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 : | i on 2012 | 0419 | | | Repor Filed I | | CANDI | DATE | | СОМІ | MITTEE | ✓ | LOBE | BYIST | |
|--|----------------------------------|-------------|-----------------------|------------|------------------|--------------|--------------|------------|--------|----------|------------------------|----------------|--------------|-----------|----------------|
| | Committee, Candida | ate or L | obbvist: | | | | or Compas | sion Co | omm | ittee | | | | | |
| Street Address: | P.O. Box 3023 | | , | | campa | | | | | | | | | | |
| City: | Elkins Park | | | | | | State: | PA | | | Zip Co | de: 19 | 027 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE | - 2. | 30 D PRIM | | POST- | 3. | | AMENDN REPORT | | Yes | No | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. X | 2ND FRIDA ELECTION | Y PRE | 5. | 30 D ELEC | AY CTION | POST- | 6. | | TERMINATION REPORT? | | Yes | No | \checkmark |
| report type) | ANNUAL REPORT | 7. | Year 2022 | | | | NG METH | | | | PAPER | | \checkmark | DISKE | TTE |
| Name of Office S | Sought by Candidat | te: | | | | | DATE C | OF ELEC | СТІО | N | District Number | Office Code | Par | ty Code | County Code |
| | HE GENERAL ASSE | | | | | | мо | DAY | YE | AR | 4 | STS | DEN | 1 | 46 |
| SENATOR IN T | HE GENERAL ASSE | EMBLI | | | | | 11 | | 8 | 2022 | | (SEE INS | TRUCTIO | ONS FOR (| CODES) |
| | Receipts and | мо | DAY | YEAR | 2 | | мо | DAY | YE | AR | FC | OR OFFIC | E USE | ONLY | |
| Expenditures | s from: | | 6 7 | 2 | 022 1 | Ο | 9 |) 1 | 19 | 2022 | | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | \$ | 5 | | 45,8 | 321.68 | | | | | |
| B. Total Monet | ary Contributions A | And Rec | eipts (From | n Sche | dule I) | \$ | \$ | 2,815.00 | | | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | 4 | \$ | | 48,6 | 536.68 | | | | | |
| D. Total Expen | ditures (From Sche | edule II | I) | | | 4 | \$ | | 18,3 | 89.81 | | | | | |
| E. Ending Cash | Balance (Subtract | t Line D | From Line | C) | | 4 | 5 | | 30,2 | 46.87 | | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From S | chedu | le II) | 4 | \$ | | | 0.00 | 4 | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | Schedule IV | ') | | 4 | \$ | | | 0.00 | | | | | |
| | | | | AFF | IDAV | IT SE | ECTION | | | | | | | | |
| | s a Committee repo | | | | | | | | | | | | | | |
| I swear (or affirm correct and comple |) that this report, incl ete. | uding the | e attached sc | hedules | s filed on | paper | or by elect | tronic me | edium | , are to | the best o | of my knov | vledge | and beli | ef , true |
| Sworn to and subs | cribed before me this day of | 5 | 20 | | | | | | s | ignatur | e of Perso | n Submitt | ing Rep | oort | |
| | Signatu | re | | | | _ | | | | | Prin | ited Name | | | |
| My Commission E | - | | e | | | | | | | | Ema | nil | | | |
| | мо | D | AY | YR | | | | Are | ea Cod | le | Daytin | ne Teleph | one Nu | mber | |
| Part II- If this is | a report of a cand | lidate's | authorized | Comn | nittee, O | Candio | date shall | sign he | ere. | | | | | | |
| I swear (or affirm) No 320) as amendo | that to the best of med. | ny knowle | edge and beli | ef this | political | com | nittee has r | not violat | ted an | y provis | ions of th | e act of Ju | ine 3,19 | 937 (P.L | . 1333, |
| Sworn to and subso | ribed before me this day of | | 20 | | | | | | | s | ignature | of Candida | ite | | |
| | | | | | | _ | | | | | Printe | ed Name | | | |
| My Commission Exp | Signature bires | | | | | _ | | | | | Ema | nil | | | |
| | мо | D | AY | YR | | - | | Area | Code | | D | aytime Te | elephon | e Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

| Detailed Summary Pag | e | | | |
|---|---------------|----------------|-------|------------------|
| Name of Filing Committee or Candidate | Reporting | Period | | |
| Campaign for Compassion Committee | From: | <u>6/7/202</u> | 2 To: | <u>9/19/2022</u> |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reportin | g Period | (1) | \$ | 15.00 |
| 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) | | | \$ | 250.00 |
| TOTAL for the Reportin | g Period | (2) | \$ | 250.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 2,500.00 |
| All Other Contributions (Part D) | | | \$ | 0.00 |
| TOTAL for the Reportin | g Period | (3) | \$ | 2,500.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) |) | | | |
| TOTAL for the Reportin | g Period | (4) | \$ | 50.00 |
| | | | | |
| Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 2,815.00 |
| totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | age, Item B.) |) | ₽ | 2,815.00 |

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 Candida | e | | Repo | orting | Period | | | |
|-------------------------------------|----------------------|------------------|--------|--------|--------|------|----|------------|
| | | | Fron | n: | | То | 1 | |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4 | •) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part A on Sche | dule I, Detailed Sur | nmary Page, Se | ection | 2. | | | \$ | 0.00 |

| Use this Part to it | emize all other 50.01 to \$250.0 | L TO \$250.00 contribution 00 in the repo | s w ortir | ith an 1g peri | aggrega iod. | | | om |
|---|-------------------------------------|---|--------------|-------------------|-----------------|-----------------|----|------------------|
| Name of Filing Committee or Candida | te | | Rep | orting Pe | eriod | | | |
| Campaign for Compassion Committe | e | | Fro | m: | <u>6/7/2</u> | 2 <u>022</u> To |): | <u>9/19/2022</u> |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contributor Barbara Senst | | | | мо | DAY | YEAR | | |
| Mailing Address 315 Woods Rd | | | | | | | \$ | 250.00 |
| City Glenside | State | Zip Code (Plus 4 |) | 8 | 12 | 2022 | | |
| | PA | 190381428 | | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part A on | Schedule I, Detaile | ed Summary Pag | je, Se | ection 2 | • | | \$ | 250.00 |

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>6/</u> | /7/2022 | То: | <u>c</u> | 9/19/2022 |
| | | | | DA | TE | | A | MOUNT |
| Full Name of Contributing Committee AMHP Holdings Corp PAC | | | | мо | DAY | YEAR | \$ | 500.00 |
| Mailing Address 200 Stevens Dr | | | | 6 | 27 | 2022 | | |
| City Philadelphia | State | Zip Code | e (Plus 4) | | | | | |
| | PA | 191131 | 532 | | | | | |
| Full Name of Contributing Committee LAWPAC | | | | мо | DAY | YEAR | \$ | 500.00 |
| Mailing Address 800 N 3rd St Ste 20 | 3 | | | 6 | 27 | 2022 | | 500.00 |
| City Harrisburg | State | Zip Code | e (Plus 4) | | | | | |
| | PA | 171022 | 025 | | | | | |
| Full Name of Contributing Committee Pennsylvania Bankers Public Affairs Con | mittee | | | мо | DAY | YEAR | | |
| Mailing Address 3897 N Front St | | | | | | | \$ | 500.00 |
| City Harrisburg | State | Zip Code | e (Plus 4) | 6 | 27 | 2022 | | |
| , namoburg | PA | 171101 | | | | | | |
| Full Name of Contributing Committee Zeneca Inc. PAC | | | | мо | DAY | YEAR | | 1 000 00 |
| Mailing Address PO Box 15437 | | | | c | 27 | 2022 | \$ | 1,000.00 |
| City Wilmington | State | Zip Code | e (Plus 4) | 6 | 27 | 2022 | | |
| | DE | 198505 | 437 | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Scheo | lule I, Detailed Sun | nmary Pa | ige, Sectio | n 3. | | | \$ | 2,500.00 |

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.)

| | | Rep | orting Pe | riod | | | |
|---------------------|-------------------------|---|--|---|--|---|---|
| | | From | n: | | Т |): | |
| | | | D | ATE | | AM | OUNT |
| | | | мо | DAY | YEAR | \$ | 0.00 |
| | | | | | | | |
| State | Zip Code (Plu | s 4) | | | | | |
| • | | | Occupat | ion | | | |
| ce of Business | City | | | State | | Zip Code | (Plus 4) |
| dule I, Detailed Su | ummary Page | Sectio | on 3. | | | | GE TOTAL 0.00 |
| | State ce of Business | State Zip Code (Plus ce of Business City | State Zip Code (Plus 4) ce of Business City | From: DA DA State Zip Code (Plus 4) Occupat | From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State | From: To DATE DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second of | From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code |

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 | | | Report | ing Perio | d | | | |
|---|-----------------|---------------|---------|-----------|----------------|--------------|----|------------------|
| Campaign for Compassion Committee | | | From: | | <u>6/7/202</u> | <u>2</u> To: | | <u>9/19/2022</u> |
| | | | | D | ATE | | | AMOUNT |
| Full Name Greg Scott PAC | | | | мо | DAY | YEAR | \$ | 25.00 |
| Mailing Address PO Box 376 | 1 | | | 6 | 15 | 202 | 2 | |
| City Norristown | State | Zip Code (| Plus 4) | | | | | |
| | PA | 19404037 | 6 | | | | | |
| Receipt Description Funds transfer | • | ł | | | I | | | |
| Full Name Greg Scott PAC | | | | мо | DAY | YEAR | | 25.00 |
| Mailing Address PO Box 376 | | | | 6 | 15 | 202 | | |
| City Norristown | State | Zip Code (| Plus 4) | 6 | 15 | 202. | 2 | |
| | РА | 19404037 | 6 | | | | | |
| Receipt Description second funds tr | ansfer | ŀ | | | | | | |
| | | | | _ | | | | PAGE TOTAL |
| Enter Grand Total of Part E on Sched | ule I, Detailed | Summary Page, | Section | 4. | | | \$ | 50.00 |

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>6/7/2022</u> то: | <u>9/19/2022</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTOR | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR | T 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, 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 | Period | · | | | |
|--|--------------------|-------------------|-----------|----------|------|-----------|-----------|------------|
| | | | From: | | | То: | | |
| | | | | DATE | | | AMOUNT | |
| 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 | e, | | PAGE TOTA | <u>، ۱</u> |
| | | | | | | \$ | | 0.00 |

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

| Name of Filing Committee or Candidate | | | Re | porting I | Period | | |
|--|-------------------|-------------------|--------|-----------|--------------|--------|---------------------------|
| | | | Fro | om: | | То: | |
| | | | | | DATE | | AMOUNT |
| Full Name of Contributor | | | | мо | DAY | YEAR | |
| Mailing Address | | | | | | | \$ 0.00 |
| City | State | Zip Code(Plus 4) | | | | | |
| Employer of Contributor | | | | Occupa | ation | | · |
| Employer Mailing Address/Principal Plac | e of Business | City | Stat | e Zip | Code(Plus 4) | Descri | ption of Contribution |
| Enter Grand Total of Part G on Sch Summary Page, Section 3. | edule II, In-Kind | d Contributions D | etaile | ed | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reportir | ng Period | | | | |
|---------------------------------------|-------|-------------------|----------------------------|-----------------------|----------|-----|------------------|--|
| Campaign for Compassion Committee | | | From | <u>6/7</u> | 7/2022 | То: | <u>9/19/2022</u> | |
| | | | | DATE | | | AMOUNT | |
| To Whom Paid | | | мо | DAY | YEAR | | | |
| Abington Police Department | | | MO | 2/11 | 12/11 | | | |
| Mailing Address | | | 7 | 27 | 2022 | \$ | 200.00 | |
| City | State | Zip Code (Plus 4) | Descrip Contribu | t ion of Exp o | enditure | | | |
| To Whom Paid Actblue | | - | мо | DAY | YEAR | | | |
| Mailing Address PO Box 441146 | | | 6 | 9 | 2022 | \$ | 6.42 | |
| City West Somerville | State | Zip Code (Plus 4) | Descript | l tion of Exp | enditure | I | | |
| | МА | 021440031 | | ing Fees | | | | |
| To Whom Paid Actblue | | | мо | DAY | YEAR | | | |
| Mailing Address PO Box 441146 | | | 7 | 11 | 2022 | \$ | 1.31 | |
| City West Somerville | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | |
| | МА | 021440031 | Processing Fees | | | | | |
| To Whom Paid Actblue | | | мо | DAY | YEAR | | | |
| Mailing Address PO Box 441146 | | | 8 | 9 | 2022 | \$ | 1.31 | |
| City West Somerville | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | I | | |
| | МА | 021440031 | Process | ing Fees | | | | |
| To Whom Paid Actblue | | | мо | DAY | YEAR | | | |
| Mailing Address PO Box 441146 | | | 9 | 6 | 2022 | \$ | 3.83 | |
| City West Somerville | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | |
| | МА | 021440031 | Process | ing Fees | | | | |
| To Whom Paid Actblue | | | мо | DAY | YEAR | | | |
| Mailing Address PO Box 441146 | | | 9 | 9 | 2022 | \$ | 8.95 | |
| City West Somerville | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | • | | |
| | МА | 021440031 | Process | ing Fees | | | | |

| | | | | | | PA | GE IZ |
|----------------------------------|------------------|-------------------|----------------|------------------|------------------|----|----------|
| To Whom Paid | | | мо | DAY | YEAR | | |
| Black Democratic Women of Mo | ontgomery County | | | | | | |
| Mailing Address PO Box 115 | 3 | | 9 | 6 | 2022 | \$ | 250.00 |
| City Roslyn | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 190019153 | Contrib | ution | | | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| Black Democratic Women of Mo | ontgomery County | | | | | | |
| Mailing Address PO Box 115 | 3 | | 9 | 6 | 2022 | \$ | 308.42 |
| City Roslyn | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 190019153 | Contrib | ution | | | |
| To Whom Paid | · | · | | | | | |
| Cheltenham NAACP | | | мо | DAY | YEAR | | |
| Mailing Address | | | 7 | 6 | 2022 | \$ | 480.00 |
| City | State | Zip Code (Plus 4) | Descrip | l tion of Exp | enditure | | |
| - | | | Contrib | - | | | |
| To Whom Paid | | | | | | | |
| Cheltenham Printing | | | мо | DAY | YEAR | | |
| Mailing Address 518 Ryers A | ve Bldg 2 | | 6 | 13 | 2022 | \$ | 432.48 |
| City Cheltenham | State | Zip Code (Plus 4) | Descrip | l tion of Exp | enditure | | |
| | PA | 190122131 | Operati | ng Fees/Pr | inting | | |
| To Whom Paid | · | · | | DAY | VEAD | | |
| Cheltenham Printing | | | мо | DAY | YEAR | | |
| Mailing Address 518 Ryers A | ve Bldg 2 | | 8 | 3 | 2022 | \$ | 810.90 |
| City Cheltenham | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 190122131 | Operati | ng Fees | | | |
| To Whom Paid | | | | DAY | VEAD | | |
| Democratic Campaign Committ | ee | | мо | DAY | YEAR | | |
| Mailing Address | | | 6 | 23 | 2022 | \$ | 5,000.00 |
| City | State | Zip Code (Plus 4) | Descrip | L tion of Exp | enditure | | |
| | | | Contrib | ution | | | |
| To Whom Paid | | | | | | | |
| Friends Of Joanna McClinton | | | мо | DAY | YEAR | | |
| Mailing Address PO Box 166 | 68 | | 8 | 22 | 2022 | \$ | 250.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| PA 191396668 | | | Contrib | ution | | | |
| | | | | | | | |
| To Whom Paid | | | MO | | VEAD | | |
| To Whom Paid Glitter Services | <i>Г</i> А | | мо | DAY | YEAR | | |
| | | | MO 8 | DAY 24 | YEAR 2022 | \$ | 1,600.00 |
| Glitter Services | | Zip Code (Plus 4) | 8 | | 2022 | \$ | 1,600.00 |

| To Whom Paid | | | мо | DAY | YEAR | | | | |
|--|------------------------|---------------------------------------|---|--|---|----|----------|--|--|
| HiTouch Inc. | | | | | | | | | |
| Mailing Address 30 S 15th St Ste 1500 | | | 6 | 10 | 2022 | \$ | 1,350.00 | | |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| PA 191024826 | | | | Operating fees | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| HiTouch Inc. | | | MO | | TLAK | | | | |
| Mailing Address 30 S 15th St Ste 1500 | | | 8 | 2 | 2022 | \$ | 350.00 | | |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA | 191024826 | Social N | 1edia | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Montgomery County Democratic Committee | | | MO | | TEAK | | | | |
| Mailing Address | | | 7 | 29 | 2022 | \$ | 1,500.00 | | |
| City State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | |
| | | | Contrbu | | | | | | |
| To Whom Paid | | · | | DAY | VEAD | | | | |
| Montgomery County Democrat | tic Women's Leadership | Initiative | мо | DAY | YEAR | | | | |
| Mailing Address 701 Thatch | ner Ln | | 8 | 24 | 2022 | \$ | 100.00 | | |
| City Hatfield | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | 194402200 | Contribution | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Wallace Q. Weaver | | | 110 | | | | | | |
| Mailing Address 7900 Forrest Ave | | | | | | | | | |
| Mailing Address 7900 Forre | st Ave | | 6 | 15 | 2022 | \$ | 1,000.00 | | |
| Mailing Address 7900 Forre City Philadelphia | st Ave State | Zip Code (Plus 4) | | 15 tion of Exp | | \$ | 1,000.00 | | |
| | | Zip Code (Plus 4) 191502107 | | tion of Exp | | \$ | 1,000.00 | | |
| | State | | Descrip Stipend | tion of Exp | enditure | \$ | 1,000.00 | | |
| City Philadelphia | State | | Descrip | tion of Exp | | \$ | 1,000.00 | | |
| City Philadelphia To Whom Paid | State | | Descrip Stipend | tion of Exp | enditure | \$ | | | |
| City Philadelphia To Whom Paid Santander Bank Fees | State | | Descrip Stipend MO | tion of Exp | enditure YEAR 2022 | | | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address | State PA | 191502107 | Descrip Stipend MO 7 Descrip | DAY | enditure YEAR 2022 | | 23.16 | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address | State PA | 191502107 | MO Descrip Stipend MO 7 Descrip Operati | DAY 7 tion of Exp 7 tion of Exp | enditure YEAR 2022 enditure | | | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City | State PA | 191502107 | Descrip Stipend MO 7 Descrip | DAY 7 tion of Exp | enditure YEAR 2022 | | | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid | State PA | 191502107 | MO Descrip Stipend MO 7 Descrip Operati | DAY 7 tion of Exp 7 tion of Exp | enditure YEAR 2022 enditure | | 23.16 | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees | State PA | 191502107 | Descrip Stipend MO 7 Descrip Operati MO 8 | tion of Exp DAY 7 tion of Exp ng Fees DAY | enditure YEAR 2022 enditure YEAR 2022 | \$ | 23.16 | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees Mailing Address | State PA State | 191502107 Zip Code (Plus 4) | Descrip Stipend MO Operati MO MO Descrip Operati MO B Descrip Descrip | tion of Exp DAY 7 tion of Exp ng Fees DAY 1 | enditure YEAR 2022 enditure YEAR 2022 | \$ | 23.16 | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees Mailing Address City | State PA State | 191502107 Zip Code (Plus 4) | Descrip Stipend MO Operati MO Operati Operati Operati | tion of Exp DAY 7 tion of Exp ng Fees DAY 1 tion of Exp ng Fees | enditure YEAR 2022 enditure YEAR 2022 enditure | \$ | 23.16 | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees Mailing Address City | State PA State | 191502107 Zip Code (Plus 4) | Descrip Stipend MO Operati MO MO Descrip Operati MO B Descrip Descrip | tion of Exp DAY 7 tion of Exp ng Fees DAY 1 tion of Exp | enditure YEAR 2022 enditure YEAR 2022 | \$ | 23.16 | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid | State PA State | 191502107 Zip Code (Plus 4) | Descrip Stipend MO Operati MO Operati Operati Operati | tion of Exp DAY 7 tion of Exp ng Fees DAY 1 tion of Exp ng Fees | enditure YEAR 2022 enditure YEAR 2022 enditure | \$ | 23.16 | | |
| City Philadelphia To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees | State PA State | 191502107 Zip Code (Plus 4) | Descrip Stipend MO 7 Descrip Operati MO 8 Descrip Operati MO 9 | tion of Exp DAY 7 tion of Exp ng Fees DAY 1 tion of Exp ng Fees DAY | enditure YEAR 2022 enditure YEAR 2022 enditure YEAR 2022 enditure | \$ | | | |

| | | | | | | | 1 4 | GL 14 | | |
|--|-------------------|-------|-------------------|--|----------------------------|------------|----------|----------|--|--|
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Shapiro For Pennsylvania | | | | | | | | | | |
| Mailing Address | PO Box 22635 | | | 9 | 7 | \$ | 1,000.00 | | | |
| City Philadel | phia | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| PA 191102635 | | | | Contribution | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| ShopRite | | | | | | | | | | |
| Mailing Address 2471 W Cheltenham Ave | | | 6 | 27 | 2022 | \$ | 119.70 | | | |
| City Wyncote | 9 | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | РА | 190952959 | Operati | ng Fees/Pe | erishables | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Wallace Weave | r | | | MO | | TEAR | | | | |
| Mailing Address 1808 Manor Dr Apt A | | | 7 | 18 | 2022 | \$ | 1,000.00 | | | |
| City Union | | State | Zip Code (Plus 4) | 4) Description of Expenditure Stipend | | | | | | |
| | | NJ | 070834421 | | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Wallace Weave | r | | | МО | | | | | | |
| Mailing Address | 1808 Manor Dr Apt | A | | 8 | 16 | 2022 | \$ | 1,000.00 | | |
| City Union State Zip Code (Plus 4) | | | | | Description of Expenditure | | | | | |
| | | NJ | 070834421 | Stipend | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Wallace Weaver | | | | | | | | | | |
| Mailing Address 1808 Manor Dr Apt A | | | 9 | 16 | 2022 | \$ | 1,000.00 | | | |
| City Union | | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | NJ | 070834421 | Stipend | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| ZEIGLER FOR A | BETTER TOMORROW | | | | | | | | | |
| Mailing Address | PO Box 518 | | | 9 | 19 | 2022 | \$ | 500.00 | | |
| City Millheim | 1 | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | РА | 168540518 | Contribution | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| ZOOM USA | | | | no | | | | | | |
| Mailing Address | | | 7 | 1 | 2022 | \$ | 15.89 | | | |
| City | | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | | | Operati | ng Fees | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| ZOOM USA | | | | | | | | | | |
| Mailing Address | | | 8 | 1 | 2022 | \$ | 15.89 | | | |
| Mailing Address | | | | | | | | | | |
| Mailing Address City | | State | Zip Code (Plus 4) | Descrip | l tion of Exp | enditure | | | | |

| To Whom Paid | | | мо | DAY | YEAR | | |
|---|-------|-------------------|----------------------------|---------|------|----|------------|
| ZOOM USA | | | 110 | | | | |
| Mailing Address | | | 9 | 1 | 2022 | \$ | 15.89 |
| City | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | | | Operati | ng Fees | | | |
| | | | | | | | PAGE TOTAL |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | \$ | 18,389.81 |
| | | | | | | | |
| | | | | | | | |
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