

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 : 20210276		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: MCSWAIN FOR GOVERNOR											
Street Address: PO BOX 2129											
City: PHILADELPHIA					State: PA		Zip Code: 19103				
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 <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2022	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	REP			
					11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		11	29	2022		12	31	2022			
A. Amount Brought Forward From Last Report					\$ 89,962.95						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 18,273.78						
C. Total Funds Available (Sum Of Lines A and B)					\$ 108,236.73						
D. Total Expenditures (From Schedule III)					\$ 98,537.82						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 9,698.91						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 124,294.69						

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

Name of Filing Committee or Candidate	Reporting Period
MCSWAIN FOR GOVERNOR	From: <u>11/29/2022</u> To: <u>12/31/2022</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ (527.88)

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)	\$ 6,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 6,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 18,801.66

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.)	\$ 24,273.78
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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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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					MO	DAY	YEAR	\$0.00	
Mailing Address									
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 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
MCSWAIN FOR GOVERNOR	From: <u>11/29/2022</u> To: <u>12/31/2022</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	6,000.00
FREEDOM PA									
Mailing Address					7	6	2022		
228 S WASHINGTON ST STE 115									
City	ALEXANDRIA		State	VA	Zip Code (Plus 4)	22314			

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

PAGE TOTAL
\$ 6,000.00

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: To:

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

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 MCSWAIN FOR GOVERNOR	Reporting Period From: <u>11/29/2022</u> To: <u>12/31/2022</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 18,801.66
TARGET ENTERPRISES LLC							
Mailing Address				9	6	2022	
15260 VENTURA BLVD. STE. 1240		State	Zip Code (Plus 4)				
City SHERMAN OAKS		CA	91403				
Receipt Description							
MEDIA REFUND							

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

PAGE TOTAL	
\$	18,801.66

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	
MCSWAIN FOR GOVERNOR		From: <u>11/29/2022</u> To: <u>12/31/2022</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 RECIEVED - 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:
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			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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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
MCSWAIN FOR GOVERNOR	From <u>11/29/2022</u> To: <u>12/31/2022</u>

DATE				AMOUNT
To Whom Paid COLLEEN CHRISTY	MO	DAY	YEAR	
Mailing Address PO BOX 2129	6	14	2022	\$ 209.08
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure TRAVEL	
To Whom Paid DAVID HARVEY	MO	DAY	YEAR	
Mailing Address P.O. BOX 2129	6	14	2022	\$ 1,591.51
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure TRAVEL	
To Whom Paid DEREK ROCKEY	MO	DAY	YEAR	
Mailing Address P.O. BOX 2129	6	14	2022	\$ 580.75
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure TRAVEL	
To Whom Paid DEREK ROCKEY	MO	DAY	YEAR	
Mailing Address P.O. BOX 2129	11	17	2022	\$ 91.50
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure TRAVEL	
To Whom Paid RACHEL TRIPP	MO	DAY	YEAR	
Mailing Address PO BOX 2129	6	14	2022	\$ 202.86
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure TRAVEL	

To Whom Paid RONALD CAVALIER			MO	DAY	YEAR	\$ 665.50
Mailing Address P.O. BOX 2129			6	14	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure TRAVEL			

To Whom Paid THOMAS STONER			MO	DAY	YEAR	\$ 2,800.00
Mailing Address P.O. BOX 2129			6	14	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure STRATEGIC CONSULTING			

To Whom Paid BILL'S COPIER SERVICE			MO	DAY	YEAR	\$ 539.70
Mailing Address 158 DURHAM RD.			6	14	2022	
City NEWTOWN	State PA	Zip Code (Plus 4) 18940	Description of Expenditure OFFICE SUPPLIES			

To Whom Paid CMDI			MO	DAY	YEAR	\$ 2,400.00
Mailing Address 1593 SPRING HILL RD. STE. 400			7	5	2022	
City TYSONS CORNER	State VA	Zip Code (Plus 4) 22182	Description of Expenditure DATA MANAGEMENT			

To Whom Paid CMDI			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 1593 SPRING HILL RD. STE. 400			7	8	2022	
City TYSONS CORNER	State VA	Zip Code (Plus 4) 22182	Description of Expenditure DATA MANAGEMENT			

To Whom Paid EMERALD BUSINESS SUPPLY			MO	DAY	YEAR	\$ 544.80
Mailing Address 4807 ASHBURNER ST.			9	9	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19136	Description of Expenditure OFFICE SUPPLIES			

To Whom Paid ESPLANADE STRATEGIES LLC			MO	DAY	YEAR	\$ 2,800.00
Mailing Address P.O. BOX 382090			6	14	2022	
City CAMBRIDGE	State MA	Zip Code (Plus 4) 02238	Description of Expenditure STRATEGIC CONSULTING			

To Whom Paid GOLDSTEIN LAW PARTNERS LLC			MO	DAY	YEAR	\$ 240.90
Mailing Address 11 CHURCH RD.			8	8	2022	
City HATFIELD	State PA	Zip Code (Plus 4) 19440	Description of Expenditure LEGAL FEES			

To Whom Paid RAP PERFORMANCE LLC			MO	DAY	YEAR	\$ 961.92
Mailing Address 1691 SOUTH BROOKFIELD STREET			6	14	2022	
City VINELAND	State NJ	Zip Code (Plus 4) 08361	Description of Expenditure CAMPAIGN ATTIRE			

To Whom Paid RAP PERFORMANCE LLC			MO	DAY	YEAR	\$ 166.43
Mailing Address 1691 SOUTH BROOKFIELD STREET			9	9	2022	
City VINELAND	State NJ	Zip Code (Plus 4) 08361	Description of Expenditure CAMPAIGN ATTIRE			

To Whom Paid TARGETED VICTORY LLC			MO	DAY	YEAR	\$ 60,000.00
Mailing Address 2311 WILSON BLVD STE 200			8	8	2022	
City ARLINGTON	State VA	Zip Code (Plus 4) 22201	Description of Expenditure DIGITAL FUNDRAISING			

To Whom Paid TARGETED VICTORY LLC			MO	DAY	YEAR	\$ 21,000.00
Mailing Address 2311 WILSON BLVD. STE. 200			9	15	2022	
City ARLINGTON	State VA	Zip Code (Plus 4) 22201	Description of Expenditure DIGITAL FUNDRAISING			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 202.91
Mailing Address P.O. BOX 580340			6	10	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 505.94
Mailing Address P.O. BOX 580340			6	10	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 543.19
Mailing Address P.O. BOX 580340			6	10	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 2,496.45
Mailing Address P.O. BOX 580340			6	10	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 116.33
Mailing Address P.O. BOX 580340			7	11	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 245.17
Mailing Address P.O. BOX 580340			7	11	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 849.30
Mailing Address P.O. BOX 580340			7	11	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 5,716.99
Mailing Address P.O. BOX 580340			7	11	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 7.43
Mailing Address P.O. BOX 580340			8	8	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 116.05
Mailing Address P.O. BOX 580340			8	8	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 236.98
Mailing Address P.O. BOX 580340			8	8	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 14.27
Mailing Address P.O. BOX 580340			10	17	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST CREDIT CARD			MO	DAY	YEAR	\$ 0.27
Mailing Address P.O. BOX 580340			11	14	2022	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258	Description of Expenditure TRAVEL/OFFICE SUPPLIES			

To Whom Paid TRUIST/BB& T			MO	DAY	YEAR	\$ 214.29
Mailing Address 1445 NEW YORK AVE., NW			6	21	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure BANK FEE			

To Whom Paid TRUIST/BB& T			MO	DAY	YEAR	\$ 12.25
Mailing Address 1445 NEW YORK AVE., NW			7	21	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure BANK FEE			

To Whom Paid TRUIST/BB& T			MO	DAY	YEAR	\$ 24.00
Mailing Address 1445 NEW YORK AVE., NW			9	21	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure BANK FEE			

To Whom Paid TRUIST/BB& T			MO	DAY	YEAR	\$ 30.00
Mailing Address 1445 NEW YORK AVE., NW			10	21	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure BANK FEE			

To Whom Paid TRUIST/BB& T			MO	DAY	YEAR	\$ 1.75
Mailing Address 1445 NEW YORK AVE., NW			12	21	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure BANK FEE			

To Whom Paid UNION LEAGUE CLUB			MO	DAY	YEAR	
Mailing Address 140 S BROAD ST			8	8	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure CATERING			

To Whom Paid MASSENG COMMUNICATIONS			MO	DAY	YEAR	
Mailing Address C/O JOYCE ROMANUS			9	12	2022	
City SILVER SPRING	State MD	Zip Code (Plus 4) 20901	Description of Expenditure VOID PAYMENT ISSU 5/10/22			

To Whom Paid WINRED			MO	DAY	YEAR	
Mailing Address 1776 WILSON BLVD STE. 530			12	31	2022	
City ARLINGTON	State VA	Zip Code (Plus 4) 22209	Description of Expenditure ONLINE PROCESSING			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 98,537.82

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate MCSWAIN FOR GOVERNOR				Reporting Period From: <u>11/29/2022</u> To: <u>12/31/2022</u>			
							Outstanding Balance of Debt
				DATE			
Name of Creditor BILL MCSWAIN				MO	DAY	YEAR	
Mailing Address P.O. BOX 2129				12	31	2021	\$ 100,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103		Description of Debt CANDIDATE LOAN			
							Outstanding Balance of Debt
				DATE			
Name of Creditor TARGETED VICTORY LLC				MO	DAY	YEAR	
Mailing Address 2311 WILSON BLVD 20				5	15	2022	\$ 24,294.69
City ARLINGTON	State VA	Zip Code (Plus 4) 22201		Description of Debt 05152022			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 124,294.69