Expenditure									
	PA 19102			Fundraiser								
To Whom Paid				мо	DAY	YEAR						
MailCl	nimp			М		ILAK						
Mailin	g Address			12	13	2021	\$	32.06				
City	City Atlanta State Zip Code (Plus 4)			Description of Expenditure								
		GA	30308	Donor Contact								
To Whom Paid					DAY	YEAR						
MFStrategies, LLC				МО		7 = 7 1.13						
Mailing Address				12	13	2021	\$	1,500.00				
City	Harrisburg	burg State Zip Code (Plus 4)			Description of Expenditure							
	PA 17108			Consulting Fee								
To Wh	om Paid			МО	DAY	YEAR						
HDCC												
Mailing Address				12	13	2021	\$	1,000.00				
City	Harrisburg	arrisburg State Zip Code (Plus 4)			Description of Expenditure							
		PA	17108	Fundrai	ser							
								PAGE TOTAL				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$	3,221.50				
					I	•						

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								
KINKEAD, EMILY PEOPLE FOR				From:	<u>11/23/2021</u> To:				12/31/2021			
						DATE			Outstandi Balance o			
Name of Creditor Emily Kinkead					мо	DAY	YEAR					
Mailing Address					12	31	2019	9 4	\$	9,100.00		
City Pittsb	urgh	State	State Zip Code (Plus 4)			Description of Debt						
		PA	15212	Candidate Campaign Co					tribution			
Name of Creditor					МО	DAY	YEAR					
Emily Kinkead												
Mailing Address						5	202:	1 4	•	750.00		
City Pittsb	urgh	State	Zip Code (P	lus 4)	Description of Debt							
	PA 15212 Consulting Fee											
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.									PAG	E TOTAL		
								\$	\$ 9,85			