

Campaign Finance Report

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

Filer Identification Number :		20190359		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Kane for State Senate												
Street Address: 209 Harding Ave.												
City: Havertown						State: PA		Zip Code: 19083				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2021	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	2	2021				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	23	2021		12	31	2021				
A. Amount Brought Forward From Last Report						\$ 9,533.62						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 22,579.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 32,112.62						
D. Total Expenditures (From Schedule III)						\$ 1,431.13						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 30,681.49						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Kane for State Senate	From: <u>11/23/2021</u> To: <u>12/31/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 79.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 22,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 22,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 22,579.00
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PART B

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)

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

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

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

PAGE TOTAL
\$0.00

PART 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 Kane for State Senate	Reporting Period From: <u>11/23/2021</u> To: <u>12/31/2021</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee Malady & Wooten PAC				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 604 N 3rd St Fl 2				12	27	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 171011120					
Full Name of Contributing Committee Plumbers Local 690				MO	DAY	YEAR	\$ 10,000.00
Mailing Address 2791 Southampton Rd				12	28	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191541211					
Full Name of Contributing Committee Sprinkler Fitters Local Union #692 PAC Fund				MO	DAY	YEAR	\$ 10,000.00
Mailing Address 14004 McNulty Rd				12	30	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191541106					

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

PAGE TOTAL
\$ 22,500.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)

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

				DATE	AMOUNT	
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name				Occupation		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 0.00

PART E
OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

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

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

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
Kane for State Senate		From: <u>11/23/2021</u> To: <u>12/31/2021</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

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

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL
							\$ 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Kane for State Senate	From <u>11/23/2021</u> To: <u>12/31/2021</u>

DATE				AMOUNT		
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 5.76
Mailing Address PO Box 441146			12	9	2021	
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure Fee			
To Whom Paid CHB Consulting LLC			MO	DAY	YEAR	\$ 500.00
Mailing Address 269 Shawmont Ave			12	13	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191284208	Description of Expenditure Consulting			
To Whom Paid Friends of Dave Dellosa			MO	DAY	YEAR	\$ 500.00
Mailing Address 2136 Highland Ave			11	28	2021	
City Morton	State PA	Zip Code (Plus 4) 190701221	Description of Expenditure Donation			
To Whom Paid Google			MO	DAY	YEAR	\$ 63.84
Mailing Address 1600 Amphitheatre Pkwy			12	3	2021	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Email Services			
To Whom Paid Letter Stream			MO	DAY	YEAR	\$ 2.55
Mailing Address 8551 E Anderson Dr Ste 108			12	2	2021	
City Scottsdale	State AZ	Zip Code (Plus 4) 852555451	Description of Expenditure shipping			

To Whom Paid NGP VAN, Inc.			MO	DAY	YEAR	
Mailing Address 1101 15th St NW Ste 500			12	2	2021	
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure database			

To Whom Paid Siteground			MO	DAY	YEAR	
Mailing Address 01 N. Pitt St			11	29	2021	
City Alexandria	State VA	Zip Code (Plus 4)	Description of Expenditure Website hosting			

To Whom Paid Verizon Wireless			MO	DAY	YEAR	
Mailing Address PO Box 25505			12	13	2021	
City Lehigh Valley	State PA	Zip Code (Plus 4) 180025505	Description of Expenditure Phones			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 1,431.13

