Campaign Finance Report

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

Filer Identification 2000190 Number :					Rep File			CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		AFT-	-PEN	NNSYL	-VANIA									
Street Address:	3031 WALTO	N RD, B	UILDING A,	STE	340												
City:	PLYMOUTH M	EETING						State:	PA			Zip Cod	le: 19	9462			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2023					NG METHO CHECK O				PAPER		PAPER D		TTE	
Name of Office S	Sought by Candida	te:	-					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	ty
	,							МО	DAY	YE	AR	Number	Touc			couc	
								11		7	2023		(SEE IN	ISTRUCTI	ONS FOR (CODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR			_	МО	DAY	YE	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	in oni:		1 1	2	023	Т	<u> </u>	3	:	27	2023						
A. Amount Bro	ught Forward Froi	m Last R	eport				\$			173,8	319.87						
B. Total Monetary Contributions And Receipts (From Schedule I							\$			1,4	188.00						
C. Total Funds Available (Sum Of Lines A and B)									175,3	307.87							
D. Total Expenditures (From Schedule III)						\$			5,0	00.00							
E. Ending Cash Balance (Subtract Line D From Line C)							\$		-	170,3	07.87						
F. Value Of In-	Kind Contributions	s Receiv	ed (From Se	chedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	IDA	١VI	T SE	CTION									
	s a Committee rep	-	_						-		_						
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached scl	hedules	filed	l on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	ıe.
Sworn to and subs	cribed before me this	s	20							S	ignature	of Perso	n Submit	ting Re	oort		-
	<u> </u>						-					Prin	ted Nam	e			-
My Commission Ex	Signatu opires	ire										Ema	il				-
	мо	D	AY	YR			-		Are	ea Cod	le		e Telepi	none Nu	mber		-
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and beli	ef this	polit	ical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	5,
Sworn to and subso	ribed before me this										s	ignature o	of Candid	ate			-
	day of		_ 20				_										_
	G:						-					Printe	d Name				
My Commission Exp	Signature ires											Ema	il				-
	МО	D	AY	YR			-		Area	Code		Da	aytime 1	elephor	ne Numb	er	·

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period						
AFT-PENNSYLVANIA	From:	1/1/202	<u>3</u> To:	3/27/2023				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting) Period	(1)	\$	1,488.00				
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	(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)			\$	0.00				
TOTAL for the Reporting	Period	(3)	\$	0.00				
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)								
TOTAL for the Reporting) Period	(4)	\$	0.00				
			1					
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,488.00				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			From: To			o:		
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL \$0.00

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 Candid	Name of Fining Committee of Candidate			Reporting Period From: To:					
					DATE		AN	4OUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$ \$	0.00	
City	State	Zip Code (Plus 4)	1						

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				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	PAGE TOTAL
							\$	0.00

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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 Period	I							
AFT-PENNSYLVANIA	From:	<u>1/1/2023</u> To:	<u>3/27/2023</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,	•	\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	eporting F	Period			
				Fr	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)					
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ee of Ci	ity	State	•	Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-l	Kind (Contributions [etail	led				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Reporting Period						
AFT-PENNSYLVANIA	Fre	rom	<u>1/1</u>	L/2023	To:	3/27/2023
			DATE			AMOUNT
To Whom Roid						

				DATE			AMOUNT	
To Whom Paid Malcolm for PA PAC			МО	DAY	YEAR			
Mailing Address P O Box 3307			3	21	2023	\$	5,000.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19103	Contrib	ution				
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							5,000.00	