# **Campaign Finance Report**

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

Filer Identificat Number :	ion 2012	20419			Repo Filed		CAND	IDATE		СОМІ	MITTEE	✓	LOBI	BYIST		
	Committee, Candid	ate or Lo	obbyist:				or Compas	ssion Co	ommi	ittee						
Street Address:						_										
City:	Elkins Park						State:	PA			Zip Co	<b>Zip Code:</b> 19027				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM	DAY 1ARY	POST- 3. <b>X</b>			AMENDMENT REPORT?		Yes	No	· 🗸	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5.	30 D ELEC	DAY CTION	POST-	6.		TERMIN REPORT		Yes	No	· 🗸	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				FILING METHOD I ( ) CHECK ONE				PAPER		$\checkmark$	DISK	TTE	
Name of Office Sought by Candidate:						DATE C	OF ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code		
SENATOR IN T	HE GENERAL ASS	EMBI Y					мо	DAY	YE	AR	4	STS	DEN	1	46	
							11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	R OFFIC	E USE	ONLY		
Expenditure	s from:		5 3	2	022	то	6	5	6	2022						
A. Amount Bro	ought Forward From	m Last R	eport			\$	\$			77.08						
B. Total Monet	9	\$		7,9	15.00											
C. Total Funds	5	\$		73,8	892.08											
D. Total Expen	D. Total Expenditures (From Schedule III)								28,0	70.40						
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$		45,8	21.68	4					
	Kind Contribution		-		le II)	9	\$	0.00								
G. Unpaid Deb	ts And Obligations	(From S	Schedule I\	/)		5	\$	0.00								
							ECTION									
	s a Committee rep ) that this report, inc											f my knou	vledge	and hel	iof true	
correct and compl		rading the	attacheu sc	ineutie	s med o	прарег	of by elect	li onic me	eurum,		the best t		vieuge		ier, true	
Sworn to and sub	scribed before me this day of	S	20						S	ignaturo	e of Perso	n Submitt	ing Rep	oort		
	Signatu	ire				_					Prin	ted Name				
My Commission E	xpires					_					Ema	il				
	мо	D/	AY	YR				Are	ea Cod	e	Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Com	nittee,	Candi	date shall	sign he	ere.							
I swear (or affirm No 320) as amend	) that to the best of r ed.	ny knowle	edge and bel	ief this	s politica	l comr	nittee has r	not violat	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 1333,	
Sworn to and subs	cribed before me this day of		20							S	ignature	of Candida	ite			
											Printe	d Name				
My Commission Ex	Signature					_					Ema	il				
						_										
			Area	Code		D	aytime Te	elephon	e Numb	ber						

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>5/3/2022</u> **To:** Campaign for Compassion Committee 6/6/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 240.00 **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)** 175.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 175.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 6,000.00 1,500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 7,500.00 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 \$ 7,915.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candidat	Name of Filing Committee or Candidate				Reporting Period					
				From: To:			1			
				DATE AMOU						
Full Name of Contributing Committee					DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								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 Candid	ate		Rep	oorting Po	eriod			
Campaign for C	Campaign for Compassion Committee				m:	<u>5/3/2</u>	2 <u>022</u> To	:	<u>6/6/2022</u>
DATE									AMOUNT
Full Name of Cont Kathleen Ann Mal					мо	DAY	YEAR		
Mailing Address		-						\$	100.00
City Ashland		<b>State</b> NH	<b>Zip Code (Plus 4</b> 032171115	)	5	15	2022		
Full Name of Cont	ributor				мо	DAY	YEAR		
SANDRA BURNEY	BOXLEY				MO	DAT	TLAK		
Mailing Address		-						\$	75.00
City         Willow Grove         State         Zip Code (Plus 4)           PA         190904407					6	4	2022		
									PAGE TOTAL
Enter Grand	Total of Part A on	Schedule I, Detail	ed Summary Pag	je, S	ection 2			\$	175.00

# 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			
Campaign for Compassion Committee			From:	<u>5/</u>	' <u>3/2022</u>	То:	<u>6/6/2022</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
Democracy Fund				-			<b>\$</b> 1,500.00
Mailing Address				6	6	2022	
City Harrisburg	State	Zip Cod	e (Plus 4)		, , , , , , , , , , , , , , , , , , ,		
	РА	171011	513				
Full Name of Contributing Committee				мо	DAY	YEAR	
Erie Insurance PAC							<b>\$</b> 1,000.00
Mailing Address				6	4	2022	
City Phila	State	Zip Cod	e (Plus 4)	Ű			
	PA	19150					
Full Name of Contributing Committee				мо	DAY	YEAR	
Independence Blue Cross PAC							<b>\$</b> 500.00
Mailing Address				6	4	2022	
City Philadelphia	State	Zip Cod	e (Plus 4)				
	РА	191031	480				
Full Name of Contributing Committee				мо	DAY	YEAR	
PAA PAC (Pennsylvania Automotive Ass	ociation)			no			<b>\$</b> 1,500.00
Mailing Address				6	6	2022	
City Harrisburg	State	Zip Cod	e (Plus 4)	Ű	Ű		
	PA	171022	214				
Full Name of Contributing Committee				мо	DAY	YEAR	
Pennsylvania Institute of Certified Publi	c Account						<b>\$</b> 500.00
Mailing Address				6	4	2022	
City Harrisburg	State	Zip Cod	e (Plus 4)				
	РА	171011	163				
Full Name of Contributing Committee			мо	DAY	YEAR		
PHA Home PAC				no			<b>\$</b> 500.00
Mailing Address			6	6	2022		
City	State	Zip Cod	e (Plus 4)			2022	

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ull Name of Contributing Committee			мо	DAY	YEAR	
PPL People for Good Government			110			\$ 500.00
Mailing Address			6	4	2022	
City Allentown	State	Zip Code (Plus 4)			2022	
PA 181011139						
Enter Grand Total of Part C or	\$ <b>PAGE TOTAL</b> 6,000.00					

## 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	lame of Filing Committee or Candidate				Reporting Period					
Campaign for Compassion Committee			From	n:	<u>5/3/2</u>	<u>.022</u> To	<b>D:</b>	<u>6/6/2022</u>		
				DATE				AMOUNT		
Full Name of Contributor Michael Young				мо	DAY	YEAR	\$	1,500.00		
Mailing Address					4	2022	,			
City Lafayette Hill	State	Zip Code (Plus	; 4)	6						
	PA	194441703								
Employer Name Informatio	on Requested			Occupat	ion	Informa	ation F	Requested		
Employer Mailing Address/P	Employer Mailing Address/Principal Place of Business City				State		Zip C	Code (Plus 4)		
Enter Grand Total of Part	C on Schedule I, Detailed S	Summary Page,	Sectio	on 3.			\$	<b>PAGE TOTAL</b> 1,500.00		

### 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 Candidat	e		Reporting Period						
			From:	From: To:					
				D	ATE			AMOUNT	г
Full Name				мо	DAY	YEAR	\$	;	0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description									
								PAGE TO	TAL
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 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 Period									
Campaign for Compassion Committee	From:	<u>5/3/2022</u> <b>To:</b>	<u>6/6/2022</u>							
. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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	Name of Filing Committee or Candidate R			Reporting Period				
F			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b>*</b>		0.00
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 TOTA	L
						\$		0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Reporting Period					
			From:			То:			
						DATE		AI	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zip Code(Pl	us 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Place of Business City				State	e Zip	Code(Plus 4)	Descri	ption of Co	ntribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					P	<b>AGE TOTAL</b> 0.00			

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period						
Campaign for Compassion Committee			From	<u>5/:</u>	<u>3/2022</u>	То:	<u>6/6/2022</u>			
				DATE			AMOUNT			
To Whom Paid			мо	DAY	YEAR					
12 Ward Commitee			МО							
Mailing Address			5	11	2022	\$	500.00			
City	State	Zip Code (Plus 4)	Description of Expenditure Contribution							
To Whom Paid			мо	DAY	YEAR					
17th Ward Democratic Committe										
Mailing Address			5	5	2022	\$	500.00			
City	State	Zip Code (Plus 4)		Description of Expenditure						
			Contrib	Contribution						
<b>To Whom Paid</b> 22 Ward Democratic Committee				DAY	YEAR					
Mailing Address			5	17	2022	\$	500.00			
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
			Contribution							
To Whom Paid			мо	DAY	YEAR					
50TH Ward Democratic Committee										
Mailing Address			5	5	2022	\$	500.00			
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
			Contrib	ution	-					
To Whom Paid Actblue			мо	DAY	YEAR					
Mailing Address			5	4	2022	\$	18.65			
City West Somerville	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	МА	021440031	Process	ing Fees						
To Whom Paid			мо	DAY	YEAR					
Actblue										
Mailing Address		6	3	2022	\$	2.11				
City West Somerville	ity West Somerville State Zip Code (Plus 4)			4) Description of Expenditure						
	MA 021440031				Processing fees					

To Who	Whom Paid				DAY	YEAR			
ADP				мо					
Mailing	Address			5	20	2022	\$	47.67	
City	Ft Washington	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	190343231	Process	ing fees				
To Who	om Paid			мо	DAY	YEAR			
Kennec	ly Clark			мо		TLAK			
Mailing	Address			5	25	2022	\$	450.00	
City	Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	191245411	Stipend					
To Whom Paid				мо	DAY	YEAR			
Kennec	ly Clark			MO	DAT	TEAR			
Mailing	Address			5	26	2022	\$	300.00	
City	Philadelphia	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
PA 191245411				Stipend					
To Whom Paid				мо	DAY	YEAR			
Facebook									
Mailing Address				5	10	2022	\$	25.00	
City State Zip Code (Plus 4)				Descript	tion of Exp	enditure			
				Operati	ng Fees				
To Who	m Paid			мо	DAY	YEAR			
Facebo	ok			мо		TLAK			
Mailing	Address			5	12	2022	\$	25.00	
City		State	Zip Code (Plus 4)	Description of Expenditure					
				Operating Fees					
To Who	om Paid			мо	DAY	YEAR			
Facebo	ok			MO					
Mailing	Address			5	16	2022	\$	35.00	
City		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
				operatir	ng Fees / p	romo			
To Who	om Paid			мо	DAY	YEAR			
Facebo	ok			MO		TLAK			
Mailing	Address			5	17	2022	\$	50.00	
City		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
				Operati	ng fees / p	romo			
To Whom Paid			мо	DAY	YEAR				
Facebo	Facebook			MO		TLAK			
Mailing	Mailing Address			5	23	2022	\$	11.83	
City	City State Zip Code (Plus 4)		4) Description of Expenditure						
			Operating fees						

To Whom Paid		мо	DAY	YEAR					
Friends of Noah Marlier		МО	DAT	TLAK					
Mailing Address		6	1	2022	\$	500.00			
City State Zip Code (Plus 4)		Description of Expenditure							
			Contribu	ribution					
To Whom Paid			мо	DAY	YEAR				
Arthur Haywood			110	2711	- <b>-</b> /-				
Mailing Address			5	19	2022	\$	623.45		
City Wyncote	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	19095	Reimbursement						
To Whom Paid			мо	DAY	YEAR				
Arthur Haywood									
Mailing Address     State     Zip Code (Plus 4)     I       City     Wyncote     PA     19095     F       To Whom Paid     Sandra Jenkins     I     I       Mailing Address     I     I     I		5	19	2022	\$	2,000.00			
City Wyncote	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	19095	Repayment of loan						
To Whom Paid			мо	DAY	YEAR				
Sandra Jenkins									
Mailing Address			5	20	2022	\$	63.02		
City Elkins Park	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	190271022	Reimbursement / Gasoline						
To Whom Paid			мо	DAY	YEAR				
NGPVAN									
Mailing Address		5	3	2022	\$	260.35			
City State Zip Code (Plus 4)		Description of Expenditure							
				Operating Fees					
To Whom Paid		мо	DAY	YEAR					
NGPVAN									
Mailing Address			5	10	2022	\$	31.34		
City	City State Zip Code (Plus 4)		Description of Expenditure						
				Processing Fees					
To Whom Paid			мо	DAY	YEAR				
NGPVAN									
Mailing Address		-	6	2	2022	\$	23.16		
City State Zip Code (Plus 4)		Description of Expenditure							
		Processing fees							
To Whom Paid			мо	DAY	YEAR				
NGPVAN									
Mailing Address		6	3	2022	\$	260.35			
City	City State Zip Code (Plus 4)		Description of Expenditure						
		1	1	ng fees					

To Whom Paid				мо	DAY	YEAR		
PA Senate Democratic Campaign Committee								
Mailing Address			6	1	2022	\$	10,000.00	
City Philadelphia	State	e	Zip Code (Plus 4)	Description of Expenditure Contribution				
	PA		191091025					
To Whom Paid				мо	DAY	YEAR		
Philadelphia Democratic City Committee								
Mailing Address				5	5	2022	\$	4,000.00
City State Zip Code (Plus 4)			Description of Expenditure					
				Contribution				
To Whom Paid				мо	DAY	YEAR		
Philadelphia Democratic City Committee			MO		TEAR			
Mailing Address				5	5	2022	\$	5,000.00
City State Zip Code (Plus 4)		Description of Expenditure						
			Contribution					
To Whom Paid								
Philly Neighborhood Ne	tworks			мо	DAY	YEAR		
Mailing Address				5	18	2022	\$	300.00
City	State	e	Zip Code (Plus 4)	Description of Expenditure				
	PA		,	Contribution				
To Whom Paid	ł							
Wallace Q. Weaver				мо	DAY	YEAR		
Mailing Address				5	5	2022	\$	700.00
City         Philadelphia         State         Zip Code (Plus 4)			Description of Expenditure					
	PA		191502107	Stipend				
To Whom Paid	·		•			VELD		
Wallace Q. Weaver				мо	DAY	YEAR		
Mailing Address				5	23	2022	\$	1,077.58
City Philadelphia	State	e	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure		
,	PA		191502107	Stipend / gas reimbursement				
To Whom Paid								
Ricky'Pride				мо	DAY	YEAR		
Mailing Address		6	6	2022	\$	250.00		
City Lansdale State		9	Zip Code (Plus 4)	Description of Expenditure				
	PA	-	194463641	Contribu				
To Whom Paid								
ZOOM USA			мо	DAY	YEAR			
Mailing Address			6	1	2022	\$	15.89	
			Zin Code (Dive 4)					
City	State	2	Zip Code (Plus 4)		tion of Exp	enulture		
				operating fees				

		PAGE 16		
		PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	28,070.40		
	L			