

Commonwealth of Pennsylvania

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 : 20170364		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: MARIA FOR PA										
Street Address: PO BOX 1006										
City: SPRING HOUSE			State: PA	Zip Code: 19477						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2023	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
SENATOR IN THE GENERAL ASSEMBLY				MO	DAY	YEAR	12	STS	DEM	09
				11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		3	28	2023	TO	5	1	2023		
A. Amount Brought Forward From Last Report				\$		54,053.97				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		244.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		54,297.97				
D. Total Expenditures (From Schedule III)				\$		24,595.61				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		29,702.36				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
MARIA FOR PA	From: <u>3/28/2023</u> To: <u>5/1/2023</u>

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 Period (4)	\$ 0.00

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.)	\$ 244.00
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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
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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
MARIA FOR PA	From: <u>3/28/2023</u> To: <u>5/1/2023</u>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 25.00
STEVEN DAVIDSON				4	30	2023	
Mailing Address 6925 SOCTFORTH RD							
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191193711					
Full Name of Contributor				MO	DAY	YEAR	\$ 25.00
STEVEN DAVIDSON				3	30	2023	
Mailing Address 6925 SOCTFORTH RD							
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191193711					
Full Name of Contributor				MO	DAY	YEAR	\$ 25.00
STEVEN DAVIDSON				2	28	2023	
Mailing Address 6925 SOCTFORTH RD							
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191193711					
Full Name of Contributor				MO	DAY	YEAR	\$ 25.00
STEVEN DAVIDSON				1	30	2023	
Mailing Address 6925 SOCTFORTH RD							
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191193711					
Full Name of Contributor				MO	DAY	YEAR	\$ 15.00
SUSAN BRENNEMAN				4	14	2023	
Mailing Address 910 DELAWARE AVE							
City LANSDALE	State PA	Zip Code (Plus 4) 194463422					

Full Name of Contributor SUSAN BRENNEMAN			MO	DAY	YEAR	\$ 15.00
Mailing Address 910 DELAWARE AVE			3	14	2023	
City LANSDALE	State PA	Zip Code (Plus 4) 194463422				
Full Name of Contributor SUSAN BRENNEMAN			MO	DAY	YEAR	\$ 15.00
Mailing Address 910 DELAWARE AVE			2	14	2023	
City LANSDALE	State PA	Zip Code (Plus 4) 194463422				
Full Name of Contributor SUSAN BRENNEMAN			MO	DAY	YEAR	\$ 15.00
Mailing Address 910 DELAWARE AVE			1	14	2023	
City LANSDALE	State PA	Zip Code (Plus 4) 194463422				

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: To:

	DATE			AMOUNT			
Full Name of Contributing Committee	MO	DAY	YEAR				
Mailing Address				\$ 0.00			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">City</td> <td style="width: 20%; padding: 5px;">State</td> <td style="width: 50%; padding: 5px;">Zip Code (Plus 4)</td> </tr> </table>	City	State	Zip Code (Plus 4)				
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 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	
Mailing Address				\$ 0.00
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	Reporting Period
	From: _____ To: _____

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

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

PAGE TOTAL
\$ 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 MARIA FOR PA	Reporting Period From: <u>3/28/2023</u> To: <u>5/1/2023</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 RECEIVED - 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: _____

	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:	
				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

Name of Filing Committee or Candidate	Reporting Period
MARIA FOR PA	From <u>3/28/2023</u> To: <u>5/1/2023</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
ACTBLUE	1	10	2023	\$ 8.47
Mailing Address PO BOX 441146				
City WEST SOMERVILLE	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure PROCESSING FEE	
To Whom Paid ACTBLUE	1	13	2023	\$ 1.43
Mailing Address PO BOX 441146				
City WEST SOMERVILLE	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure PROCESSING FEE	
To Whom Paid ACTBLUE	2	9	2023	\$ 6.00
Mailing Address PO BOX 441146				
City WEST SOMERVILLE	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure PROCESSING FEE	
To Whom Paid ACTBLUE	3	9	2023	\$ 5.49
Mailing Address PO BOX 441146				
City WEST SOMERVILLE	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure PROCESSING FEE	
To Whom Paid ACTBLUE	4	11	2023	\$ 6.50
Mailing Address PO BOX 441146				
City WEST SOMERVILLE	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure PROCESSING FEE	

To Whom Paid DAN RONCA FOR JUDGE			MO	DAY	YEAR	
Mailing Address 1510 MEGAN CIR			4	17	2023	
City BLUE BELL	State PA	Zip Code (Plus 4) 194223625	Description of Expenditure CONTRIBUTION MADE			
To Whom Paid FRIENDS OF KIMBERLY KOCH			MO	DAY	YEAR	
Mailing Address PO BOX 3203			4	18	2023	
City MAPLE GLEN	State PA	Zip Code (Plus 4) 190028203	Description of Expenditure CONTRIBUTION MADE			
To Whom Paid GREATER HARLEYSVILLE & NORTH PENN SENIOR SERVICES			MO	DAY	YEAR	
Mailing Address 312 ALUMNI AVE			3	21	2023	
City HARLEYSVILLE	State PA	Zip Code (Plus 4) 194382306	Description of Expenditure EVENT AD/SPONSOR			
To Whom Paid HP INSTANT INK			MO	DAY	YEAR	
Mailing Address 1501 PAGE MILL RD			1	13	2023	
City PALO ALTO	State CA	Zip Code (Plus 4) 943041126	Description of Expenditure OFFICE SUPPLY			
To Whom Paid HP INSTANT INK			MO	DAY	YEAR	
Mailing Address 1501 PAGE MILL RD			2	8	2023	
City PALO ALTO	State CA	Zip Code (Plus 4) 943041126	Description of Expenditure OFFICE SUPPLY			
To Whom Paid HP INSTANT INK			MO	DAY	YEAR	
Mailing Address 1501 PAGE MILL RD			3	8	2023	
City PALO ALTO	State CA	Zip Code (Plus 4) 943041126	Description of Expenditure OFFICE SUPPLY			

To Whom Paid HP INSTANT INK			MO	DAY	YEAR	\$	26.49
Mailing Address 1501 PAGE MILL RD			4	10	2023		
City PALO ALTO	State CA	Zip Code (Plus 4) 943041126	Description of Expenditure OFFICE SUPPLY				
To Whom Paid HUMAN RIGHTS CAMPAIGN			MO	DAY	YEAR	\$	365.65
Mailing Address 1640 RHODE ISLAND AVE NW			1	9	2023		
City WASHINGTON	State DC	Zip Code (Plus 4) 200363200	Description of Expenditure GALA TICKETS				
To Whom Paid JAMILA WINDER FOR MONTGOMERY COUNTY			MO	DAY	YEAR	\$	1,250.00
Mailing Address PO BOX 763			4	18	2023		
City NORRISTOWN	State PA	Zip Code (Plus 4) 194040763	Description of Expenditure CONTRIBUTION MADE				
To Whom Paid LOEW'S HOTEL			MO	DAY	YEAR	\$	34.30
Mailing Address 1200 MARKET ST			3	6	2023		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191073615	Description of Expenditure EVENT PARKING EXPENSE				
To Whom Paid METHACTON POST PROM			MO	DAY	YEAR	\$	250.00
Mailing Address PO BOX 39			4	24	2023		
City EAGLEVILLE	State PA	Zip Code (Plus 4) 194080039	Description of Expenditure SPONSORSHIP				
To Whom Paid MITZVAH CIRCLE			MO	DAY	YEAR	\$	207.57
Mailing Address 1561 GEHMAN RD			3	30	2023		
City HARLEYSVILLE	State PA	Zip Code (Plus 4) 194382930	Description of Expenditure EVENT SPONSOR				

To Whom Paid MONTCO DEMOCRATIC WOMEN'S LEADERSHIP INITIATIVE			MO	DAY	YEAR	
Mailing Address 701 THATCHER LN			1	17	2023	
City HATFIELD	State PA	Zip Code (Plus 4) 194402200	Description of Expenditure EVENT			
To Whom Paid MONTGOMERY COUNTY DEMOCRATIC COMMITTEE			MO	DAY	YEAR	
Mailing Address PO BOX 857			1	23	2023	
City NORRISTOWN	State PA	Zip Code (Plus 4) 194040857	Description of Expenditure CONTRIBUTION MADE			
To Whom Paid NGP VAN			MO	DAY	YEAR	
Mailing Address 1445 NEW YORK AVE NW STE 200			1	3	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure SOFTWARE LICENSE			
To Whom Paid NGP VAN			MO	DAY	YEAR	
Mailing Address 1445 NEW YORK AVE NW STE 200			2	3	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure SOFTWARE LICENSE			
To Whom Paid NGP VAN			MO	DAY	YEAR	
Mailing Address 1445 NEW YORK AVE NW STE 200			3	2	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure SOFTWARE LICENSE			
To Whom Paid NGP VAN			MO	DAY	YEAR	
Mailing Address 1445 NEW YORK AVE NW STE 200			4	3	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure SOFTWARE LICENSE			

To Whom Paid NORTH PENN DEMOCRATIC COMMITTEE			MO	DAY	YEAR	
Mailing Address 701 THATCHER LN			2	17	2023	
City HATFIELD	State PA	Zip Code (Plus 4) 194402200	Description of Expenditure CONTRIBUTION MADE			
To Whom Paid OSBORNE FOR JUSTICE			MO	DAY	YEAR	
Mailing Address PO BOX 265			2	23	2023	
City WILLOW GROVE	State PA	Zip Code (Plus 4) 190900265	Description of Expenditure CONTRIBUTION MADE			
To Whom Paid PA SENATE DEMOCRATIC CAMPAIGN COMMITTEE			MO	DAY	YEAR	
Mailing Address PO BOX 59358			1	18	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191029358	Description of Expenditure CONTRIBUTION MADE			
To Whom Paid WIX.COM LTD			MO	DAY	YEAR	
Mailing Address 100 GANSEVOORT ST			1	11	2023	
City NEW YORK	State NY	Zip Code (Plus 4) 100141477	Description of Expenditure WEBSITE EXPENSE			
To Whom Paid WIX.COM LTD			MO	DAY	YEAR	
Mailing Address 100 GANSEVOORT ST			1	20	2023	
City NEW YORK	State NY	Zip Code (Plus 4) 100141477	Description of Expenditure WEBSITE EXPENSE			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 24,595.61

