### **Campaign Finance Report**

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

Filer Identificati Number :	ion	2017	0364				port ed B		CANDI	DATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBE	YIST		
Name of Filing C	Committee	e, Candida	ate or L	obbyist:		MAR	RIA	OR P	A									
Street Address:	РО В	OX 1006																
City:	SPRII	NG HOUS	SE						State:	PA			<b>Zip Code:</b> 19477					
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	PRIMARY					Y F ARY	POST- 3.			AMENDM REPORT		Yes	No	<b>\</b>	
(place X to the right of	6TH TUES		4.	2ND FRIDAY PRE- 5. 30 ELECTION EL					Y F Tion		TERMINATION Yes REPORT?			No	<b>&gt;</b>			
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2023					IG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	– Sought by	Candidat	te:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
SENATOR IN T	HE GENEI	RAL ASSE	EMBI Y						МО	DAY	YE	AR	12	STS	DEM		09	
							•		11		7	2023		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
Summary of Expenditures		and	МО	DAY	YEAF		Т	^	МО	DAY		EAR	FC	R OFFI	CE USE	ONLY		
-				3 28	3 2	.023	•	1	5		1	2023						
A. Amount Bro				-				\$				053.97						
B. Total Monet					n Sche	dule	· I)	\$				244.00						
C. Total Funds				-				\$				297.97						
D. Total Expen	ditures (F	rom Sche	edule II	I)				\$			24,5	95.61						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$			29,7	02.36	-					
F. Value Of In-	Kind Cont	tributions	Receive	ed (From S	chedu	le II	:)	\$				0.00						
G. Unpaid Debt	ts And Ob	ligations	(From S	Schedule I	/)			\$				0.00			'			
					AFF	IDA	\VI	ΓSE	CTION									
PART I - If this is		-		_														
I swear (or affirm) correct and comple		eport, incl	uding the	attached so	hedule	s filed	d on	paper (	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	er , true	
Sworn to and subs	cribed befo	ore me this		20							S	ignature	of Perso	n Submit	ting Rep	ort		
		Signatur	ra					<b>-</b> -					Prin	ted Name	e			
My Commission Ex	kpires	Signatui											Ema	il				
	•	мо	D	AY	YR					Ar	ea Cod	le	Daytim	ie Telepl	none Nui	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		e best of m	ny knowle	edge and bel	ief this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc		re me this										s	ignature (	of Candid	ate			
	day of							-					Printe	ed Name				
		Signature						-										
My Commission Exp	oires												Ema	il				
	_	мо	D	AY	YF	t		•		Area	Code		D	aytime T	elephon	e Numbe	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
MARIA FOR PA	<u>3/28/202</u>	<u>3</u> To:	5/1/2023	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	84.00
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)			\$	160.00
TOTAL for the Reporting	) Period	(2)	\$	160.00
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	J Period	(4)	\$	0.00
				-
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			\$	244.00

#### **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 Candida	e	R	eporting	Period			
		F	rom:		То	:	
		,		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### 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					eriod		
MARIA FOR PA			Fror	n:	3/28/2	2023 <b>T</b> o	<u>5/1/2023</u>
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
STEVEN DAVIDSON			_				
Mailing Address 6925 SOCTFORTH	RD						<b>\$</b> 25.00
City PHILADELPHIA	State	Zip Code (Plus 4	)	4	30	2023	
	PA	191193711					
Full Name of Contributor STEVEN DAVIDSON				МО	DAY	YEAR	
Mailing Address 6925 SOCTFORTH	RD						<b>\$</b> 25.00
City PHILADELPHIA	State	Zip Code (Plus 4	)	3	30	2023	23.00
	PA	191193711					
Full Name of Contributor			i				
STEVEN DAVIDSON				МО	DAY	YEAR	
Mailing Address 6925 SOCTFORTH	RD						<b>\$</b> 25.00
City PHILADELPHIA	State	Zip Code (Plus 4	)	2	28	2023	
	PA	191193711					
Full Name of Contributor			T			V=45	
STEVEN DAVIDSON			- 1	МО	DAY	YEAR	
Mailing Address 6925 SOCTFORTH	RD						<b>\$</b> 25.00
City PHILADELPHIA	State	Zip Code (Plus 4	)	1	30	2023	
	PA	191193711					
Full Name of Contributor							
SUSAN BRENNEMAN			- 1	МО	DAY	YEAR	
Mailing Address 910 DELAWARE AV	/E						<b>\$</b> 15.00
City LANSDALE	State	Zip Code (Plus 4	)	4	14	2023	
	PA	194463422					
Full Name of Contributor		<del></del>	$\overline{}$			W= 5 =	
SUSAN BRENNEMAN				МО	DAY	YEAR	
Mailing Address 910 DELAWARE AV	/E						<b>\$</b> 15.00
City LANSDALE	State	Zip Code (Plus 4	)	3	14	2023	
	PA	194463422					

Full Name of Contributo	r		мо	DAY	YEAR	
SUSAN BRENNEMAN						
Mailing Address 91	D DELAWARE AVE					<b>\$</b> 15.00
City LANSDALE	State	Zip Code (Plus 4)	2	14	2023	
	PA	194463422				
Full Name of Contribute	r		мо	DAY	VEAD	
Full Name of Contributo SUSAN BRENNEMAN	r		мо	DAY	YEAR	
SUSAN BRENNEMAN	D DELAWARE AVE		МО	DAY	YEAR	\$ 15.00
SUSAN BRENNEMAN	-	Zip Code (Plus 4)	<b>MO</b>	<b>DAY</b> 14	<b>YEAR</b> 2023	<b>\$</b> 15.00

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

PAGE TOTAL
\$ 160.00

#### **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			0.00
Mailing Address							<b>-</b> \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TO	TAL
Enter Grand Total of Part C on Scheo	lule 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	ame of Filing Committee or Candidate				orting Pe	riod			
				Fron	n:		To	o:	
					D	ATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zip Code (F	lus 4	1)					
Employer Name	•	I			Occupa	tion	•	•	
Employer Mailing Address/Principal Pla	ace of Business	City		,		State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed S	ummary Pag	ge, S	ectio	on 3.				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 Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description		<b>.</b>			•	•		
Futor Crowd Total of Book	F an Cabadula I Batailad	Summer Base Se		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, Se	ection	4.			\$	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 Peri	od	
MARIA FOR PA	From:	3/28/2023 To:	5/1/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	₹	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Candidate				Reporting Period				
F					·			
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate					g Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor			•		Occu	pation			
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	ip Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	nedule II, In-K	ind	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.	•								0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
MARIA FOR PA	From	3/28/2023	То:	5/1/2023			

				DATE		AMOUNT				
To Whom Paid			мо	DAY	YEAR					
ACTBLUE			1.0							
Mailing Address PO BOX 44114	6		1	10	2023	\$	8.47			
City WEST SOMERVILLE	State	Zip Code (Plus 4)	Description of Expenditure							
MA 021440031				PROCESSING FEE						
To Whom Paid			мо	DAY	YEAR					
ACTBLUE			1-10		IZAK					
Mailing Address PO BOX 44114	6		1	13	2023	\$	1.43			
City WEST SOMERVILLE State Zip Code (Plus 4)			Description of Expenditure							
MA 021440031				PROCESSING FEE						
To Whom Paid			МО	DAY	YEAR					
ACTBLUE			140	JA.	ILAK					
Mailing Address PO BOX 44114	6		2	9	2023	\$	6.00			
City WEST SOMERVILLE State Zip Code (Plus 4)			Description of Expenditure							
MA 021440031				PROCESSING FEE						
To Whom Paid			мо	DAY	YEAR					
ACTBLUE			МО	DAT	TEAR					
Mailing Address PO BOX 44114	6		3	9	2023	\$	5.49			
City WEST SOMERVILLE	State	Zip Code (Plus 4)	Description of Expenditure							
MA 021440031				PROCESSING FEE						
To Whom Paid			мо	DAY	YEAR					
ACTBLUE			1410	DAI	ILAK					
Mailing Address PO BOX 44114	6		4	11	2023	\$	6.50			
City WEST SOMERVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	MA	021440031	PROCES	SSING FEE						
To Whom Paid			МО	DAY	YEAR					
DAN RONCA FOR JUDGE			l <sup>1</sup> IO	DAT	ILAK					
Mailing Address 1510 MEGAN (	CIR		4	17	2023	\$	1,000.00			
City BLUE BELL State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	<u> </u>				
	PA	194223625	CONTRI	IBUTION M	IADE					
15.123025										

								JL 13		
To Who	om Paid			МО	DAY	YEAR				
FRIENDS OF KIMBERLY KOCH							_	4 250 00		
Mailing Address PO BOX 3203				4	18	2023	\$	1,250.00		
City MAPLE GLEN State Zip Code (Plus 4)			Description of Expenditure							
PA 190028203				CONTRIBUTION MADE						
	om Paid			мо	DAY	YEAR				
	ER HARLEYSVILLE & amp; NORTI	H PENN SENIOR SERV	/ICES					252.00		
Mailing	Address 312 ALUMNI AVE			3	21	2023	\$	250.00		
City HARLEYSVILLE State Zip Code (Plus 4)			Description of Expenditure							
		PA	194382306	EVENT AD/SPONSOR						
To Who	om Paid			МО	DAY	YEAR				
HP INS	STANT INK									
Mailing	Address 1501 PAGE MILL RD			1	13	2023	\$	26.49		
City	PALO ALTO	State	Zip Code (Plus 4)	Description of Expenditure						
		CA	943041126	OFFICE SUPPLY						
To Who	om Paid			мо	DAY	YEAR				
HP INS	STANT INK									
Mailing	Address 1501 PAGE MILL RD			2	8	2023	\$	26.49		
City PALO ALTO State Zip Code (Plus 4)				Description of Expenditure						
		CA	943041126	OFFICE SUPPLY						
To Who	om Paid			МО	DAY	YEAR				
HP INSTANT INK										
Mailing	Address 1501 PAGE MILL RD			3	8	2023	\$	26.49		
City	PALO ALTO	State	Zip Code (Plus 4)	Description of Expenditure						
		CA	943041126	OFFICE SUPPLY						
To Who	om Paid			МО	DAY	YEAR				
HP INS	STANT INK									
Mailing	Address 1501 PAGE MILL RD			4	10	2023	\$	26.49		
City	PALO ALTO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		CA	943041126	OFFICE SUPPLY						
To Who	om Paid			мо	DAY	YEAR				
HUMAN	N RIGHTS CAMPAIGN			140		ILAK				
Mailing	Address 1640 RHODE ISLAN	D AVE NW		1	9	2023	\$	365.65		
City	WASHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
DC 200363200			GALA T	ICKETS						
To Whom Paid			МО	DAY	YEAR					
JAMILA WINDER FOR MONTGOMERY COUNTY				1.13		1 = 7 414				
Mailing Address PO BOX 763				4	18	2023	\$	1,250.00		
City         NORRISTOWN         State         Zip Code (Plus 4)           PA         194040763			Descrip	tion of Exp	enditure					
			194040763	CONTRI	BUTION M	ADE				

						TAGE	14		
To Whom Paid				DAY	YEAR				
LOEW'S HOTEL									
Mailing Address 1200 MARKET ST				6	2023	\$	34.30		
City PHILADELPHIA State Zip Code (Plus 4)			Descrip	tion of Exp	enditure				
PA 191073615				EVENT PARKING EXPENSE					
To Whom Paid			мо	DAY	YEAR				
METHACTON POST PROM									
Mailing Address PO BOX 39			4	24	2023	\$	250.00		
City EAGLEVILLE State Zip Code (Plus 4)			Descrip	tion of Exp	enditure				
	PA	194080039	SPONSORSHIP						
To Whom Paid			мо	DAY	YEAR				
MITZVAH CIRCLE									
Mailing Address 1561 GEHMAN RD			3	30	2023	\$	207.57		
City HARLEYSVILLE	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	194382930	EVENT S	SPONSOR					
To Whom Paid			мо	DAY	YEAR				
MONTCO DEMOCRATIC WOMEN'S LEAD	ERSHIP INITIATIVE		1-10		1 = Aux				
Mailing Address 701 THATCHER LN			1	17	2023	\$	250.00		
City HATFIELD	HATFIELD State Zip Code (Plus 4) Description of								
	PA	194402200	EVENT						
To Whom Paid			мо	DAY	YEAR				
MONTGOMERY COUNTY DEMOCRATIC COMMITTEE									
Mailing Address PO BOX 857			1	23	2023	\$	2,500.00		
City NORRISTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	194040857	CONTRIBUTION MADE						
To Whom Paid			мо	DAY	YEAR				
NGP VAN									
Mailing Address 1445 NEW YORK AV	E NW STE 200		1	3	2023	\$	265.00		
City WASHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	DC	200052158	SOFTWARE LICENSE						
To Whom Paid			мо	DAY	YEAR				
NGP VAN			1-10		1 = Aux				
Mailing Address 1445 NEW YORK AVE NW STE 200			2	3	2023	\$	265.00		
City WASHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
DC 200052158			SOFTW	ARE LICEN	SE				
To Whom Paid			мо	DAY	YEAR				
NGP VAN									
Mailing Address 1445 NEW YORK AVE NW STE 200			3	2	2023	\$	265.00		
City WASHINGTON State Zip Code (Plus 4)			Descrip	tion of Exp	enditure				
DC 200052158				SOFTWARE LICENSE					
	1								

							PAGE 15		
To Whom Paid			МО	DAY	YEAR				
NGP VAN			1-10						
Mailing Address 1445 NEW YORK AVE NW STE 200				3	2023	\$	265.00		
City         WASHINGTON         State         Zip Code (Plus 4)           DC         200052158				tion of Exp	enditure				
				SOFTWARE LICENSE					
To Whom Paid				DAY	YEAR				
NORTH PENN DEMOCRATIC COMMITTEE									
Mailing Address 701 THATCH	IER LN		2	17	2023	\$	250.00		
City HATFIELD State Zip Code (Plus 4)			Description of Expenditure						
	PA	194402200	CONTRIBUTION MADE						
To Whom Paid			МО	DAY	YEAR				
OSBORNE FOR JUSTICE									
Mailing Address PO BOX 265			2	23	2023	\$	250.00		
City WILLOW GROVE State Zip Code (Plus 4)				Description of Expenditure					
PA 190900265				CONTRIBUTION MADE					
To Whom Paid			мо	DAY	YEAR				
PA SENATE DEMOCRATIC CAMPAIGN COMMITTEE									
Mailing Address PO BOX 59358			1	18	2023	\$	15,000.00		
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	191029358	CONTRIBUTION MADE						
To Whom Paid			МО	DAY	YEAR				
WIX.COM LTD			1-10						
Mailing Address 100 GANSE	VOORT ST		1	11	2023	\$	190.80		
City NEW YORK	State	Zip Code (Plus 4)	Description of Expenditure						
NY 100141477				WEBSITE EXPENSE					
To Whom Paid			МО	DAY	YEAR				
WIX.COM LTD									
Mailing Address 100 GANSEVOORT ST			1	20	2023	\$	353.44		
City NEW YORK State Zip Code (Plus 4)			Description of Expenditure						
NY 100141477				WEBSITE EXPENSE					
Futou Cound T : 1 C T							PAGE TOTAL		
Enter Grand Total of Expend	itures on Page 1, Rep	oort Cover Page, Item D	<b>'.</b>			\$	24,595.61		
						ı			