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 : | on | 20120 | 0419 | | | Repo | | / : | CAN | DIE | DATE | | COMN | 4ITTEE | ✓ | LOB | BYIS | ST | |
|---|----------------------|-------------------|-------------|-----------------------|----------|---------|-------|----------------|-----------------|-------|----------|-------|------------|--------------------|----------------|----------|-------|------------|------------|
| Name of Filing C | Committee | e, Candida | ite or Lo | obbyist: | | Camp | oaig | n for | Comp | ass | sion Co | omm | ittee | | | | | | |
| Street Address: | P.O. | Box 3023 | 4 | | | | | | | | | | | | | | | | |
| City: | Elkins | s Park | | | | | | | State: | | PA | | | Zip Cod | de: 19 | 027 | _ | | |
| TYPE OF REPORT | 6TH TUES PRE-PRIM | | 1. | 2ND FRIDA PRIMARY | Y PRE- | 2. | | 30 DA PRIMA | | P | OST- | 3. | | AMENDM REPORT | | Yes | | No | / |
| (place X to the right of | 6TH TUES PRE-ELEC | | 4. X | 2ND FRIDA ELECTION | Y PRE | - 5. | | 30 DA | | P | OST- | 6. | | TERMINA REPORT | | Yes | | No | \ |
| report type) | ANNUAL | REPORT | 7. | Year 2022 | | | | | NG MET CHECK | | | | | PAPER | | \ | DIS | KETTE | |
| Name of Office S | ought by | Candidat | e: | - | | | | | DATE | OI | ELEC | CTIC | N | District Number | Office Code | Pa | rty C | ode Cou | |
| CENIATOD IN TI | IE CENE | DAL ACCE | MDLV | | | | | | МО | | DAY | YI | EAR | 4 | STS | DE | М | 46 | |
| SENATOR IN TH | TE GENER | KAL ASSE | INDLY | | | | | | | 11 | | 8 | 2022 | | (SEE IN | STRUCT | ONS F | OR CODE | S) |
| Summary of | | and | МО | DAY | YEAR | | | | МО | | DAY | YI | EAR | FO | R OFFI | CE USE | ON | LY | |
| Expenditures | rrom: | | | 6 7 | 20 | 022 | TC |) | | 9 | 1 | L9 | 2022 | | | | | | |
| A. Amount Bro | ught Forw | vard From | Last R | eport | | | | \$ | | | | 45,8 | 321.68 | | | | | | |
| B. Total Moneta | ary Contri | ibutions <i>A</i> | and Rec | eipts (Fron | n Sche | dule 1 | [) | \$ | | | | 2,8 | 315.00 | | | | | | |
| C. Total Funds | Available | (Sum Of | Lines A | and B) | | | | \$ | | | | 48,6 | 636.68 | | | | | | |
| D. Total Expend | ditures (F | rom Sche | dule II | I) | | | | \$ | | | | 18,3 | 389.81 | | | | | | |
| E. Ending Cash | Balance | (Subtract | Line D | From Line | C) | | | \$ | | | | 30,2 | 246.87 | | | | | | |
| F. Value Of In- | Kind Cont | ributions | Receive | ed (From S | chedul | e II) | | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Ob | ligations | (From S | Schedule IV | /) | | | \$ | | | | | 0.00 | | | | | | |
| | | | | | | | | | CTIO | | | | | | | | | | |
| PART I - If this is | | • | • | _ | | | | | | | | | | | £ | | | h-1:-6 4 | |
| I swear (or affirm) correct and comple | | ерогі, іпсіі | Jaing the | attached sc | nedules | riiea | оп р | арег | ог ву ен | ectr | onic me | earum | , are to t | ne best o | r my kno | wieage | anu | beller , l | .rue |
| Sworn to and subs | cribed befo | ore me this | | 20 | | | | | | - | | S | Signature | of Perso | n Submit | ting Re | port | | |
| | | Signatur | e | | | | | | | - | | | | Prin | ted Name | • | | | _ |
| My Commission Ex | cpires | | | | | | | | | - | | | | Ema | il | | | | |
| | Ī | мо | D/ | AY | YR | | | | | | Are | a Coc | ie | Daytim | e Teleph | one Nu | ımbe | r | |
| Part II- If this is | a report | of a cand | idate's | authorized | Comm | ittee | , Ca | ndid | ate sha | all s | ign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | e best of m | y knowle | edge and beli | ief this | politio | cal c | omm | ittee has | s no | t violat | ed an | ıy provisi | ions of th | e act of J | une 3,1 | 937 | (P.L. 13 | 33, |
| Sworn to and subsc | | e me this | | | | | | | | | | | Si | ignature o | of Candid | ate | | | — |
| | day of | | | | | | | | | | | | | Printe | d Name | | | | - |
| | S | Signature | | | | | | | | _ | | | | | | | | | |
| My Commission Exp | ires | | | | | | | | | | | | | Ema | il | | | | |
| | | МО | D | AY | YR | | | | | , | Area | Code | | D | aytime T | elepho | ne Nu | ımber | _ |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| , - | | | | |
|--|-----------|----------------|--------------|-----------|
| Name of Filing Committee or Candidate | Reporting | J Period | | |
| Campaign for Compassion Committee | From: | <u>6/7/202</u> | <u>2</u> To: | 9/19/2022 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting |) 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 Reporting |) 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 Reporting | Period | (3) | \$ | 2,500.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting |) Period | (4) | \$ | 50.00 |
| 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 | | | \$ | 2,815.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | his Part to itemize onl with an aggregate val | - | | | - | | | |
|---------------------------|--|-------------------|-----|---------|--------|------|----|------------|
| Name of Filing Comm | ittee or Candidate | | Re | porting | Period | | | |
| | | | Fre | om: | | То | : | |
| | | 1 | | | DATE | | | AMOUNT |
| Full Name of Contribution | ng Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) |) | | | | | |
| | • | • | | | • | • | | PAGE TOTAL |

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

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

 Campaign for Compassion Committee
 From: 6/7/2022
 To: 9/19/2022

DATE AMOUNT

| Full Name of 0 Barbara Sens | | | | МО | DAY | YEAR | |
|--------------------------------|-----------------|--------------------|---------------------------------------|----|-----|------|------------------|
| Mailing Addre | ss 315 Woods Rd | | | | | | \$ 250.00 |
| City Glens | de | State PA | Zip Code (Plus 4) 190381428 | 8 | 12 | 2022 | |

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

PAGE TOTAL \$ 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: | | 9/19/2022 |
| | | | | DA | TE | | | AMOUNT |
| Full Name of Contributing Committee AMHP Holdings Corp PAC | | | | МО | DAY | YEAR | | |
| Mailing Address 200 Stevens Dr | | | | | | | \$ | 500.00 |
| City Philadelphia | State | Zip Code | (Plus 4) | 6 | 27 | 2022 | : | |
| Типачения | PA | 191131 | 532 | | | | | |
| Full Name of Contributing Committee LAWPAC | | | | МО | DAY | YEAR | | |
| Mailing Address 800 N 3rd St Ste 20 | | | | 6 | 27 | 2022 | \$ | 500.00 |
| City Harrisburg | State PA | Zip Code 171022 | e (Plus 4) 025 | | 27 | 2022 | | |
| Full Name of Contributing Committee Pennsylvania Bankers Public Affairs Cor | mmittee | | | МО | DAY | YEAR | | |
| Mailing Address 3897 N Front St | | | | | | | \$ | 500.00 |
| City Harrisburg | State | Zip Code | e (Plus 4) | 6 | 27 | 2022 | ! | |
| g | PA | 171101 | 535 | | | | | |
| Full Name of Contributing Committee Zeneca Inc. PAC | | | | МО | DAY | YEAR | | |
| Mailing Address PO Box 15437 | | | | | | | \$ | 1,000.00 |
| City Wilmington | State | Zip Code | e (Plus 4) | 6 | 27 | 2022 | : | |
| | DE | 198505 | 437 | | | | | |
| Enter Grand Total of Part Con School | dula I. Datailad Sum | mary D | ago Soctio | n 2 | | | | PAGE TOTAL |

2,500.00

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.)

| Name of Filing Committee or Candid | date | | | Rep | orting Pe | riod | | | |
|--|--------------------|----------|---------------|---------|-----------|-------|------|---------|-------------|
| | | | | Fror | m: | | To |): | |
| | | | | | D | ATE | | A | MOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | Zi | ip Code (Plus | 5 4) | | | | | |
| Employer Name | | | | | Occupa | tion | | | |
| Employer Mailing Address/Principal Business | Place of | | City | | • | State | | Zip Cod | le (Plus 4) |
| Enter Grand Total of Part C on S | Schedule I, Detail | led Sumr | mary Page, | Section | on 3. | | | P | O.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 Candidate | | | Report | ing Perio | d | | | |
|---------------------------------------|---------|------------|---------|-----------|----------------|--------------|-----------|-------|
| Campaign for Compassion Committee | | | From: | | <u>6/7/202</u> | <u>2</u> To: | 9/19/20 | 22 |
| | | | | D | ATE | | AMOUNT | |
| Full Name | | | | | DAY | VEAD | | |
| Greg Scott PAC | | | | МО | DAY | YEAR | | |
| Mailing Address PO Box 376 | | | | | | | - \$ | 25.00 |
| City Norristown | State | Zip Code (| Plus 4) | 6 | 15 | 2022 | | |
| | PA | 1940403 | 76 | | | | | |
| Receipt Description Funds transfer | | • | | | | | | |
| Full Name | | | | | | \ | | |
| Greg Scott PAC | | | | МО | DAY | YEAR | | |
| Mailing Address PO Box 376 | | | | _ | | | \$ | 25.00 |
| City Norristown | State | Zip Code (| Plus 4) | 6 | 15 | 2022 | | |
| | PA | 1940403 | 76 | | | | | |
| Receipt Description second funds t | ransfer | • | | | | | • | |
| | | | | | | | | |

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$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 Perio | od | |
|---|-----------------|----------------------------|-----------|
| Campaign for Compassion Committee | From: | <u>6/7/2022</u> To: | 9/19/2022 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | PER CONTRIBUTOR | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR | TF) | | |
| 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 Candida | te | | Reporting | g Period | | | |
|---|-------------------|-----------------------|-----------|----------|------|-----------|------------|
| | | | From: | | | To: | |
| | | | | 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 Sci Section 2. | nedule II, In-Kir | nd Contributions Deta | iled Sum | mary Pag | ge, | | PAGE TOTAL |
| occuon 2. | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

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

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or C | | | Penortii | ng Period | | | |
|--------------------------------|-----------------|-------------------|-------------|--------------|--|-----------|-----------|
| | | | | | | | |
| Campaign for Compassion Co | mmittee | | From | <u>6/7</u> | 7/2022 | То: | 9/19/2022 |
| | | | | DATE | | | AMOUNT |
| To Whom Paid | | | мо | DAY | YEAR | | |
| Abington Police Department | | | | | | | |
| Mailing Address | | | 7 | 27 | 2022 | \$ | 200.00 |
| City | State | Zip Code (Plus 4) | Descrin | tion of Exp | enditure | | |
| · | | | Contrib | | 70.14.1 | | |
| To Whom Paid | • | <u> </u> | мо | DAY | YEAR | | |
| Actblue | | | 1-10 | | I EAL | | |
| Mailing Address PO Box 44: | 1146 | | 6 | 9 | 2022 | \$ | 6.42 |
| City West Somerville | State | Zip Code (Plus 4) | Descrip | otion of Exp | enditure | | |
| | MA | 021440031 | Process | sing Fees | | | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| Actblue | | | | | | | |
| Mailing Address PO Box 443 | 1146 | | 7 | 11 | 2022 | \$ | 1.31 |
| City West Somerville | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | MA | 021440031 | Process | sing Fees | | | |
| To Whom Paid | | | МО | DAY | YEAR | | |
| Actblue | | | 1-10 | | I EAL | | |
| Mailing Address PO Box 44: | 1146 | | 8 | 9 | 2022 | \$ | 1.31 |
| City West Somerville | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | <u> </u> | |
| | MA | 021440031 | 1 | sing Fees | | | |
| | | | | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | |
| To Whom Paid | | | MO | ΙΙ)ΔΥ | I Y F A R | | |
| To Whom Paid Actblue | | | МО | DAY | YEAR | | |
| | 1146 | | MO 9 | 6 | 2022 | \$ | 3.83 |
| Actblue | 1146 State | Zip Code (Plus 4) | 9 | | 2022 | | 3.83 |

021440031

Processing Fees

MA

| To Whom Paid Actblue | | | МО | DAY | YEAR | |
|---|--------------------|---------------------------------------|--|--|---|--------------|
| Mailing Address PO Box 44114 | 6 | | 9 | 9 | 2022 | \$ 8.95 |
| City West Somerville | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | |
| West some vine | MA | 021440031 | 1 | sing Fees | | |
| To Whom Paid Black Democratic Women of Mont | gomery County | | МО | DAY | YEAR | |
| Mailing Address PO Box 1153 | | | 9 | 6 | 2022 | \$ 250.00 |
| City Roslyn | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | |
| . Kosiyii | PA | 190019153 | Contrib | | | |
| To Whom Paid Black Democratic Women of Mont | gomery County | | МО | DAY | YEAR | |
| Mailing Address PO Box 1153 | | | 9 | 6 | 2022 | \$ 308.42 |
| City Roslyn | State PA | Zip Code (Plus 4) 190019153 | Descrip Contrib | otion of Exp ution | enditure | |
| | | | | | | |
| To Whom Paid Cheltenham NAACP | | | МО | DAY | YEAR | |
| | | | MO 7 | DAY 6 | YEAR 2022 | \$ 480.00 |
| Cheltenham NAACP | State | Zip Code (Plus 4) | 7 | 6 otion of Exp | 2022 | 480.00 |
| Cheltenham NAACP Mailing Address | State | Zip Code (Plus 4) | 7 Descrip | 6 otion of Exp | 2022 | 480.00 |
| Cheltenham NAACP Mailing Address City To Whom Paid | | Zip Code (Plus 4) | 7 Descrip Contrib | 6 otion of Exp ution | 2022 penditure | 480.00 |
| Cheltenham NAACP Mailing Address City To Whom Paid Cheltenham Printing Mailing Address 518 Ryers Ave | | Zip Code (Plus 4) Zip Code (Plus 4) | 7 Descrip Contrib MO 6 | 6 otion of Expution | 2022 penditure YEAR 2022 | \$ |
| Cheltenham NAACP Mailing Address City To Whom Paid Cheltenham Printing Mailing Address 518 Ryers Ave | e Bldg 2 | | 7 Descrip Contrib MO 6 Descrip | 6 Day Day | 2022 penditure YEAR 2022 penditure | \$ |
| Cheltenham NAACP Mailing Address City To Whom Paid Cheltenham Printing Mailing Address 518 Ryers Ave | e Bldg 2 | Zip Code (Plus 4) | 7 Descrip Contrib MO 6 Descrip | 6 otion of Expution DAY 13 | 2022 penditure YEAR 2022 penditure | \$ |
| Cheltenham NAACP Mailing Address City To Whom Paid Cheltenham Printing Mailing Address 518 Ryers Ave City Cheltenham To Whom Paid | e Bldg 2 State PA | Zip Code (Plus 4) | 7 Description MO 6 Description Operation | DAY 13 btion of Explanation of Exp | 2022 Penditure YEAR 2022 Penditure rinting | \$ |
| Cheltenham NAACP Mailing Address City To Whom Paid Cheltenham Printing Mailing Address 518 Ryers Ave City Cheltenham To Whom Paid Cheltenham Printing | e Bldg 2 State PA | Zip Code (Plus 4) | 7 Description MO 6 Description Operation 8 | DAY 13 ption of Expution DAY | 2022 Penditure YEAR 2022 Penditure rinting YEAR 2022 | \$ 432.48 |

| | | | | | | PAGE | 13 | |
|--|--------------------|---------------------------------------|---|--|-----------|------|----------|--|
| To Whom Paid Democratic Campaign Committe | мо | DAY | YEAR | | | | | |
| Mailing Address | 6 | 23 | 2022 | \$ | 5,000.00 | | | |
| City State Zip Code (Plus 4) | | | | otion of Exp oution | penditure | | | |
| To Whom Paid Friends Of Joanna McClinton | МО | DAY | YEAR | | | | | |
| Mailing Address PO Box 16668 | | | | 22 | 2022 | \$ | 250.00 | |
| City Philadelphia State Zip Code (Plus 4) PA 191396668 | | | | Description of Expenditure Contribution | | | | |
| To Whom Paid Glitter Services | МО | DAY | YEAR | | | | | |
| Mailing Address 1645 S Lawre | 8 | 24 | 2022 | \$ | 1,600.00 | | | |
| City Philadelphia | State PA | Zip Code (Plus 4) 191481310 | Description of Expenditure Contribution | | | | | |
| To Whom Paid HiTouch Inc. | | | | DAY | YEAR | | | |
| Mailing Address 30 S 15th St Ste 1500 | | | | 10 | 2022 | \$ | 1,350.00 | |
| CityPhiladelphiaStateZip Code (Plus 4)PA191024826 | | | 1 | otion of Exp ing fees | penditure | | | |
| To Whom Paid HiTouch Inc. | | | | DAY | YEAR | | | |
| Mailing Address 30 S 15th St Ste 1500 | | | | 2 | 2022 | \$ | 350.00 | |
| CityPhiladelphiaStateZip Code (Plus 4)PA191024826 | | | | otion of Exp Media | penditure | | | |
| To Whom Paid Montgomery County Democratic Committee | | | | DAY | YEAR | | | |
| Mailing Address | | | | 29 | 2022 | \$ | 1,500.00 | |
| City State Zip Code (Plus 4) | | | | tion of Exp | | 1 | | |

| To Whom Paid Montgomery County Democratic Wome | МО | DAY | YEAR | | | | | |
|---|-------|--------------------------------------|---|---|--|--------|--|----------|
| Mailing Address 701 Thatcher Ln | 8 | 24 | 2022 | \$ | | 100.00 | | |
| City Hatfield State Zip Code (Plus 4) PA 194402200 | | | | otion of Exp ution | enditure | | | |
| To Whom Paid Wallace Q. Weaver | МО | DAY | YEAR | | | | | |
| Mailing Address 7900 Forrest Ave | | | | 15 | 2022 | \$ | | 1,000.00 |
| City Philadelphia State PA 2ip Code (Plus 4) 191502107 | | | | Description of Expenditure Stipend | | | | |
| To Whom Paid Santander Bank Fees | МО | DAY | YEAR | | | | | |
| Mailing Address | 7 | 7 | 2022 | \$ | | 23.16 | | |
| City State Zip Code (Plus 4) | | | Description of Expenditure Operating Fees | | | | | |
| To Whom Paid Santander Bank Fees | | | | | | | | |
| | | | МО | DAY | YEAR | | | |
| | | | MO 8 | DAY 1 | YEAR 2022 | \$ | | 23.16 |
| Santander Bank Fees | State | Zip Code (Plus 4) | 8 Descrip | | 2022 | | | 23.16 |
| Santander Bank Fees Mailing Address | State | Zip Code (Plus 4) | 8 Descrip | 1 otion of Exp | 2022 | | | 23.16 |
| Santander Bank Fees Mailing Address City To Whom Paid | State | Zip Code (Plus 4) | 8 Descrip Operati | 1 Ition of Exp ng Fees | 2022 penditure | | | 23.16 |
| Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees | State | Zip Code (Plus 4) Zip Code (Plus 4) | 8 Descrip Operati MO | 1 tion of Exp ng Fees DAY 2 | 2022 penditure YEAR 2022 | \$ | | |
| Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees Mailing Address | | | 8 Descrip Operati MO 9 Descrip | 1 tion of Exp ng Fees DAY 2 | 2022 penditure YEAR 2022 | \$ | | |
| Santander Bank Fees Mailing Address City To Whom Paid Santander Bank Fees Mailing Address City To Whom Paid | | | MO 9 Descrip Bank Fe | 1 tion of Exp ng Fees DAY 2 tion of Exp ees | 2022 Penditure YEAR 2022 Penditure | \$ | | |

| | | | | | | | | PAGE | 15 | |
|--|--|------------------|---|---|--|--|----|------|----------|--|
| To Whom Paid ShopRite | | | | | DAY | YEAR | | | | |
| Mailing Address 2471 W Cheltenham Ave | | | | 6 | 27 | 2022 | \$ | | 119.70 | |
| City Wyncote | : | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| PA 190952959 | | | | Operati | ing Fees/Pe | erishables | 5 | | | |
| To Whom Paid Wallace Weaver | | | | | DAY | YEAR | | | | |
| Mailing Address 1808 Manor Dr Apt A | | | | 7 | 18 | 2022 | \$ | | 1,000.00 | |
| City Union State Zip Code (Plus 4) | | | | | tion of Exp | enditure | | | | |
| | | NJ | 070834421 | Stipend | | | | | | |
| To Whom Paid Wallace Weaver | | | | МО | DAY | YEAR | | | | |
| Mailing Address | Mailing Address 1808 Manor Dr Apt A | | | | 16 | 2022 | \$ | | 1,000.00 | |
| City Union State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | | |
| | NJ 070834421 | | | | Stipend | | | | | |
| | | | | | | | | | | |
| To Whom Paid Wallace Weaver | | 1 | | МО | DAY | YEAR | | | | |
| | 1808 Manor Dr Apt | | | | | YEAR 2022 | \$ | | 1,000.00 | |
| Wallace Weaver | | | Zip Code (Plus 4) | MO 9 | DAY | 2022 | | | 1,000.00 | |
| Wallace Weaver | | A | | MO 9 | DAY 16 ption of Exp | 2022 | | | 1,000.00 | |
| Wallace Weaver Mailing Address City Union To Whom Paid | | A State | Zip Code (Plus 4) | MO 9 Descrip | DAY 16 ption of Exp | 2022 | | | 1,000.00 | |
| Wallace Weaver Mailing Address City Union To Whom Paid | 1808 Manor Dr Apt | A State | Zip Code (Plus 4) | MO 9 Description Stipeno | DAY 16 ption of Exp | 2022 penditure | | | 1,000.00 | |
| Mailing Address City Union To Whom Paid ZEIGLER FOR A | 1808 Manor Dr Apt BETTER TOMORROW PO Box 518 | A State | Zip Code (Plus 4) | MO 9 Descrip Stipend MO | DAY 16 Ition of Exp | 2022 penditure YEAR 2022 | \$ | | | |
| Wallace Weaver Mailing Address City Union To Whom Paid ZEIGLER FOR A Mailing Address | 1808 Manor Dr Apt BETTER TOMORROW PO Box 518 | A State NJ | Zip Code (Plus 4) 070834421 | MO 9 Descrip Stipend MO | DAY 16 DAY DAY 19 ption of Exp | 2022 penditure YEAR 2022 | \$ | | | |
| Wallace Weaver Mailing Address City Union To Whom Paid ZEIGLER FOR A Mailing Address | 1808 Manor Dr Apt BETTER TOMORROW PO Box 518 | A State NJ State | Zip Code (Plus 4) 070834421 Zip Code (Plus 4) | MO 9 Descrip Stipend MO 9 Descrip | DAY 16 DAY DAY 19 ption of Exp | 2022 penditure YEAR 2022 | \$ | | | |
| Wallace Weaver Mailing Address City Union To Whom Paid ZEIGLER FOR A Mailing Address City Millheim To Whom Paid | 1808 Manor Dr Apt BETTER TOMORROW PO Box 518 | A State NJ State | Zip Code (Plus 4) 070834421 Zip Code (Plus 4) | MO 9 Description MO 9 Description Gontrib | DAY 16 DAY 19 ption of Expution | 2022 Penditure YEAR 2022 Penditure | \$ | | | |
| Wallace Weaver Mailing Address City Union To Whom Paid ZEIGLER FOR A Mailing Address City Millheim To Whom Paid ZOOM USA | 1808 Manor Dr Apt BETTER TOMORROW PO Box 518 | A State NJ State | Zip Code (Plus 4) 070834421 Zip Code (Plus 4) | MO 9 Description MO 9 Description MO 7 | DAY 16 DAY 19 ption of Expution DAY | 2022 Penditure YEAR 2022 Penditure YEAR 2022 | \$ | | 500.00 | |

| To Whom Paid ZOOM USA | | | мо | DAY | YEAR | | | | |
|---|-------------------------|-------------------------|----|---|----------|----|------------|--|--|
| Mailing Address | | | 8 | 1 | 2022 | \$ | 15.89 | | |
| City State Zip Code (Plus 4) | | | | Description of Expenditure Operating Fess | | | | | |
| To Whom Paid ZOOM USA | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | 9 | 1 | 2022 | \$ | 15.89 | | |
| City | State | Zip Code (Plus 4) | 1 | otion of Exp | enditure | | | | |
| Enter Grand Total of Evne | anditures on Page 1. Pe | anort Cover Page Item D | | | | | PAGE TOTAL | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | \$ | 18,389.81 | | |