#### **Campaign Finance Report**

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

Filer Identification 20220272 Number :					Report		CANDI	DATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBBYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:	Pl	UT PEI	NNSYL	VANIA F	IRST							
Street Address:	1229 CHEST	NUT ST,	UNIT 159												
City:	PHILADELPH	IA					State:	PA			Zip Cod	de: 19	9107		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE PRIMARY	E-	2.	30 DA		POST-	3. <b>X</b>		AMENDM REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PR ELECTION	E-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	<b>~</b>
report type)	ANNUAL REPOR	<b>r</b> 7.	<b>Year</b> 2022				NG METHO	=			PAPER			DISKE	ГТЕ
Name of Office S	Sought by Candid	ate:	•				DATE 0	F ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code
	,						МО	DAY	YE	AR	ituilibei	GOV			-
GOVERNOR							11		8	2022		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
Summary of Receipts and Expenditures from:  MO DAY YEAR						_	МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
			5 3 2	202	22 <b>T</b>	0	6		6	2022					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$				0.00					
B. Total Monetary Contributions And Receipts (From Schedule I)								3,	000,0	00.00					
C. Total Funds Available (Sum Of Lines A and B)								3,	000,0	00.00					
D. Total Expenditures (From Schedule III)						\$		2,	247,0	86.00					
E. Ending Cash Balance (Subtract Line D From Line C)						\$		-	752,9	14.00					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Schedu	ule	II)	\$				0.00					
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)			\$				0.00			1		
			AFI	ΞI	DAVI	T SE	CTION								
PART I - If this is			_							_					
I swear (or affirm) correct and comple	) that this report, in ete.	cluding the	e attached schedule	es f	iled on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	ind belie	f , true
Sworn to and subs	cribed before me th day of	is	20						S	ignature	e of Perso	n Submit	ting Rep	ort	
	Signat	ure				- -					Prin	ted Nam	e		
My Commission Ex	_										Ema	il			
	мо	D	AY YR	₹				Are	ea Cod	e	Daytim	e Telepi	hone Nun	nber	
Part II- If this is	a report of a car	ndidate's	authorized Com	mit	ttee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of	my knowl	edge and belief thi	s p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	lune 3,19	37 (P.L.	1333,
Sworn to and subsc		5								s	ignature (	of Candid	late		
	day of					_					Duint	d Nama			
	Signature	,				_					Printe	d Name			
My Commission Exp	_										Ema	il			
	МО	D	AY YI	R		-		Area Code Daytime Telephone Number						er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
PUT PENNSYLVANIA FIRST	From:	<u>5/3/202</u>	<u>2</u> To:	6/6/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	0.00
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)			\$	0.00
All Other Contributions (Part D)			\$	3,000,000.00
TOTAL for the Reporting	) Period	(3)	\$	3,000,000.00
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			\$	3,000,000.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu								
Name of Filing Comm	nittee or Candidate		Reporting Period						
			From: To				<b>)</b> :		
		<u> </u>			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	)						
	•	·			•	•	$\overline{}$	DACE TOTAL	

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

**PAGE TOTAL**\$ 0.00

## 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				МО	DAY	YEAR		
Mailing Address	Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candi	me of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

### 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.)

lame of Filing Committee or Candidate				Rep	orting Pe	riod				
PUT PENNSYLVANIA FIRST				Fror	n:	<u>5/3/2</u>	<u>022</u> <b>T</b> o	o:	6/6/2022	
					D/	ATE		Δ	MOUNT	
Full Name of Contributor SEIU PENNSYLVANIA STATE COUNCIL					мо	DAY	YEAR			
Mailing 1500 N 2ND ST #11								\$	50,000.00	
City HARRISBURG	State	Zi	p Code (Plus	<del>; 4)</del>	5	13	2022	2		
TWINNESSORE	PA	17	'102							
Employer Name N/A					Occupat	tion	I/A			
Employer Mailing Address/Principal Place of City Business						State		Zip Co	de (Plus 4)	
1500 N 2ND ST #11 HARRISBURG						PA		1710	2	
Full Name of Contributor SEIU PENNSYLVANIA STATE COUNCIL					МО	DAY	YEAR			
Mailing Address 1500 N 2ND ST #11								\$	25,000.00	
City HARRISBURG	State	Zi	p Code (Plus	<b>34)</b>	5	16	2022	2		
	PA	17	'102							
Employer Name N/A					Occupation N/A					
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Co	de (Plus 4)	
1500 N 2ND ST #11			HARRISB	URG		PA		1710	2	
Full Name of Contributor PENNSYLVANIA ALLIANCE ACTION					МО	DAY	YEAR			
Mailing 121 S BROAD STREET Address	SUITE 400							<b>\$</b>	175,000.00	
City PHILADELPHIA	State	Zi	p Code (Plus	; 4)	5	17	2022	2		
	PA	PA 19107								
Employer Name N/A				Occupation N/A						
Employer Mailing Address/Principal Place of Business  City				State			Zip Code (Plus 4)			
Business 121 S BROAD STREETSUITE 400 PHILADELPHIA					PHIA PA			19107		

Full Name of Contributor							1		
Full Name of Contributor SEIU COMMITTEE ON POLITICAL EDUC.	ATION			мо	DAY	YEAR			
							4		
Mailing 1800 MASSACHUSETT Address	rs ave nw						\$	100,000.00	
City WASHINGTON	State	Zip	Code (Plus 4)	5	18	2022			
WASHINGTON	DC	20	036						
-				0	••••				
Employer Name <sub>N/A</sub>				Occupat	N	I/A			
Employer Mailing Address/Principal Plac	e of		City		State	Т	Zip Code (Plus 4)		
Business					DC		20026		
1800 MASSACHUSETTS AVE NW			WASHINGTON		DC		20036		
Full Name of Contributor					DAY	VEAD			
DEMOCRATIC GOVERNORS ASSOCIATI	ON			МО	DAY	YEAR			
Mailing 1225 I ST. NW STE.	1100						١.		
Address				5	19	2022	\$	1,000,000.00	
City WASHINGTON	State	Zip	Code (Plus 4)	5	19	2022			
	DC	20	005						
Employer Name N/A				Occupat	ion	1/4	1		
147.1						I/A			
Employer Mailing Address/Principal Plac Business	e of		City		State		Zip Code	(Plus 4)	
1225 I ST. NWSTE. 1100 WASHINGTON					DC		20005		
		- !			'	<u> </u>	1		
Full Name of Contributor	ON			мо	DAY	YEAR			
DEMOCRATIC GOVERNORS ASSOCIATI	ON								
Mailing 1225 I ST. NW STE.	1100						\$	500,000.00	
City WASHINGTON	State	Zip	Code (Plus 4)	6	2	2022			
WASHINGTON WASHINGTON	DC		005						
	-								
Employer Name N/A				Occupat	i <b>on</b> N	I/A			
Employer Mailing Address/Principal Plac	e of		City		State	1	Zip Code	(Plus 4)	
Business							-	,	
1225 I ST. NWSTE. 1100			WASHINGTON		DC		20005		
Full Name of Contributor									
STATE VICTORY ACTION				МО	DAY	YEAR			
Mailing P.O. BOX 645							4		
Address P.O. BOX 043				_	3.5	2022	\$	1,000,000.00	
City RALEIGH	State	Zip	Code (Plus 4)	5	25	2022			
NC 27602									
Employer Name N/A				Occupat	ion	1/4	1		
, , , , , , , , , , , , , , , , , , ,				N/A					
Employer Mailing Address/Principal Place of City				State		Zip Code	(Plus 4)		
P.O. BOX 645				NC		27602			
INCLES OF S					1				

Full Name of Contributor THE SPIRIT OF 1776	HE SPIRIT OF 1776						
Mailing Address 3031 A WALTON RD SUITE 201  City PLANCITUMESTANC State Zip Code (Plus 4)						<b>\$</b> 150,000.00	
City PLYMOUTH MEETING	<b>State</b> PA	5	31	2022			
Employer Name N/A		Occupat					
Employer Mailing Address/Principal Place Business	City	State			Zip Code (Plus 4)		
3031 A WALTON RDSUITE 201	PLYMOUTH MEE	ETING PA			19462		

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

**PAGE TOTAL \$** 3,000,000.00

## 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, <b>200</b> 0000		22300				\$	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								
PUT PENNSYLVANIA FIRST	From:	<u>5/3/2022</u> <b>To:</b>	<u>6/6/2022</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidat	:e		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address						<b>\$</b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	ame of Filing Committee or Candidate			Re	porting F	Period				
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor	-1		•			Occupa	tion			
Employer Mailing Address/Principal Place of Business City						Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on So Summary Page, Section 3.	hedule II,	In-Kind	Contributi	ons De	taile	ed				<b>PAGE TOTAL</b> 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
PUT PENNSYLVANIA FIRST			From	<u>5/:</u>	3/2022	То:	<u>6/6/2022</u>
				DATE			
To Whom Paid ELIAS LAW GROUP			мо	DAY	YEAR		
Mailing Address 10 G ST NE STE 600			5	20	2022	<b>\$</b>	5,500.00
City WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20002	Description of Expenditure  LEGAL FEES				
To Whom Paid AL MEDIA			мо	DAY	YEAR		
Mailing Address 222 W ONTARIO ST STE 600			6	3	2022	\$	12,789.00
City CHICAGO	State IL	<b>Zip Code (Plus 4)</b> 60654	Description of Expenditure MEDIA PRODUCTION				
To Whom Paid GREAT AMERICAN MEDIA			МО	DAY	YEAR		
Mailing Address 3050 K ST NW STE 100			5	20	2022	\$	730,292.00
City WASHINGTON	State DC	<b>Zip Code (Plus 4)</b> 20007	Description of Expenditure MEDIA BUY				
To Whom Paid GREAT AMERICAN MEDIA			МО	DAY	YEAR		
Mailing Address 3050 K ST NW STE 100			5	26	2022	\$	750,318.00
City WASHINGTON	State DC	<b>Zip Code (Plus 4)</b> 20007	Description of Expenditure MEDIA BUY				
To Whom Paid GREAT AMERICAN MEDIA			мо	DAY	YEAR		
Mailing Address 3050 K ST NW STE 100			6	3	2022	\$	748,187.00
City WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20007	Description of Expenditure MEDIA BUY				
F. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			<u>'</u>				PAGE TOTAL
Enter Grand Total of Expend	iitures on Page 1, Re	port Cover Page, Item I	J.			\$	2,247,086.00