

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20160290		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> MEDIA DEMOCRATIC COMMITTEE												
<b>Street Address:</b> PO BOX 284												
<b>City:</b> MEDIA						<b>State:</b> PA			<b>Zip Code:</b> 19063-0284			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>		<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	5		DEM	23
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		1	1	2024		4	8	2024				
<b>A. Amount Brought Forward From Last Report</b>						\$		1,492.02				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$		1,238.57				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$		2,730.59				
<b>D. Total Expenditures (From Schedule III)</b>						\$		1,370.16				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$		1,360.43				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$		77.24				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$		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>
MEDIA DEMOCRATIC COMMITTEE	From: <u>1/1/2024</u> To: <u>4/8/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 59.00

<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>	\$ 900.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 900.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 279.57
<b>TOTAL for the Reporting Period (3)</b>	\$ 279.57

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<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>	\$ 1,238.57
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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
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Full Name of Contributing Committee			MO	DAY	YEAR	\$0.00
Mailing Address						
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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MEDIA DEMOCRATIC COMMITTEE	<b>From:</b> <u>1/1/2024</u> <b>To:</b> <u>4/8/2024</u>

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Dana Marks				3	22	2024	
Mailing Address 449 W. Jefferson St.							
City Media	State PA	Zip Code (Plus 4) 19063					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Mark Paikoff				3	21	2024	
Mailing Address 131 E. Second Street							
City Media	State PA	Zip Code (Plus 4) 19063					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
James A. Ziegelhoffer				3	19	2024	
Mailing Address 402 W. Third Street							
City Media	State PA	Zip Code (Plus 4) 19063					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Joi Washington				3	20	2024	
Mailing Address 506 N. Olive Street							
City Media	State PA	Zip Code (Plus 4) 19063					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Linda A. Floyd				3	13	2024	
Mailing Address 205 N. Edgmont Street							
City Media	State PA	Zip Code (Plus 4) 19063					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
David Director				3	13	2024	
Mailing Address 309 North Monroe Street							
City Media	State PA	Zip Code (Plus 4) 19063					

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Charles Hoffmann				2	28	2024	
Mailing Address 221 East Jefferson Street							
City	Media	State	PA	Zip Code (Plus 4)	19063		

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Marty Ellen Feustel				3	13	2024	
Mailing Address 223 E. Jefferson Street							
City	Media	State	PA	Zip Code (Plus 4)	19063		

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Marty Ellen Feustel				2	4	2024	
Mailing Address 223 E. Jefferson Street							
City	Media	State	PA	Zip Code (Plus 4)	19063		

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

**PAGE TOTAL**

\$ 900.00

**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	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  MEDIA DEMOCRATIC COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE		AMOUNT	
<b>Full Name of Contributor</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b>
Tray Herman							
<b>Mailing Address</b> 449 W. Jefferson St. #412							
<b>City</b> Media		<b>State</b>	<b>Zip Code (Plus 4)</b>	3	19	2024	
		PA	19063				
<b>Employer Name</b> Keeler USA				<b>Occupation</b> Application Specialist			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	
3222 Phoenixville Pike			Malvern	PA		19355	
<b>Full Name of Contributor</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b>
Tray Herman							
<b>Mailing Address</b> 449 W. Jefferson St. #412							
<b>City</b> Media		<b>State</b>	<b>Zip Code (Plus 4)</b>	3	31	2024	
		PA	19063				
<b>Employer Name</b> Keeler USA				<b>Occupation</b> Application Specialist			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	
3222 Phoenixville Pike			Malvern	PA		19355	

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

PAGE TOTAL	
\$	279.57

## 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>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
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			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

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

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MEDIA DEMOCRATIC COMMITTEE		From: <u>1/1/2024</u> To: <u>4/8/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 13.66
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 63.58
<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.)			\$ 77.24

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

<b>Name of Filing Committee or Candidate</b>  MEDIA DEMOCRATIC COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Marty Ellen Feustel							\$ 63.58
Mailing Address 223 E. Jefferson Street				1	27	2024	
City Media	State PA	Zip Code (Plus 4) 19063					
Description of Contribution: Mochi Doughnuts							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							<b>PAGE TOTAL</b>  \$ 63.58

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MEDIA DEMOCRATIC COMMITTEE	From <u>1/1/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Media Borough				
<b>Mailing Address</b> 301 North Jackson Street	1	17	2024	\$ 60.00
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	<b>Description of Expenditure</b> Hall Rental - Petitions	
To Whom Paid	MO	DAY	YEAR	
Custom Bagels				
<b>Mailing Address</b> 15 S. Olive Street	1	27	2024	\$ 103.40
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	<b>Description of Expenditure</b> Food & Beverage - Petitions	
To Whom Paid	MO	DAY	YEAR	
US Postal Service				
<b>Mailing Address</b> 101 E. Baltimore Pike	3	9	2024	\$ 200.00
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	<b>Description of Expenditure</b> PO Box Renewal (one year)	
To Whom Paid	MO	DAY	YEAR	
Delaware County Dem. Comm.				
<b>Mailing Address</b> 104 Gayley Street	3	9	2024	\$ 1,000.00
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	<b>Description of Expenditure</b> FDR-JFK Dinner table for 10 + Ad	
To Whom Paid	MO	DAY	YEAR	
PayPal				
<b>Mailing Address</b> 2211 N 1st St	3	31	2024	\$ 6.76
<b>City</b> San Jose	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 95131	<b>Description of Expenditure</b> Finance fees	
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>				<b>PAGE TOTAL</b> \$ 1,370.16

