### **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 20	210246			Report		CANDI	DATE		соми	MITTEE	<b>√</b>	LOBE	BYIST		
Name of Filing C	Committee, Cand	lidate or L	obbyist:	F	PRESCO	DD, PA	UL FRIE	NDS O	F							
Street Address:	5118 CATH	ARINE ST	REET													
City:	PHILADELP	HIA					State:	PA			Zip Cod	de: 19	9143			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE-	- 5. <b>X</b>	30 DA		POST-	6.		TERMINA REPORT		Yes	No	Y	
report type)	ANNUAL REPO	<b>RT</b> 7.	<b>Year</b> 2022				NG METH				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candi	date:	•		-		DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	,
							МО	DAY	YE	AR	8	STS	DEN	1	51	
SENATOR IN TH	HE GENERAL AS	SSEMBLY					11		8	2022	┢	(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY YE	AR			МО	DAY	YI	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		6 7	20	22 <b>T</b>	0	10		24	2022						
A. Amount Bro	ught Forward Fi	om Last R	eport			\$	_		12,3	341.26						
B. Total Moneta	ary Contribution	s And Rec	eipts (From So	hed	lule I)	\$				18.09						
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			12,3	359.35						
D. Total Expend	ditures (From S	chedule II	I)			\$			9,0	)44.53						
E. Ending Cash	Balance (Subtr	act Line D	From Line C)			\$			3,3	14.82						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sche	dule	e II)	\$				0.00						
G. Unpaid Debt	ts And Obligatio	ns (From S	Schedule IV)			\$				0.00			•			
			А	FFI	DAVI	T SE	CTION									
PART I - If this is	s a Committee r	eport, trea	surer sign her	e. I	f this is	a Car	ndidate r	eport, o	candi	date sig	gn here.					
I swear (or affirm) correct and comple		ncluding the	e attached sched	ules	filed on	paper	or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , true	3
Sworn to and subs	cribed before me t day of	his	20						S	Signature	e of Perso	n Submit	ting Rep	ort		
	Signa	nture				<u>-</u> -					Prin	ted Name	e			-
My Commission Ex	cpires										Ema	il				•
	мо	D	AY	YR				Are	ea Coc	le	Daytim	ie Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ındidate's	authorized Co	mm	ittee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and belief t	his p	political	comm	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	1333,	l
Sworn to and subsc		nis								s	ignature o	of Candid	ate			•
	day of —— ———					_					Printe	ed Name				۱
	Signatu	·e				-										
My Commission Exp	ires										Ema	il				
	МО	D	AY	YR		_		Area	Code		D	aytime T	elephon	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

-				
Name of Filing Committee or Candidate	Reporting	J Period		
PRESCOD, PAUL FRIENDS OF	From:	<u>6/7/202</u>	<u>2</u> To:	10/24/2022
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)			\$	18.09
TOTAL for the Reporting	Period	(2)	\$	18.09
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)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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			\$	18.09

#### **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	e	R	eporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### 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

 PRESCOD, PAUL FRIENDS OF
 From:
 6/7/2022
 To:
 10/24/2022

DATE AMOUNT

Full Name of Contributor Celia Bueb			МО	DAY	YEAR	
Mailing Address 4539 Tho	ompson St.					\$ 15.00
<b>City</b> Oakland	State	Zip Code (Plus 4)	6	8	2022	
	CA	94601				
Full Name of Contributor			мо	DAY	YEAR	
Courtney Rizzo			1-10	DAT	ILAK	
Mailing Address 8 Shadys	side Lane					\$ 3.09
City Pittsburgh	State	Zip Code (Plus 4)	6	23	2022	
	РΔ	15232				

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

**PAGE TOTAL \$** 18.09

#### **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		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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.)

Name of Filing Committee or Candidate	2			Rep	orting Pe	riod			
				Fron	n:		To	<b>)</b> :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	<b>(4)</b>					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE TOTAL
								\$	0.00

## 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 Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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		
PRESCOD, PAUL FRIENDS OF	From:	<u>6/7/2022</u> <b>To:</b>	<u>10/24/2022</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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Car	ndidate		Reportin	g Period				
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
PRESCOD, PAUL FRIENDS OF	From	6/7/2022	То:	<u>10/24/2022</u>

	•					
			DATE			AMOUNT
		МО	DAY	YEAR		
, Suite 11		6	9	2022	\$	759.17
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
MA	02138	Fundrai	sing fee			
		MO	DAY	VEAD		
		1-10		ILAK		
		7	1	2022	\$	38.75
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA	19104	Bank fe	е			
		МО	DAY	VEAD		
		140		ILAK		
, Suite 11		7	11	2022	\$	4.31
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
MA	02138	Fundrai	sing fee			
		MO	DAY	VEAD		
		МО	DAT	TEAR		
		7	12	2022	\$	5,000.00
State						
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA	<b>Zip Code (Plus 4)</b> 19143	<b>Descrip</b> Comper		enditure		
		Comper	sation			
				YEAR		
		Comper	sation		\$	600.00
PA		MO 7	DAY	<b>YEAR</b> 2022	\$	600.00
PA na St.	19143	MO 7 Descript	DAY 15	YEAR 2022 enditure	\$	600.00
na St. State	19143  Zip Code (Plus 4)	MO 7 Description	DAY  15  tion of Exp Director fe	YEAR 2022 enditure	\$	600.00
na St. State	19143  Zip Code (Plus 4)	MO 7 Descript	DAY 15 tion of Exp	YEAR 2022 enditure	\$	600.00
na St. State	19143  Zip Code (Plus 4)	MO 7 Description	DAY  15  tion of Exp Director fe	YEAR 2022 enditure	\$	20.00
na St. State	19143  Zip Code (Plus 4)	MO 7 Descript Finance MO 8	DAY  15 tion of Exp Director fo	YEAR 2022 enditure ee YEAR 2022		
	State PA  State A  State A  State A  State A  MA	State   Zip Code (Plus 4)	State   Zip Code (Plus 4)   Descript     MA	MO DAY  State Zip Code (Plus 4) Description of Exp. Fundraising fee  MO DAY  7 1  State Zip Code (Plus 4) Description of Exp. Fundraising fee  MO DAY  7 1  State PA 19104 Description of Exp. Bank fee  MO DAY  7 11  State Zip Code (Plus 4) Description of Exp. Bank fee  MO DAY  7 11  State Zip Code (Plus 4) Description of Exp. Fundraising fee  MO DAY  7 11  State Zip Code (Plus 4) Description of Exp. Fundraising fee  MO DAY	MO	MO

To Whom Paid People for Jarrett Smith  Mailing Address PO Box 23762  State Zip Code (Plus 4) Description of Expenditure PA 19143  To Whom Paid ActBlue  Mailing Address 14 Arrow Street., Suite 11  State Zip Code (Plus 4) Description of Expenditure PA 2022  To Whom Paid ActBlue  To Whom Paid ActBlue  State Zip Code (Plus 4) Description of Expenditure PA 2022  To Whom Paid Arrow Street., Suite 11  State Zip Code (Plus 4) Description of Expenditure PA 2023  To Whom Paid	e \$	1,000.00
People for Jarrett Smith  Mailing Address PO Box 23762  State Zip Code (Plus 4) Description of Expenditure Campaign contribution  To Whom Paid ActBlue  Mailing Address 14 Arrow Street., Suite 11  State Zip Code (Plus 4) Description of Expenditure Campaign contribution  WO DAY YEAR  State Zip Code (Plus 4) Description of Expenditure Report Code (Plus 4) Description	e \$	1,000.00
City Philadelphia State Zip Code (Plus 4) Description of Expenditure Campaign contribution  To Whom Paid ActBlue  Mailing Address 14 Arrow Street., Suite 11  City Cambridge State Zip Code (Plus 4) Description of Expenditure MA  DAY  YEAR  2 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	e \$	1,000.00
To Whom Paid ActBlue  Mailing Address 14 Arrow Street., Suite 11  City Cambridge  MA  DAY  YEAR  2ip Code (Plus 4) MA  Description of Expenditure Fundraising fee	\$	
To Whom Paid ActBlue  Mailing Address 14 Arrow Street., Suite 11  City Cambridge  MA  DAY  YEAR  2 p Code (Plus 4)  Description of Expenditure  MA  02138  Fundraising fee		
ActBlue  Mo DAY YEAR  Mailing Address 14 Arrow Street., Suite 11  State Zip Code (Plus 4) Description of Expenditure  MA 02138 Fundraising fee		
ActBlue  Mailing Address 14 Arrow Street., Suite 11  State Zip Code (Plus 4) Description of Expenditure  MA 02138 Fundraising fee		
City Cambridge State Zip Code (Plus 4) Description of Expenditure MA 02138 Fundraising fee		
MA 02138 Fundraising fee		0.60
	3	
To Whom Paid		
MO DAY YEAR		
Willig, Williams, & Davidson		
Mailing Address 1845 Walnut St. 8 24 2022	. \$	1,580.00
City Philadelphia State Zip Code (Plus 4) Description of Expenditure	e	
PA 19103 Legal services		
To Whom Paid MO DAY YEAR		
PNC Bank		
Mailing Address         200 S. 40th St.         9         1         2022	. \$	20.00
City Philadelphia State Zip Code (Plus 4) Description of Expenditure	e	
PA 19104 Bank fee		
To Whom Paid MO DAY YEAR		
ActBlue		
Mailing Address14 Arrow Street., Suite 11992022	\$	0.50
City Cambridge State Zip Code (Plus 4) Description of Expenditure	e	
MA 02138 Fundraising fee		
To Whom Paid MO DAY YEAR		
Squarespace		
Mailing Address225 Varick St. 12th floor1052022	. \$	21.20
City New York State Zip Code (Plus 4) Description of Expenditure	<u> </u>	
The foliation of Exponential		
NY 10014 Web domain		
		PAGE TOTAL