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 2021	0276			Report Filed B		CANDI	DATE	C	OMMITTE	E 🗸	LOE	BBY]	ST	
	Name of Filing Committee, Candidate or Lobbyist: MCSWAIN FOR GOVERNOR														
Street Address:	PO BOX 2129)													
City:	PHILADELPHI	A					State:	PA		Zip (Code: 1	19103			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM		POST-	3.	AMEN REPOI	DMENT RT?	Yes	Y	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D/ ELEC		POST-	6.	TERM: REPOI	INATION RT?	Yes		No	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2022				NG METHO			PAPE	R		DI DI	ISKET	TE
Name of Office	Sought by Candida	te:					DATE O	F ELEC	TION	Distri Numb			arty		 County Code
							мо	DAY	YEAR			RE	P		couc
							11		8 20)22	(SEE]	INSTRUCT	IONS	FOR C	ODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR		FOR OFF	ICE US	E OI	NLY	
Expenditures	s from:	1	1 29	2	022 T	0	12	3	1 20	022					
A. Amount Bro	ought Forward From	m Last R	eport			\$	_		89,962	.95					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I)	\$			18,273	.78					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$		1	08,236	.73					
D. Total Expen	ditures (From Sch	edule II	[)			\$			98,537.	.82					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			9,698.	91					
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedu	le II)	\$			0.	00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	()		\$		1	24,294.	.69					
				AFF	IDAVI	Γ SE	CTION								
PART I - If this i	s a Committee rep	ort, trea	surer sign	here. I	If this is	a Ca	ndidate re	eport, ca	andidate	e sign her	e.				
I swear (or affirm correct and compl) that this report, inc ete.	luding the	attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are	e to the bes	t of my kn	owledge	e and	l belie	f, true
Sworn to and subs	scribed before me thi day of	S	20						Signa	ature of Per	son Subm	itting Re	epor	t .	
	Signatu	ire				-				Р	rinted Nar	ne			
My Commission E	-	-				_				E	mail				
	мо	DA	AY	YR				Area	a Code	Day	time Telej	phone N	umb	er	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, C	andid	ate shall	sign he	re.						
I swear (or affirm) No 320) as amend) that to the best of r ed.	ny knowle	edge and beli	ef this	political	comm	ittee has n	ot violate	ed any pr	ovisions of	the act of	June 3,	1937	' (P.L.	1333,
Sworn to and subse	cribed before me this day of		20							Signatu	e of Candi	idate			
						-				Pri	nted Name	9			
My Commission Exp	Signature pires					-				E	mail				
	мо	P/		YR				Area C	ode		Daytime	Telepho	one N	lumbe	er
	МО	D/	AY	YR				Area C	ode		Daytime	Telepho	one N	lumbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page				
Name of Filing Committee or Candidate	Reporting	g Period		
MCSWAIN FOR GOVERNOR	From:	<u>11/29/202</u>	2 <u>2</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 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	24,273.78

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						
			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

\$

Use this Part to ite	mize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng peri	aggreg iod.			ʻom
Name of Filing Committee or Candidat	e		Rep	orting Po	eriod			
			Fror	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	le, Se	ection 2			\$	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 Candidate				Reporting Period							
MCSWAIN FOR GOVERNOR	From:	<u>11/2</u>	<u>9/2022</u>	<u>12/31/2022</u>							
				DA	TE		Α	MOUNT			
Full Name of Contributing Commit FREEDOM PA	ttee			мо	DAY	YEAR					
Mailing Address 228 S WASHIN	NGTON ST STE 115						\$	6,000.00			
City ALEXANDRIA	State VA	Zip Cod 22314	e (Plus 4)	7	6	2022					
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 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:	То:

				D	ATE		АМС	DUNT
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 Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	iedule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	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 Rep					Reporting Period						
MCSWAIN FOR GOVERNOR From:					<u>11/29/202</u>	<u>12/31/2022</u>					
				D	ATE			AMOUNT			
Full Name TARGET ENTERPRISES LLC				мо	DAY	YEAR					
Mailing Address 15260 VENTURA BLVD. STE. 1240							\$	18,801.66			
City SHERMAN OAKS	State CA	Zip Code (91403	Plus 4)	9	6	202	2				
Receipt Description MEDIA REFUND											
Enter Grand Total of Part E on Sc	hedule T. Detailed	Summary Page	Section	4				PAGE TOTAL			
		culling ruge,					\$	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 Perio	od	
MCSWAIN FOR GOVERNOR	From:	<u>11/29/2022</u> то:	<u>12/31/2022</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 PAR	TF)		
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.	ule II, In-Kind Co	ontributions Deta	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	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	ption 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			Reporti	ng Period			
MCSWAIN FOR GOVERNOR			From	<u>11/29</u>	9/2022	То:	<u>12/31/2022</u>
				DATE			AMOUNT
To Whom Paid COLLEEN CHRISTY			мо	DAY	YEAR		
Mailing Address PO BOX 2129			6	14	2022	\$	209.08
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Descrip TRAVEI	otion of Exp	benditure	1	
To Whom Paid DAVID HARVEY			мо	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			мо	DAY	YEAR		
Mailing Address P.O. BOX 2129			6	14	2022	\$	580.75
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Descrip TRAVEI	tion of Exp	penditure	1	
To Whom Paid DEREK ROCKEY			мо	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			мо	DAY	YEAR		
Mailing Address PO BOX 2129			6	14	2022	\$	202.86
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Descrip TRAVEI	otion of Exp	penditure	1	

To Wh	om Paid										
RONALD CAVALIER			мо	DAY	YEAR						
Mailing Address P.O. BOX 2129				6	14	2022	\$	665.50			
City	City PHILADELPHIA State Zip Code (Plus 4)					Description of Expenditure					
PA 19103				TRAVE	-						
	om Paid AS STONER	L			мо	DAY	YEAR				
Mailing	g Address	P.O. BOX 2129			6	14	2022	\$	2,800.00		
City	PHILADEL	PHIA	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure				
			PA	19103	STRATE	EGIC CONS	SULTING				
	om Paid COPIER SE	ERVICE			мо	DAY	YEAR				
Mailin	g Address	158 DURHAM RD.			6	14	2022	\$	539.70		
City	NEWTOWI	N	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure				
	PA 18940					SUPPLIES	5				
-											
To Wh CMDI	om Paid		I	1	мо	DAY	YEAR				
CMDI	om Paid g Address	1593 SPRING HILL	rd. ste. 400	1	мо 7	DAY 5	YEAR 2022	\$	2,400.00		
CMDI			RD. STE. 400	Zip Code (Plus 4)	7		2022	\$	2,400.00		
CMDI Mailing	g Address		1	Zip Code (Plus 4) 22182	7 Descrip	5	2022 penditure	\$	2,400.00		
CMDI Mailing City	g Address		State		7 Descrip	5 otion of Exp	2022 penditure	\$	2,400.00		
CMDI Mailing City To Wh CMDI	g Address TYSONS C		State VA		7 Descrip DATA N	5 btion of Exp MANAGEME	2022 penditure	\$	2,400.00 2,500.00		
CMDI Mailing City To Wh CMDI	g Address TYSONS C	CORNER 1593 SPRING HILL	State VA		7 Descrip DATA N MO 7	5 htion of Exp MANAGEME DAY	2022 Penditure ENT YEAR 2022	\$			
CMDI Mailing City To Wh CMDI Mailing	g Address TYSONS C om Paid g Address	CORNER 1593 SPRING HILL	State VA RD. STE. 400	22182	7 Descrip DATA N MO 7 Descrip	5 btion of Exp MANAGEME DAY 8	2022 eenditure NT YEAR 2022 eenditure	\$			
CMDI Mailing City To Wh CMDI Mailing City	g Address TYSONS C oom Paid g Address TYSONS C	CORNER 1593 SPRING HILL	State VA RD. STE. 400 State	22182	7 Descrip DATA N MO 7 Descrip	5 Manageme DAY 8	2022 eenditure NT YEAR 2022 eenditure	\$			
CMDI Mailing City To Wh CMDI Mailing City To Wh EMER/	g Address TYSONS C oom Paid g Address TYSONS C	CORNER 1593 SPRING HILL	State VA RD. STE. 400 State VA	22182	7 Descrip DATA N MO 7 Descrip DATA N	5 ANAGEME DAY 8 DAY 8	2022 penditure NT YEAR 2022 penditure NT	\$			
CMDI Mailing City To Wh CMDI Mailing City To Wh EMER/	g Address TYSONS C oom Paid g Address TYSONS C oom Paid ALD BUSINE	CORNER 1593 SPRING HILL CORNER ESS SUPPLY 4807 ASHBURNER S	State VA RD. STE. 400 State VA	22182	7 Descrip DATA N MO 7 Descrip DATA N MO 9	5 ption of Exp ANAGEME DAY 8 ption of Exp ANAGEME DAY	2022 penditure NT YEAR 2022 penditure ENT YEAR 2022	\$	2,500.00		

To Whom Paid ESPLANADE STRATEGIES LLC			мо	DAY	YEAR		
Mailing Address P.O. BOX 382090				14	2022	\$	2,800.00
City CAMBRIDGE State Zip Code (Plus 4) MA 02238				tion of Exp			
To Whom Paid GOLDSTEIN LAW PARTNERS LLC				DAY	YEAR		
Mailing Address 11 CHURC	H RD.		8	8	2022	\$	240.90
City HATFIELD	State PA	Zip Code (Plus 4) 19440	Descrip LEGAL	ntion of Exp FEES	penditure		
To Whom Paid RAP PERFORMANCE LLC			мо	DAY	YEAR		
Mailing Address 1691 SOU	TH BROOKFIELD STREET	-	6	14	2022	\$	961.92
City VINELAND	/INELAND State Zip Code (Plus 4) NJ 08361				benditure E	I	
To Whom Paid RAP PERFORMANCE LLC	I	L	мо	DAY	YEAR		
RAP PERFORMANCE LLC	TH BROOKFIELD STREET	I	мо 9	DAY 9	YEAR 2022	\$	166.43
RAP PERFORMANCE LLC	TH BROOKFIELD STREET State NJ	- Zip Code (Plus 4) 08361	9 Descrip		2022 penditure		166.43
RAP PERFORMANCE LLC Mailing Address 1691 SOU	State	Zip Code (Plus 4)	9 Descrip	9 otion of Exp	2022 penditure		166.43
RAP PERFORMANCE LLC Mailing Address 1691 SOUT City VINELAND To Whom Paid TARGETED VICTORY LLC Mailing Address	State	Zip Code (Plus 4)	9 Descrip CAMPA	9 Dition of Exi IGN ATTIR	2022 penditure E		166.43 60,000.00
RAP PERFORMANCE LLC Mailing Address 1691 SOUT City VINELAND To Whom Paid TARGETED VICTORY LLC Mailing Address	State NJ	Zip Code (Plus 4)	9 Descrip CAMPA MO 8 Descrip	9 btion of Exp IGN ATTIR DAY	2022 Denditure E YEAR 2022 Denditure	\$	
RAP PERFORMANCE LLC Mailing Address 1691 SOU City VINELAND To Whom Paid TARGETED VICTORY LLC Mailing Address 2311 WILS	State NJ SON BLVD STE 200 State	Zip Code (Plus 4) 08361 Zip Code (Plus 4)	9 Descrip CAMPA MO 8 Descrip	9 htion of Exp IGN ATTIR DAY 8 stion of Exp	2022 Denditure E YEAR 2022 Denditure	\$	
RAP PERFORMANCE LLC Mailing Address 1691 SOU City VINELAND To Whom Paid TARGETED VICTORY LLC Mailing Address 2311 WILS City ARLINGTON To Whom Paid TARGETED VICTORY LLC	State NJ SON BLVD STE 200 State	Zip Code (Plus 4) 08361 Zip Code (Plus 4)	9 Descrip CAMPA MO 8 Descrip DIGITA	9 ption of Exp IGN ATTIR DAY 8 ption of Exp L FUNDRA	2022 Denditure E YEAR 2022 Denditure ISING	\$	

						- 11
To Whom Paid TRUIST CREDIT CARD	мо	DAY	YEAR			
Mailing Address P.O. BOX 58034	6	10	2022	\$ 202.91		
City CHARLOTTE		tion of Exp				
To Whom Paid TRUIST CREDIT CARD	мо	DAY	YEAR			
Mailing Address P.O. BOX 58034	10		6	10	2022	\$ 505.94
City CHARLOTTE	CityCHARLOTTEStateZip Code (Plus 4)NC28258				penditure SUPPLIES	
To Whom Paid TRUIST CREDIT CARD			мо	DAY	YEAR	
Mailing Address P.O. BOX 58034	10		6	10	2022	\$ 543.19
City CHARLOTTE	StateZip Code (Plus 4)NC28258				penditure SUPPLIES	
To Whom Paid TRUIST CREDIT CARD			мо	DAY	YEAR	
Mailing Address P.O. BOX 58034	40		6	10	2022	\$ 2,496.45
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258		otion of Ex		
To Whom Paid TRUIST CREDIT CARD			мо	DAY	YEAR	
Mailing Address P.O. BOX 58034	40		7	11	2022	\$ 116.33
City CHARLOTTE	-	tion of Ex	penditure			
	NC	28258	TRAVE	L/OFFICE S	SUPPLIES	
To Whom Paid TRUIST CREDIT CARD	NC	28258	MO	DAY	YEAR	
		28258				\$ 245.17

To Whom Paid TRUIST CREDIT CARD				DAY	YEAR	
Mailing Address P.O. BOX 580340				11	2022	\$ 849.30
CityCHARLOTTEStateZip Code (Plus 4)NC28258				tion of Exp		
To Whom Paid TRUIST CREDIT CARD	мо	DAY	YEAR			
Mailing Address P.O. BOX 580340			7	11	2022	\$ 5,716.99
City CHARLOTTE	State NC	Zip Code (Plus 4) 28258		tion of Ex		
To Whom Paid TRUIST CREDIT CARD			мо	DAY	YEAR	
Mailing Address P.O. BOX 580340			8	8	2022	\$ 7.43
City CHARLOTTE	City CHARLOTTE State Zip Code (Plus 4) NC 28258			tion of Exp		
To Whom Paid TRUIST CREDIT CARD			мо	DAY	YEAR	
			мо 8	DAY 8	YEAR 2022	\$ 116.05
TRUIST CREDIT CARD	State NC	Zip Code (Plus 4) 28258	8 Descrip		2022 penditure	\$ 116.05
TRUIST CREDIT CARD Mailing Address P.O. BOX 580340			8 Descrip	8 Dition of Exp	2022 penditure	\$ 116.05
TRUIST CREDIT CARD Mailing Address P.O. BOX 580340 City CHARLOTTE To Whom Paid			8 Descrip TRAVEL	8 ption of Exp _/OFFICE S	2022 penditure SUPPLIES	\$ 236.98
TRUIST CREDIT CARD Mailing Address P.O. BOX 580340 City CHARLOTTE To Whom Paid TRUIST CREDIT CARD Mailing Address			8 Descrip TRAVEL MO 8 Descrip	8 ption of Exp _/OFFICE S DAY	2022 penditure SUPPLIES YEAR 2022 penditure	
TRUIST CREDIT CARD Mailing Address P.O. BOX 580340 City CHARLOTTE To Whom Paid TRUIST CREDIT CARD Mailing Address P.O. BOX 580340	NC	28258 Zip Code (Plus 4)	8 Descrip TRAVEL MO 8 Descrip	B Dation of Exp _/OFFICE S DAY 8 Stion of Exp	2022 penditure SUPPLIES YEAR 2022 penditure	
TRUIST CREDIT CARD Mailing Address P.O. BOX 580340 City CHARLOTTE To Whom Paid TRUIST CREDIT CARD Mailing Address P.O. BOX 580340 City CHARLOTTE To Whom Paid To Whom Paid	NC	28258 Zip Code (Plus 4)	8 Descrip TRAVEL MO 8 Descrip TRAVEL	8 ption of Exp _/OFFICE S DAY 8 ption of Exp _/OFFICE S	2022 penditure SUPPLIES YEAR 2022 penditure SUPPLIES	

To Whom Paid TRUIST CREDIT CARD	мо	DAY	YEAR			
Mailing Address P.O. BOX 58	11	14	2022	\$ 0.27		
City CHARLOTTE		tion of Exp				
To Whom Paid TRUIST/BB& T				DAY	YEAR	
Mailing Address 1445 NEW	ORK AVE., NW		6	21	2022	\$ 214.29
City WASHINGTON	City WASHINGTON State Zip Code (Plus 4) DC 20005					
To Whom Paid TRUIST/BB& T			мо	DAY	YEAR	
Mailing Address 1445 NEW 1	ORK AVE., NW		7	21	2022	\$ 12.25
City WASHINGTON	Descrip BANK F	tion of Exp	penditure			
To Whom Paid TRUIST/BB& T			мо	DAY	YEAR	
TRUIST/BB& T	/ORK AVE., NW		мо 9	DAY 21	YEAR 2022	\$ 24.00
TRUIST/BB& T	/ORK AVE., NW State DC	Zip Code (Plus 4) 20005	9	21 Dition of Exp	2022	24.00
TRUIST/BB& T Mailing Address 1445 NEW Y	State		9 Descrip	21 Dition of Exp	2022	24.00
TRUIST/BB& T Mailing Address 1445 NEW N City WASHINGTON To Whom Paid TRUIST/BB& T	State		9 Descrip BANK F	21 Detion of Exp EE	2022 penditure	24.00
TRUIST/BB& T Mailing Address 1445 NEW N City WASHINGTON To Whom Paid TRUIST/BB& T	State DC		9 Descrip BANK F MO 10	DAY 21 21 221 221 21 21	2022 penditure YEAR 2022	\$
TRUIST/BB& T Mailing Address 1445 NEW N City WASHINGTON To Whom Paid TRUIST/BB& T Mailing Address 1445 NEW N	ORK AVE., NW	20005	9 Descrip BANK F MO 10 Descrip	DAY 21 21 221 221 21 21	2022 penditure YEAR 2022	\$
TRUIST/BB& T Mailing Address 1445 NEW Y City WASHINGTON To Whom Paid TRUIST/BB& T Mailing Address 1445 NEW Y City WASHINGTON To Whom Paid TRUIST/BB& T Mailing Address	ORK AVE., NW	20005	9 Descrip BANK F MO 10 Descrip BANK F	DAY 21 DAY 21 DE EE	2022 penditure YEAR 2022 penditure	\$

							1/(82 1/	
To Whom Paid UNION LEAGUE CLUB			мо	DAY	YEAR			
Mailing Address 140 S BROAD ST			8	8	2022	\$	1,493.42	
City PHILADELPHIA	ity PHILADELPHIA State Zip Code (Plus 4) PA 19102			Description of Expenditure CATERING				
To Whom Paid MASSENG COMMUNICATIONS			мо	DAY	YEAR			
Mailing Address C/O JOYCE RO	MANUS		9	12	2022	\$	(11,614.12)	
City SILVER SPRING	State MD	Zip Code (Plus 4) 20901		otion of Exp AYMENT IS				
To Whom Paid WINRED			мо	DAY	YEAR			
Mailing Address 1776 WILSON	BLVD STE. 530		12	31	2022	\$	30.00	
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 Reportin			ng Period					
MCSWAIN FOR GOVERNOR			From:	<u>11</u>	./29/2022	То:		<u>12/31/2022</u>
					DATE			Outstanding Balance of Debt
Name of Creditor BILL MCSWAIN				мо	DAY	YEAR		
Mailing Address P.O. BOX 2129				12	31	202:	\$	100,000.00
City PHILADELPHIA	State	Zip Code (Pl	us 4)	Descrip	tion of Del	bt		
	PA	19103		CANDIDATE LOAN				
					DATE			Outstanding Balance of Debt
Name of Creditor TARGETED VICTORY LLC				мо	DAY	YEAR		
Mailing Address 2311 WILSON BLV	D 20			5	15	2022	2 \$	24,294.69
City ARLINGTON	State	Zip Code (Pl	us 4)	Descrip	tion of Del	bt		
	VA	22201		051520)22			
				-				PAGE TOTAL
Enter Grand Total of Unpaid Deb	ts on Page 1, Repo	ort Cover Pa	ge, Item	G.			\$	124,294.69