Campaign Finance Report

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

Filer Identificat Number :	ion 2012	20190			Repor Filed		CANDI	(DATE	СОМ	MITTEE	✓	LOB	BYIST	
	Committee, Candid	ate or Lo	bbyist:			-	STEVE FF	RIENDS (DF					
Street Address:	PO BOX 467													
City:	GLENSIDE						State: PA Zip Code: 19038					038		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIN	DAY 1ARY	POST- 3		AMENDI REPORT		Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5. X		DAY CTION	POST- 6		TERMIN REPORT		Yes	No	\sim
report type)	ANNUAL REPORT	7.	Year 2022				ING METH			PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE C	OF ELEC	FION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR		10020			
							11	. 8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		9 20	2	022 7	ГО	10) 24	2022	2				
A. Amount Bro	ought Forward From	m Last Re	eport			S	\$	2	21,216.89					
B. Total Monet	ary Contributions	And Rece	eipts (From	n Sche	dule I)		\$		0.00					
C. Total Funds	Available (Sum Of	f Lines A	and B)			9	\$		21,216.89					
D. Total Expen	ditures (From Sch	edule III	.)			9	\$		3,750.00					
E. Ending Casł	n Balance (Subtrac	t Line D I	From Line (C)			\$	1	7,466.89					
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedu	le II)		\$		0.00	4				
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		9	\$		0.00					
				AFF	IDAV	IT SI	ECTION							
	s a Committee rep	•	-							-				
I swear (or affirm correct and comp) that this report, inc lete.	luding the	attached sc	hedule	s filed or	pape	r or by elect	tronic med	ium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this day of	5	20			_			Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signatu	ire				_				Prir	nted Name			
My Commission E	xpires					_				Ema	ail			
	мо	DA	Y	YR				Area	Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's a	authorized	Comn	nittee, (Candi	date shall	sign her	e.					
I swear (or affirm No 320) as amend) that to the best of r ed.	ny knowle	dge and beli	ef this	political	com	nittee has r	not violate	d any provis	sions of th	ie act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subs	cribed before me this day of		20						9	Signature	of Candida	ite		
						_				Printe	ed Name			
My Commission Ex	Signature					_				Ema	ail			
						_								
	мо	DA	Y	YR	L .			Area Co	ode	D	aytime Te	elephor	ne Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MCCARTER, STEVE FRIENDS OF	From:	<u>9/20/2022</u>	<u>2</u> To:	<u>10/24/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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)			\$	0.00
TOTAL for the Reporting	g 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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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					
			Fre	om:		То	:		
					DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						
							ſ	PAGE TOTAL	

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

0.00

\$

PART B 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 Candidat	e			orting P	eriod	_			
			Fro	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Candidate Report			Reporting	Reporting Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Com	mittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00	

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.)

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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		Reporting Period						
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description					1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
		i Suillilai y Page,	Section				\$		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		
MCCARTER, STEVE FRIENDS OF	From:	<u>9/20/2022</u> то :	<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	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ΓF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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		АМС	DUNT	
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.	iled Sum	mary Pag	je,	PAGE	TOTAL			
					4	5	0.00	

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	From: To:				
					I		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Place of City State				Zip Code(Plus 4) Descrip			otion of	Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
MCCARTER, STEVE FRIENDS OF			From	<u>9/2</u>	<u>0/2022</u>	То:	<u>10/24/2022</u>	
				AMOUNT				
To Whom Paid Friends of Napoleon Nelson			мо	DAY	YEAR			
Mailing Address 18 Poe Avenue			10	1	2022	\$	250.00	
City Wyncote	State PA	Zip Code (Plus 4) 19095	Description of Expenditure Contribution					
To Whom Paid Friends of Matt Bradford			мо	DAY	YEAR			
Mailing Address P. O. Box 349			10	1	2022	\$	500.00	
City Norristown	State PA	Zip Code (Plus 4) 19404	Description of Expenditure Contribution					
To Whom Paid Joe Webster for State Rep			мо	DAY	YEAR			
Mailing Address P. O. box 2664			10	1	2022	\$	250.00	
City Collegeville	State PA	Zip Code (Plus 4) 19426	Description of Expenditure Contribution					
To Whom Paid Fetterman for PA			мо	DAY	YEAR			
Mailing Address P.O Box 6061			10	3	2022	\$	1,000.00	
City Pittsburgh	State PA	Zip Code (Plus 4) 15211	Description of Expenditure Contribution					
To Whom Paid PA House Democratic Campaign Committee			мо	DAY	YEAR			
Mailing Address P. O. Box 555			10	3	2022	\$	1,000.00	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution					

To Whom Paid Friends of Ben Sanchez			мо	DAY	YEAR		
Mailing Address P. O. Box 53			10	1	2022	\$	250.00
City Jenkintown	State PA	Zip Code (Plus 4) 19046	Description of Expenditure Contribution				
To Whom Paid Conservation Voters of PA			мо	DAY	YEAR		
Mailing Address P. O> Box 2125			10	1	2022	\$	500.00
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure Contribution				
Enter Grand Total of Expenditure	s on Page 1 R	enort Cover Page Item D					PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							3,750.00

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