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 :	ion 2000	190			Repo Filed			CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST	•	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		AFT-PE	NNS	SYL	VANIA									
Street Address:	3031 WALTON	N RD, BI	JILDING A	, STE :	340												
City:	PLYMOUTH MI	EETING						State:	PA			Zip Co	de: 19	e: 19462			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	AY PRE-	- 2.		DA' IMA		POST-	3.		AMENDN REPORT	Yes		No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5.		DA' ECT	y f ION	POST-	6.		TERMIN/ REPORT	Yes	ſ	No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2022					G METHO				PAPER		\checkmark	DIS	ETTE	
Name of Office S	L Sought by Candida	te:						DATE O	F ELEC	TIC	N	District Number	Office Code	Par	ty Coc	le Cou Cod	
								мо	DAY	Y	EAR	Humber	couc				
			ľ	11		8	2022		(SEE INS	TRUCTI	ONS FO	R CODE	S)				
	Receipts and	мо	DAY	YEAR				мо	DAY	Y	EAR	FC	R OFFIC	E USE	ONL	Y	
Expenditures	s from:		1 3	3 20	022	ГО	ĺ	3	2	8	2022						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$		1	34,0	055.87						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$			1,5	596.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$		1	35,6	651.87						
D. Total Expen	ditures (From Sch	edule II	I)				\$			e	500.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$		1	35,0)51.87						
F. Value Of In-	Kind Contributions	Receive	ed (From S	Schedu	le II)		\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule I\	/)			\$				0.00						
				AFF	IDAV	IT S	SEG	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.]	lf this i	s a C	Can	didate re	eport, ca	andi	date sig	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	chedules	s filed or	ı papo	er o	r by electi	ronic me	dium	i, are to i	the best o	f my knov	vledge	and be	elief , t	rue
Sworn to and subs	cribed before me this day of	5	20							5	Signature	e of Perso	n Submitt	ing Rep	oort		
	Signatu	ro				_						Prin	ted Name				-
My Commission E	-											Ema	il				_
	мо	DA	AY	YR					Are	a Coc	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	l Comm	nittee,	Cand	lida	te shall :	sign he	re.							
I swear (or affirm) No 320) as amendo) that to the best of n ed.	ny knowle	edge and bel	ief this	politica	l com	nmi	ttee has n	ot violat	ed an	ny provis	ions of th	e act of Ju	ine 3,1	937 (F	.L. 13	33,
Sworn to and subso	cribed before me this day of		20								s	ignature (of Candida	ite			-
Printed Name									_								
	Signature											Ema					_
My Commission Exp	bires											Ema					
	мо	DA	AY	YR		_			Area C	ode		D	aytime Te	elephon	e Nun	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** AFT-PENNSYLVANIA From: <u>1/3/2022</u> **To:** <u>3/28/2022</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 1,596.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,596.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

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			Re	porting l	Period			
Fr				om:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

Use this Part to ite	\$50.0 mize all othe 0.01 to \$250.	00 in the repo	s wi ortin	ith an 1g per	aggreg iod.			rom
Name of Filing Committee or Candidat	e		Rep	orting P	eriod			
			Fror	m:		То):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detai	led Summary Pag	je, Se	ection 2	2.		\$	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 Cand	Name of Filing Committee or Candidate			J Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

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

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	2		Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·					•	•		
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
			20000				\$		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		
AFT-PENNSYLVANIA	From:	<u>1/3/2022</u> To:	<u>3/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
	From:	То:					
				DATE		АМО	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	,				
Description of Contribution:							
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate					Rej	porting P	eriod			
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption of	Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate						
AFT-PENNSYLVANIA	From	<u>3/28/2022</u>					
		DATE			AMOUNT		
To Whom Paid Labor PAC AFL-CIO				DAY	YEAR		
Mailing Address 3031 Walton RD BLI	DG C Suite 300		2	9	2022	\$	600.00
City Plymouth Meeting	State PA	Zip Code (Plus 4) 19462	Descrip Contrib	otion of Exp oution	penditure	1	
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I				\$	600.00