## **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 <b>on</b> 2005	226			Repo Filed		:	CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		LOCAL	00	)32B	j pa ame	RICAN	I DR	EAM FU	IND					
Street Address:	25 WEST 18T	H ST															
City:	NEW YORK							State:	NY			Zip Co	<b>de:</b> 10	011			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		0 DA RIMA		POST- 3.			AMENDN REPORT		Yes	Ν	0	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					0 DA LECT		POST- 6. <b>X</b>		TERMIN REPORT		Yes	N	0	$\mathbf{>}$	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022					IG METHO				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	Sought by Candidat	te:						DATE O	F ELE(	CTIC	N	District Number	Office Code	Par	ty Cod	Cou	
	,							мо	DAY	Y	AR	Itumber	coue			1000	5
								11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR	2			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	,	
Expenditures	s from:	1	LO 25	2	022	то	)	11	2	28	2022						
A. Amount Bro	ught Forward Fron	n Last Ro	eport		•		\$			64,	723.08						
B. Total Monet	ary Contributions	And Rece	eipts (Fron	n Sche	dule I)		\$		-	100,0	00.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$		1	164,7	723.08						
D. Total Expen	ditures (From Sche	edule III	I)				\$		1	.24,3	325.00	]					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			40,3	898.08						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)		\$				0.00	1					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						
				AFF	IDAV	IT	SE	CTION									
	s a Committee repo	•	-						• •								
I swear (or affirm correct and complete	) that this report, incl ete.	uding the	attached sc	hedules	s filed or	n pa	iper o	or by elect	ronic me	edium	, are to f	the best o	of my knov	vledge	and be	lief , tr	rue
Sworn to and subs	cribed before me this day of	5	20							5	Signature	e of Perso	n Submitt	ing Rep	oort		-
	Signatu	re				_						Prin	ited Name				_
My Commission E	-											Ema	il				
	мо	DA	AY	YR					Are	a Coc	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comm	nittee,	Can	ndida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ıy knowle	edge and beli	ief this	politica	l co	ommi	ittee has n	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P	L. 133	3,
Sworn to and subso	ribed before me this day of		20								s	ignature	of Candida	ite			-
												Printe	ed Name				-
Mu Corrector in 5	Signature											Ema	il				_
My Commission Exp	ores																
	мо	DA	4Y	YR		_			Area	Code		D	aytime Te	elephon	e Num	ber	-

#### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** LOCAL 0032BJ PA AMERICAN DREAM FUND From: <u>10/25/2022</u> **To:** 11/28/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 100,000.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 100,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 100,000.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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			Re	porting I	Period			
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	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		Rep	orting P	eriod			
			Froi	m:		Τα	):	
					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	e, Se	ection 2	<u>.</u>		\$	0.00

#### PAGE 5

## 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 Ca	Name of Filing Committee or Candidate Report					ing Period						
LOCAL 0032BJ PA AMERICAN D	OCAL 0032BJ PA AMERICAN DREAM FUND					From: <u>10/25/2022</u> To: <u>11/28/2022</u>						
				DA	TE		A	MOUNT				
Full Name of Contributing Com LOCAL 0032BJ SEIU AMERICA				мо	DAY	YEAR						
Mailing Address 25 WEST 18	3TH ST						\$	100,000.00				
City NEW YORK	State NY	<b>Zip Cod</b> 10011	e (Plus 4)	10	26	2022						
						ſ		PAGE TOTAL				
Enter Grand Total of Part C o	on Schedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	100,000.00				

### 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			Report	ing Perio	d				
From:			rom: To:						
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	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 Perio	od	
LOCAL 0032BJ PA AMERICAN DREAM FUND	From:	<u>10/25/2022</u> то:	<u>11/28/2022</u>
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	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	Name of Filing Committee or Candidate						
	From:			То:			
				DATE		АМС	DUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	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				Rep	Reporting Period					
						From: 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 Place of City State				State	Zip Code(Plus 4) Descripti			ption of	Contribution	

	i
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			Reporti	ng Period				
LOCAL 0032BJ PA AMERICAN DREAM F	UND		From	<u>10/2</u>	<u>5/2022</u>	То:	<u>11/28/2022</u>	
				DATE			AMOUNT	
<b>To Whom Paid</b> Citizens for Hughes			мо	DAY	YEAR			
Mailing Address PO Box 13031			10	10 31 2022 <b>\$</b> 4,00				
City Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19101		<b>ition of Exp</b> l contribut		3		
To Whom Paid Friends of Johanny Cepeda-Freytiz			мо	DAY	YEAR			
Mailing Address 320 Penn Street			10	31	2022	\$	2,500.00	
CityReadingStateZip Code (Plus 4)PA19602				<b>otion of Exp</b> l contribut		2		
To Whom Paid FRIENDS OF LISA BOROWSKI			мо	DAY	YEAR			
Mailing Address 439 MIDLAND AVE			10	31	2022	\$	7,625.00	
City Wayne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19087		<b>stion of Exp</b> l contribut		3		
To Whom Paid House Democratic Campaign Cmte			мо	DAY	YEAR			
Mailing Address PO Box 555			10	31	2022	\$	50,000.00	
City Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108		<b>ition of Exp</b> l contribut		2		
To Whom Paid Be the Change PA			мо	DAY	YEAR			
Mailing Address P.O. Box 254	Mailing Address P.O. Box 254			2	2022	\$	5,000.00	
City Royersford	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19468		<b>ition of Exp</b> l contribut		1		

To Whom Paid FRIENDS OF LISA BOROWSKI			мо	DAY	YEAR		
Mailing Address 439 MIDLAND AVE			11	14	2022	\$	30,000.00
City Wayne	State PA	<b>Zip Code (Plus 4)</b> 19087	Description of Expenditure Political contribution				
To Whom Paid Citizens for Kenyatta Johnson			мо	DAY	YEAR		
Mailing Address P.O. Box 7466			11	21	2022	\$	12,600.00
City Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19101	<b>Description of Expenditure</b> Political contribution				
To Whom Paid Friends of Kendra Brooks			мо	DAY	YEAR		
Mailing Address 5730 Reach Street			11	21	2022	\$	12,600.00
City Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19120	Description of Expenditure Political contribution				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	124,325.00