

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20120419		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> CAMPAIGN FOR COMPASSION COMMITTEE											
<b>Street Address:</b>											
<b>City:</b> ELKINS PARK				<b>State:</b> PA		<b>Zip Code:</b> 19027					
<b>TYPE OF REPORT</b>  (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	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2022	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
SENATOR IN THE GENERAL ASSEMBLY					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	4	STS	DEM	46
					11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		10	25	2022		11	28	2022			
<b>A. Amount Brought Forward From Last Report</b>					\$		27,514.92				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		9,491.54				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		37,006.46				
<b>D. Total Expenditures (From Schedule III)</b>					\$		7,259.19				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		29,747.27				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
CAMPAIGN FOR COMPASSION COMMITTEE	From: <u>10/25/2022</u> To: <u>11/28/2022</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 491.54
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 491.54

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 3,000.00
<b>All Other Contributions (Part D)</b>	\$ 5,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 8,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 1,000.00

<b>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.)</b>	\$ 9,491.54
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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.**

<b>Name of Filing Committee or Candidate</b>  CAMPAIGN FOR COMPASSION COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>10/25/2022</u> <b>To:</b> <u>11/28/2022</u>
<b>DATE</b> <span style="float: right;"><b>AMOUNT</b></span>	

<b>Full Name of Contributing Committee</b> ACTBLUE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 136.54
<b>Mailing Address</b>			11	9	2022	
City WEST SOMERVILLE	State MA	Zip Code (Plus 4) 021440031				

<b>Full Name of Contributing Committee</b> ACTBLUE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5.00
<b>Mailing Address</b>			11	21	2022	
City WEST SOMERVILLE	State MA	Zip Code (Plus 4) 021440031				

<b>Full Name of Contributing Committee</b> FRIENDS OF BRAD PRANSKY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			11	28	2022	
City	State	Zip Code (Plus 4)				

<b>Full Name of Contributing Committee</b> PLAN W PA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			10	27	2022	
City FORT WASHINGTON	State PA	Zip Code (Plus 4) 190341642				

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

<b>PAGE TOTAL</b>
\$ 491.54

<div>PART B</div> <div>ALL OTHER CONTRIBUTIONS</div> <div>\$50.01 TO \$250.00</div> <div>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)</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				\$ 0.00
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						PAGE TOTAL
						\$ 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.**

<b>Name of Filing Committee or Candidate</b>  CAMPAIGN FOR COMPASSION COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>10/25/2022</u> <b>To:</b> <u>11/28/2022</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
CONSTELLATION EMPLOYEE PAC						
Mailing Address						
City	WASHINGTON	State	DC	Zip Code (Plus 4)	200012133	
				11	28	2022
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
HIGHMARK PAC						
Mailing Address						
City	CAMP HILL	State	PA	Zip Code (Plus 4)	170111702	
				10	27	2022
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
MERCK EMPLOYEES POLITICAL ACTION COMMITTEE						
Mailing Address						
City	WASHINGTON	State	DC	Zip Code (Plus 4)	200042601	
				11	28	2022
						\$ 1,500.00

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

<b>PAGE TOTAL</b>
\$ 3,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  CAMPAIGN FOR COMPASSION COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>10/25/2022</u> <b>To:</b> <u>11/28/2022</u>
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				DATE	AMOUNT
<b>Full Name of Contributor</b> SYD BOOKER				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City LAVEROCK State PA Zip Code (Plus 4) 190387222				11	28
				2022	\$ 1,500.00
<b>Employer Name</b> INFORMATION REQUESTED				<b>Occupation</b> INFORMATION REQUESTED	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>	<b>State</b>
				<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> GOODMAN PROPERTIES				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City JENKINTOWN State PA Zip Code (Plus 4) 190462858				10	27
				2022	\$ 2,000.00
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>	<b>State</b>
				<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> MAGELLAN HEALTH INC.				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City COLUMBIA State MD Zip Code (Plus 4) 210462620				11	2
				2022	\$ 500.00
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>	<b>State</b>
				<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> TOWERS AT WYNCOTE				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City JENKINTOWN State PA Zip Code (Plus 4) 19046				11	28
				2022	\$ 1,000.00
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>	<b>State</b>
				<b>Zip Code (Plus 4)</b>	

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

<b>PAGE TOTAL</b>
\$ 5,000.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  CAMPAIGN FOR COMPASSION COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>10/25/2022</u> <b>To:</b> <u>11/28/2022</u>
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	
BE THE CHANGE PA						\$ 1,000.00
<b>Mailing Address</b>						
<b>City</b> ROYERSFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 194680254	11	21	2022	
<b>Receipt Description</b> REFUND ON CYCLE 5						

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

<b>PAGE TOTAL</b>
\$ 1,000.00

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
CAMPAIGN FOR COMPASSION COMMITTEE		From: <u>10/25/2022</u> To: <u>11/28/2022</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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.						<b>PAGE TOTAL</b>  \$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
CAMPAIGN FOR COMPASSION COMMITTEE	From <u>10/25/2022</u> To: <u>11/28/2022</u>

				DATE	AMOUNT		
To Whom Paid				MO	DAY	YEAR	\$ 27.50
ACTBLUE				11	2	2022	
Mailing Address				11	2	2022	\$ 238.50
City	WEST SOMERVILLE	State	MA	Zip Code (Plus 4)	021440031	Description of Expenditure	
To Whom Paid				MO	DAY	YEAR	\$ 4,068.23
CHELTENHAM PRINTING				11	28	2022	
City	CHELTENHAM	State	PA	Zip Code (Plus 4)	190122131	Description of Expenditure	STICKERS/VOTING
To Whom Paid				MO	DAY	YEAR	\$ 1,000.00
FRIENDS OF NAPOLEON NELSON				10	27	2022	
City	WYNCOTE	State	PA	Zip Code (Plus 4)	190952912	Description of Expenditure	RENTAL SPACE
To Whom Paid				MO	DAY	YEAR	\$ 20.17
FRIENDS OF NICK MILLER				10	27	2022	
City	ALLENTOWN	State	PA	Zip Code (Plus 4)	181051799	Description of Expenditure	WEBSITE
To Whom Paid				MO	DAY	YEAR	\$ 76.20
GODADDY.COM				11	1	2022	
City		State		Zip Code (Plus 4)		Description of Expenditure	WEBSITE

<b>To Whom Paid</b> HITOUCH INC.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b>			11	28	2022	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191024826	<b>Description of Expenditure</b>			
<b>To Whom Paid</b> NICETOWN CDC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b>			11	25	2022	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191401700	<b>Description of Expenditure</b> THANKSGIVING TURKEYS			
<b>To Whom Paid</b> OLD TOWNE DELI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 312.70
<b>Mailing Address</b>			11	15	2022	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> CATERING COSTS			
<b>To Whom Paid</b> ZOOM USA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 15.89
<b>Mailing Address</b>			11	1	2022	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> CONFERENCE CALLS			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> <b>\$</b> 7,259.19

