

# 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 : 20180067		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: Santarsiero for State Senate									
Street Address: P O Box 671									
City: Newtown					State: PA		Zip Code: 18940		
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6. X	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2023	FILING METHOD ( ) CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code
					MO	DAY	YEAR		
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR
		10	24	2023			11	27	2023
A. Amount Brought Forward From Last Report					\$ 107,566.84				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 27,701.94				
C. Total Funds Available (Sum Of Lines A and B)					\$ 135,268.78				
D. Total Expenditures (From Schedule III)					\$ 24,281.22				
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 110,987.56				
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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Santarsiero for State Senate	From: <u>10/24/2023</u> To: <u>11/27/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 93.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 100.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 100.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 27,000.00
<b>All Other Contributions (Part D)</b>	\$ 500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 27,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 8.94

<b>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.)</b>	\$ 27,701.94
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	0.00

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

**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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Santarsiero for State Senate	<b>From:</b> <u>10/24/2023</u> <b>To:</b> <u>11/27/2023</u>

				DATE			AMOUNT		
Full Name of Contributor					MO	DAY	YEAR	\$	100.00
Johanna Sydney									
Mailing Address					10	25	2023		
125 S Chancellor St									
City		State		Zip Code (Plus 4)					
Newtown		PA		189402109					

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

<b>PAGE TOTAL</b>
\$ 100.00

## 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Santarsiero for State Senate	<b>From:</b> <u>10/24/2023</u> <b>To:</b> <u>11/27/2023</u>

				DATE		AMOUNT	
Full Name of Contributing Committee 2999 Group				MO	DAY	YEAR	\$ 4,000.00
Mailing Address 2999 Street Rd				11	27	2023	
City Bensalem	State PA	Zip Code (Plus 4) 190202060					
Full Name of Contributing Committee APSCUF/CAP-PA				MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 11995				11	15	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171081995					
Full Name of Contributing Committee Buchanan Ingersoll & Rooney Cmte for Effective State Government				MO	DAY	YEAR	\$ 500.00
Mailing Address 409 N 2nd St Ste 500				11	27	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171011357					
Full Name of Contributing Committee Certified Public Accountants Political Action Comm				MO	DAY	YEAR	\$ 500.00
Mailing Address 500 N 3rd St Ste 600				11	15	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171011111					
Full Name of Contributing Committee Highmark PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 1800 Center St				11	27	2023	
City Camp Hill	State PA	Zip Code (Plus 4) 170111702					

Full Name of Contributing Committee LAWPAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 212 N 3rd St Ste 101			11	27	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171011505				

Full Name of Contributing Committee PA-THA-PAC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO Box 300			11	14	2023	
City Bensalem	State PA	Zip Code (Plus 4) 190200300				

Full Name of Contributing Committee PAA-PAC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO Box 2955			11	10	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171052955				

Full Name of Contributing Committee Pennsylvania Committee for Good Government			MO	DAY	YEAR	\$ 10,000.00
Mailing Address PO Box 212			10	27	2023	
City Chalfont	State PA	Zip Code (Plus 4) 189140212				

Full Name of Contributing Committee PSEA PACE			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 400 N 3rd St			10	27	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171011346				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 27,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  Santarsiero for State Senate	<b>Reporting Period</b>  <b>From:</b> <u>10/24/2023</u> <b>To:</b> <u>11/27/2023</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
James Coane Psy.D							
<b>Mailing Address</b> 319 Washington Ave				11	13	2023	\$ 500.00
<b>City</b> Newtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189402127					
<b>Employer Name</b> Clinical Psychologist				<b>Occupation</b> Self			
<b>Employer Mailing Address/Principal Place of Business</b>  301 S State St			<b>City</b>  Newtown	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  189401997		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 500.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  Santarsiero for State Senate	<b>Reporting Period</b>  <b>From:</b> <u>10/24/2023</u> <b>To:</b> <u>11/27/2023</u>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	
Wells Fargo							
<b>Mailing Address</b> 1420 E Lincoln Hwy				10	31	2023	\$ 8.94
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190473007					
<b>Receipt Description</b> Bank interest.							

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

<b>PAGE TOTAL</b>
\$ 8.94



## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
Santarsiero for State Senate		From: <u>10/24/2023</u> To: <u>11/27/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Santarsiero for State Senate	From <u>10/24/2023</u> To: <u>11/27/2023</u>

DATE				AMOUNT		
To Whom Paid AweberCommunications			MO	DAY	YEAR	\$ 464.00
Mailing Address 1100 Manor Dr			11	22	2023	
City Chalfont	State PA	Zip Code (Plus 4) 189142252	Description of Expenditure Email marketing.			
To Whom Paid Bucks County Democratic Committee			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 2003 Lower State Rd Unit 121			10	27	2023	
City Doylestown	State PA	Zip Code (Plus 4) 189012622	Description of Expenditure Sponsorship for Roosevelt Dinner			
To Whom Paid Bucks County Herald Foundation			MO	DAY	YEAR	\$ 500.00
Mailing Address 875 N Easton Rd Ste 1			10	24	2023	
City Doylestown	State PA	Zip Code (Plus 4) 189021023	Description of Expenditure Event Sponsor			
To Whom Paid Bucks United			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 346 Stratton Ct			10	25	2023	
City Langhorne	State PA	Zip Code (Plus 4) 190471664	Description of Expenditure Campaign Contribution			
To Whom Paid Bucks United			MO	DAY	YEAR	\$ 10,000.00
Mailing Address 346 Stratton Ct			10	31	2023	
City Langhorne	State PA	Zip Code (Plus 4) 190471664	Description of Expenditure Campaign Contribution			

To Whom Paid Cameron C Troilo Properties			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 291			11	8	2023	
City Yardley	State PA	Zip Code (Plus 4) 190678291	Description of Expenditure Office rent.			

To Whom Paid Commonwealth Compliance Solutions, LLC			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 748			10	27	2023	
City Mechanicsburg	State PA	Zip Code (Plus 4) 170550748	Description of Expenditure Compliance services.			

To Whom Paid Commonwealth Compliance Solutions, LLC			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 748			11	27	2023	
City Mechanicsburg	State PA	Zip Code (Plus 4) 170550748	Description of Expenditure Compliance services.			

To Whom Paid Friends of Kimberly Rose			MO	DAY	YEAR	\$ 500.00
Mailing Address 116 Highland Dr			10	27	2023	
City Richboro	State PA	Zip Code (Plus 4) 189541822	Description of Expenditure Campaign Contribution			

To Whom Paid Google G Suite			MO	DAY	YEAR	\$ 76.32
Mailing Address 1600 Amphitheatre Pkwy			11	2	2023	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Web services.			

To Whom Paid Hilton Harrisburg			MO	DAY	YEAR	\$ 999.38
Mailing Address 1 N 2nd St			11	14	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171011601	Description of Expenditure Payment for 11/14 Fundraiser			

<b>To Whom Paid</b> Sage Payment Solutions			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 22.50
<b>Mailing Address</b> 12120 Sunset Hills Rd Ste 500			11	2	2023	
<b>City</b> Reston	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 201905858	<b>Description of Expenditure</b> Bankcard fees.			

<b>To Whom Paid</b> Stripe			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 13.78
<b>Mailing Address</b> 354 Oyster Point Blvd			10	31	2023	
<b>City</b> South San Francisco	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 940801912	<b>Description of Expenditure</b> Credit card processing fees.			

<b>To Whom Paid</b> Vantiv Worldpay			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2.71
<b>Mailing Address</b> 8500 Governors Hill Dr			11	9	2023	
<b>City</b> Symmes Twp	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 452491384	<b>Description of Expenditure</b> Credit card processing fees.			

<b>To Whom Paid</b> Verizon			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 202.53
<b>Mailing Address</b> PO Box 15124			11	8	2023	
<b>City</b> Albany	<b>State</b> NY	<b>Zip Code (Plus 4)</b> 122125124	<b>Description of Expenditure</b> Phone and internet.			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 24,281.22

