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			Repor Filed E		CANDI	DATE	co	MMITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		AFT-PE	NNSY	LVANIA								
Street Address:	3031 WALTO	N RD, BL	JILDING A	, STE 3	40										
City:	PLYMOUTH M	EETING					State:	PA		Zip Co	Zip Code: 19462				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 D/ PRIM		POST-	3.		AMENDMENT REPORT?		No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-	5.	30 D/ ELEC		POST-	6.	TERMIN REPORT		Yes	No	\checkmark	
report type) ANNUAL REPORT 7. Year 2022 FILING METHOD () CHECK ONE () CHECK ONE () CHECK ONE							PAPER		\checkmark	DISKE	TTE				
Name of Office S	L Sought by Candida	te:					DATE O	F ELEC	TION	District Numbe		Par	ty Code	County Code	
			мо	DAY	YEAR										
							11		8 20	22	(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY		
Expenditures	s from:		3 29	20	22 T	0	5		2 20	22					
A. Amount Bro	ught Forward Fror	n Last Ro	eport			\$		1	35,051.	87					
B. Total Monet	ary Contributions	And Reco	eipts (Fron	1 Sched	lule I)	\$			786.	00					
C. Total Funds	Available (Sum Of	f Lines A	and B)			\$		1	.35,837.	87					
D. Total Expen	ditures (From Sch	edule II	[)			\$			0.0	00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$		1	35,837.8	37					
F. Value Of In-	Kind Contributions	s Receive	ed (From S	chedule	e II)	\$			0.0	00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	()		\$			0.0	00					
				AFFI	DAVI	T SE	CTION								
	s a Committee rep	•	-							-					
correct and comple) that this report, inc ete.	luding the	attached sc	nedules	filed on	paper	or by elect	ronic me	dium, are	to the best	от ту кпоч	leage	and bell	ef , true	
Sworn to and subs	cribed before me this day of	5	20						Signat	ture of Perso	on Submitt	ing Rep	oort		
	Signatu	re				_				Pri	nted Name				
My Commission Ex	xpires					_				Ema	ail				
	МО	DA	Y	YR				Area	a Code	Daytiı	ne Teleph	one Nu	mber		
	a report of a can							-							
No 320) as amendo		ny knowie	age and beli	er this p	political	comm	littee has h	ot violate	ed any pro	visions of ti	ie act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subso	ribed before me this day of		20							Signature	of Candida	ite			
						-				Print	ed Name				
My Commission Exp	Signature bires					-				Em	ail				
	мо	DA	NY	YR		-		Area C	Code	[Daytime Te	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** AFT-PENNSYLVANIA From: <u>3/29/2022</u> To: 5/2/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 786.00 \$ **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 \$ 786.00 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			Repor	rting I	Period				
				From: To			Го:		
		·			DATE			AMOUNT	
Full Name of Contributing Committee			м	10	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

\$

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 Candidat	e			orting P	eriod	_		
			Fro	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
Sity State Zip Code (Plus 4)								
PAGE TOTAL								
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detai	led 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		АМС	DUNT
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 Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section						\$	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	Name of Filing Committee or Candidate			ting Perio	od				
				From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description					1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y Page,	Section	-			\$		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>3/29/2022</u> To:	<u>5/2/2022</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	TF)		
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Rep				Reporting Period					
	From: To:								
				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 Schedule II, In-Kind Contributions Detaile Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

0.00

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

Name of Filing Committee or Candidate				Rep	oorting 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	l tion		<u> </u>	
Employer Mailing Address/Prin Business	ncipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	Contribution
Enter Grand Tatal of Dart	C on Schodula II		Contribut			d				PAGE TOTAL

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate							
F						То:		
	DATE AMO							
To Whom Paid	To Whom Paid				YEAR			
Mailing Address						\$	0.00	
City State Zip Code (Plus 4)				otion of Ex	penditure			
Enter Grand Total of Expenditures of	`				PAGE TOTAL			
	Jil Page 1, Report C	over Page, Item I				\$	0.00	