

Campaign Finance Report

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

Filer Identification Number : 20180505		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST						
Name of Filing Committee, Candidate or Lobbyist: RICKEY'S PRIDE PAC											
Street Address: PO BOX 312											
City: LANSDALE			State: PA	Zip Code: 19446							
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2022	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code		
				MO	DAY	YEAR					
				11	8	2022	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	25	2022	TO	11	28	2022			
A. Amount Brought Forward From Last Report			\$			4,812.34					
B. Total Monetary Contributions And Receipts (From Schedule I)			\$			500.00					
C. Total Funds Available (Sum Of Lines A and B)			\$			5,312.34					
D. Total Expenditures (From Schedule III)			\$			1,300.20					
E. Ending Cash Balance (Subtract Line D From Line C)			\$			4,012.14					
F. Value Of In-Kind Contributions Received (From Schedule II)			\$			0.00					
G. Unpaid Debts And Obligations (From Schedule IV)			\$			0.00					

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
RICKEY'S PRIDE PAC	From: <u>10/25/2022</u> To: <u>11/28/2022</u>

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)	\$ 0.00
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)	\$ 0.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 500.00
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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
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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.

PAGE TOTAL
\$ 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 Candidate	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name of Contributor					\$ 0.00
Mailing Address	MO	DAY	YEAR		
City	State	Zip Code (Plus 4)			

PAGE TOTAL
\$ 0.00

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 Candidate	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 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 RICKEY'S PRIDE PAC	Reporting Period From: <u>10/25/2022</u> To: <u>11/28/2022</u>
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	DATE			AMOUNT
Full Name of Contributor REPKO LAW LLC	MO	DAY	YEAR	\$ 500.00
Mailing Address 100 EAST COURT STREET	11	1	2022	
City DOYLESTOWN State PA Zip Code (Plus 4) 18901				
Employer Name REPKO LAW LLC	Occupation			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 500.00

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: _____ To: _____

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

PAGE TOTAL
\$ 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 RICKEY'S PRIDE PAC	Reporting Period From: <u>10/25/2022</u> To: <u>11/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)	\$ 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: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Description of Contribution:				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

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

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

				DATE	AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code(Plus 4)				
Employer of Contributor			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
RICKEY'S PRIDE PAC	From <u>10/25/2022</u> To: <u>11/28/2022</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
FRIENDS OF JILL DENNIN	10	25	2022	\$	50.00
Mailing Address PO BOX 1014					
City BOYERTOWN					
State PA					
Zip Code (Plus 4) 19512					
Description of Expenditure DONATION					
To Whom Paid	MO	DAY	YEAR		
FETTERMAN FOR PA	10	26	2022	\$	50.00
Mailing Address P.O. BOX 6061					
City PITTSBURGH					
State PA					
Zip Code (Plus 4) 15211					
Description of Expenditure DONATION					
To Whom Paid	MO	DAY	YEAR		
DOLLAR TREE	10	28	2022	\$	55.65
Mailing Address 555 S. BROAD STREET					
City LANSDALE					
State PA					
Zip Code (Plus 4) 19446					
Description of Expenditure DOGGY COSTUME CONTEST					
To Whom Paid	MO	DAY	YEAR		
DOUBLE TREE HOTEL PHILADELPHIA	10	28	2022	\$	17.00
Mailing Address 237 SOUTH BROAD STREET					
City PHILADELPHIA					
State PA					
Zip Code (Plus 4) 19107					
Description of Expenditure PARKING FEE FOR FUNDRAISING EVENT					
To Whom Paid	MO	DAY	YEAR		
DOLLAR TREE	10	28	2022	\$	9.28
Mailing Address 555 S. BROAD STREET					
City LANSDALE					
State PA					
Zip Code (Plus 4) 19446					
Description of Expenditure DOGGY COSTUME CONTEST					
To Whom Paid	MO	DAY	YEAR		
MAD 4 PA	10	28	2022	\$	100.00
Mailing Address PO BOX 444					
City GLENSIDE					
State PA					
Zip Code (Plus 4) 19038					
Description of Expenditure DONATION					

To Whom Paid TINA MONTGOMERY WILLIAMS			MO	DAY	YEAR	\$	300.00
Mailing Address 4215 OTTER ST			11	1	2022		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19104	Description of Expenditure DOGGY COSTUME CONTEST				
To Whom Paid FRIENDS OF LIZ HANBIDGE			MO	DAY	YEAR	\$	50.00
Mailing Address P.O. BOX 461			11	3	2022		
City AMBLER	State PA	Zip Code (Plus 4) 19002	Description of Expenditure DONATION				
To Whom Paid JAMIE RASKIN FOR CONGRESS			MO	DAY	YEAR	\$	100.00
Mailing Address P.O. BOX 5418			11	3	2022		
City TAKOMA PARK	State MD	Zip Code (Plus 4) 20913	Description of Expenditure DONATION				
To Whom Paid BE THE CHANGE PA			MO	DAY	YEAR	\$	100.00
Mailing Address P.O. BOX 254			11	4	2022		
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468	Description of Expenditure DONATION				
To Whom Paid AGENDA PAC			MO	DAY	YEAR	\$	50.00
Mailing Address PO BOX 15248			11	4	2022		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure DONATION				
To Whom Paid HISCOX			MO	DAY	YEAR	\$	28.83
Mailing Address 5 CONCOURSE PARKWAY SUITE 2150			11	7	2022		
City ATLANTA	State GA	Zip Code (Plus 4) 30328	Description of Expenditure INSURANCE				
To Whom Paid FRIENDS OF MELISSA CERRATO			MO	DAY	YEAR	\$	100.00
Mailing Address P.O. BOX 151			11	14	2022		
City HORSHAM	State PA	Zip Code (Plus 4) 19044	Description of Expenditure DONATION				
To Whom Paid MONTGOMERY COUNTY COMMUNITY COLLEGE FOUNDATION EAST HOUSE			MO	DAY	YEAR	\$	100.00
Mailing Address 340 DEKALB PIKE			11	17	2022		
City BLUE BELL	State PA	Zip Code (Plus 4) 19422	Description of Expenditure DONATION				

To Whom Paid AMAZON.COM			MO	DAY	YEAR	\$ 30.73
Mailing Address			11	21	2022	
City	State	Zip Code (Plus 4)	Description of Expenditure OFFICE SUPPLIES			
To Whom Paid FRIENDS OF YANIV ARONSON			MO	DAY	YEAR	\$ 50.00
Mailing Address 413 E 12TH AVE			11	23	2022	
City CONSHOHOCKEN	State PA	Zip Code (Plus 4) 19428	Description of Expenditure DONATION			
To Whom Paid FACEBOOK DONATION WHY			MO	DAY	YEAR	\$ 15.00
Mailing Address 150 N SIXTH ST			11	23	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Description of Expenditure DONATION			
To Whom Paid FIRST KEY BANK			MO	DAY	YEAR	\$ 43.71
Mailing Address 1498 NORTH WALES RD			11	23	2022	
City NORTH WALES	State PA	Zip Code (Plus 4) 19454	Description of Expenditure CHECK BOOKS			
To Whom Paid LORI SCHREIBER			MO	DAY	YEAR	\$ 50.00
Mailing Address 2479 LAFAYETTE AVE			11	28	2022	
City ROSLYN	State PA	Zip Code (Plus 4) 19001	Description of Expenditure DONATION			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.			PAGE TOTAL			\$ 1,300.20

