### **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 :	on 90	00297			Rep File			CAN	DII	DATE		COM	1ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	ommittee, Cand	lidate or L	obbyist:	•	PSPA	4-P(	DLITI	CAL SI	JPP	ORT F	OR P	OLITIC	AL ACTI	ON				
Street Address:	600 THIRD	AVE																
City:	KINGSTON							State:	ł	PA			Zip Cod	le: 18	704-5	815		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA PRIMA		P	OST-	3.		AMENDM REPORT?		Yes	N	0	<b>√</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. <b>X</b>	2ND FRIDA ELECTION	Y PRE	- 5	j.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	0	<b>√</b>
report type)	ANNUAL REPOR	<b>RT</b> 7.	<b>Year</b> 2023					NG MET		_			PAPER		<b>√</b>	DISK	ETTE	
Name of Office S	ought by Candi	date:			-			DATE	01	F ELE	CTIO	N	District Number	Office Code	Pai	ty Cod	Cour	
								МО		DAY	YE	AR		•			40	
									11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES	)
	Receipts and	МО	DAY	YEAR				МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	trom:		6 6	20	023	Т	0		9	:	18	2023						
A. Amount Bro	ught Forward Fr	om Last P	Report				\$				13,0	91.23						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																		
C. Total Funds Available (Sum Of Lines A and B) \$ 13,091.23																		
D. Total Expenditures (From Schedule III) \$ 750.00																		
E. Ending Cash Balance (Subtract Line D From Line C)							\$				12,3	41.23						
F. Value Of In-	Kind Contribution	ns Receiv	red (From S	chedu	le II)	)	\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedule I\	/)			\$					0.00						
				AFF	IDA	VI	ΓSE	CTIO	N									
PART I - If this is		-	_							-		_						
I swear (or affirm) correct and comple		nciuaing th	e attacned sc	neaules	s riiea	on	paper	or by ei	ectr	onic me	eaium	, are to t	ne best o	r my knov	vieage	and be	iler , tr	ue
Sworn to and subs	cribed before me t day of	:his	20						•		S	ignature	of Perso	1 Submitt	ing Re	oort		
	Signa	ature					-		•				Prin	ted Name				-
My Commission Ex	rpires						_						Emai	I				
	МО	D	AY	YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	andidate's	authorized	Comm	nittee	e, Ca	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and bel	ief this	politi	ical	comm	ittee ha	s no	t viola	ted an	y provisi	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me th day of	nis	20									Si	ignature o	of Candida	ite			_
	— ——						-						Printe	d Name				-
	Signatur	re					-		-									_
My Commission Exp	ires												Emai	ıı				
	МО	D	AY	YR			•			Area	Code		Da	ytime Te	elephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

	_						
Name of Filing Committee or Candidate	Reporting Period						
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From:	<u>6/6/202</u>	<u>3</u> To:	9/18/2023			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reportin	g Period	(1)	\$	0.00			
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 Reportin	g Period	(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 Reportin	g Period	(3)	\$	0.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reportin	g Period	(4)	\$	0.00			
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Report Cover Page 2, Report Cover Page 3, Report Cover P			\$	0.00			

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Use	this Part to itemize onl with an aggregate valu								
Name of Filing Comm	nittee or Candidate		Reporting Period						
			From:			То	:		
		<b>'</b>			DATE			AMOUNT	
Full Name of Contribut	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	)						
	<b>'</b>	· · · · · · · · · · · · · · · · · · ·						DAGE 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 Candidate			Rep Fro					
					DATE			AMOUNT
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	me of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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.)

lame of Filing Committee or Candidate			Reporting Period						
			From: 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				Occupa	tion				
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Scho	edule I, Detailed Su	ımmary Page,	Section	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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i>	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	d							
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From:	<u>6/6/2023</u> <b>To:</b>	9/18/2023						
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 Candidat	:e		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	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				Re	porting l	Period				
					From:			To:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						МО	DAY	YEAR			
Mailing Address								\$	0.00		
City	State		Zip Code(I	Plus 4)							
Employer of Contributor						Occupa	ition		•		
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det Summary Page, Section 3.				etaile	ed				<b>PAGE TOTAL</b> 0.00		

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION			<u>6/6</u>	<u>5/2023</u>	То:	9/18/2023		
						AMOUNT		
To Whom Paid Luzerne County Democratic Committee			DAY	YEAR				
Ste 1		6	14	2023	\$	250.00		
City Wilkes Barre PA Zip Code (Plus 4) 18701			•	penditure				
	ee Ste 1 State	ee Ste 1 State Zip Code (Plus 4)	ee MO Ste 1 6 State Zip Code (Plus 4) Descrip	TITICAL ACTION  From 6/9  DATE  MO DAY  Ste 1 6 14  State Zip Code (Plus 4) Description of Exp	From 6/6/2023	From   6/6/2023   To:		

<b>To Whom Paid</b> Kaufer Now Committee	мо	DAY	YEAR					
Mailing Address PO Box 412				14	2023	\$	500.00	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	Description of Expenditure Contribution					

	PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$ 750.00	