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 20220	0272			Repo Filed			CANDI	NDIDATE COMMITTEE COBBYIST							
Name of Filing C	ommittee, Candida	ate or L	obbyist:	Ī	PUT P	ENNS'	YLV	ANIA F	IRST		1					
Street Address:																
City:	PHILADELPHI <i>A</i>	4					St	tate:	PA			Zip Co	de: 19	107		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 E PRIN	DAY MAR		POST-	3.		AMENDMENT REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDA ELECTION	Y PRE	- 5.	30 E	DAY CTIC		POST-	6.		TERMIN/ REPORT		Yes	No	~
report type)	ANNUAL REPORT	7.	Year 2022					METHO				PAPER		\	DISKE	TTE
Name of Office S	ought by Candidat	:e:	-		-		D	ATE O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	County Code
GOVERNOR							М	0	DAY		'EAR	-1	GOV	DEN		
		MO	lpay.	IVEAD				11		8	2022		<u> </u>		ONS FOR	CODES)
Summary of Expenditures	Receipts and from:	МО	DAY 6 7	YEAR		то	М	10	DAY		YEAR	FC	OR OFFIC	E USE	ONLY	
A Amount Duc	what Famous of Form	D		20)22			9		19	2022					
	ught Forward Fron ary Contributions <i>A</i>		•	n Sched	dule I	_	\$ \$			/52,	0.00					
	Available (Sum Of		• `			<u> </u>	⊅ \$			752.	,914.00					
D. Total Expenditures (From Schedule III) \$ 745,322.00																
E. Ending Cash Balance (Subtract Line D From Line C) \$ 7,592.00																
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)		▼ \$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$				0.00					
				AFF:	IDAV	/IT S	EC	TION								
PART I - If this is	a Committee repo	ort, trea	surer sign	here. I	f this	is a Ca	andi	idate re	port, c	and	idate sig	jn here.				
I swear (or affirm) correct and comple	that this report, incluete.	uding the	attached sc	hedules	filed o	n pape	r or	by electi	ronic m	ediun	n, are to t	he best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me this day of		20								Signature	of Perso	n Submitt	ing Rep	ort	
	Signatur	·e				_						Prin	ted Name	1		
My Commission Ex	· —					_						Ema				
	МО	D	AY	YR					Are	ea Co	ode	Daytim	e Teleph	one Nu	mber	
	a report of a cand				•				_						(4000
No 320) as amende		IY KNOWIE	eage and bei	ier tnis	politica	ai comi	mitte	ee nas n	ot viola	сеа а	ny provis	ions or tn	e act or J	ine 3,1	937 (P.L	. 1333,
Sworn to and Subsc	ribed before me this day of		20								s	ignature (of Candida	ate		
												Printe	ed Name			
My Commission Exp	Signature ires											Ema	il			
	мо	D	AY	YR		_			Area	Code	1	D	aytime To	elephor	ie Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period						
PUT PENNSYLVANIA FIRST	From:	6/7/202	<u>22</u> To:	9/19/2022			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	J 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	(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)			\$	0.00			
TOTAL for the Reporting	J Period	(3)	\$	0.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	g 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			\$	0.00			

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 Candidate			Reporting Period						
		- 1	From:		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						
F			From: To) :			
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							

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

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 Cai	ime of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		Α	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	n Schedule I, Detaile	d 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.)

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate		Rep	orting Pe	riod			
			Fror	om: To:				
				DATE				AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupation				
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				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	l							
PUT PENNSYLVANIA FIRST	From:	<u>6/7/2022</u> To:	9/19/2022						
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 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 Can	ame of Filing Committee or Candidate				Reporting Period					
			From:			То:				
				DATE			AMOUNT			
Full Name of Contributor				DAY	YEAR					
Mailing Address						7 \$		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:	•	•	•	•		·				
					-					
inter Grand Total of Part F on Schedule II, In-Kind Contributions Detai			ailed Summary Page,			PAGE TOTAL		-		
Section 2.						\$		0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period				
				Fro	m:		То:	То:		
DATE					DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address			-				\$	0.00		
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Place of Business City				State	e Zip	Code(Plus 4)	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Deta				etaile	ed				PAGE TOTAL	
Summary Page, Section 3.									0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period						
PUT PENNSYLVANIA FIRST			From	<u>6/</u>	7/2022	То:	9/19/2022			
				DATE			AMOUNT			
To Whom Paid			МО	DAY	YEAR					
ELIAS LAW GROUP			110							
Mailing Address					2022	\$	5,500.00			
City WASHINGTON					Description of Expenditure					
DC 20002				LEGAL FEES						
To Whom Paid				DAY	YEAR					
ELIAS LAW GROUP			МО		I EAR					
Mailing Address			6	23	2022	\$	5,500.00			
City WASHINGTON	State	Zip Code (Plus 4)	Description of Expenditure							
	DC	20002	LEGAL I	LEGAL FEES						
To Whom Paid			мо	DAY	YEAR					
GREAT AMERICAN MEDIA			МО	DAT	IEAR					
Mailing Address			6	13	2022	\$	722,636.00			
City WASHINGTON	City WASHINGTON State Zip Code (Plus 4)			tion of Exp	enditure	1				
	DC 20007			BUY						
To Whom Paid	<u> </u>				YEAR					

City	CHICAGO	State	Zip Code (Plus 4)	Description of Expenditure				
		IL	60654	MEDIA PRODUCTION				
1								
Enter	Grand Total of Expenditures of	n Page 1, Report C	over Page, Item D.	•	\$	745,322.00		

6

23

2022

AL MEDIA

Mailing Address

11,686.00