

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 :		20160170		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF CAROLYN COMITTA												
Street Address: 115 S BRANDYWINE ST.												
City: WEST CHESTER						State: PA			Zip Code: 17112			
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 2024		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	19	STS	DEM	15
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		3	5	2024		4	8	2024				
A. Amount Brought Forward From Last Report						\$ 68,344.97						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 33,405.11						
C. Total Funds Available (Sum Of Lines A and B)						\$ 101,750.08						
D. Total Expenditures (From Schedule III)						\$ 13,973.19						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 87,776.89						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 3,000.00						
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

Signature

Printed Name

My Commission Expires

MO DAY YR

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 of Candidate

Signature

Printed Name

My Commission Expires

MO DAY YR

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF CAROLYN COMITTA	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 112.61

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)	\$ 992.50
TOTAL for the Reporting Period (2)	\$ 992.50

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 30,500.00
All Other Contributions (Part D)	\$ 1,800.00
TOTAL for the Reporting Period (3)	\$ 32,300.00

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.)	\$ 33,405.11
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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
FRIENDS OF CAROLYN COMITTA	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE		AMOUNT	
Full Name of Contributor DR GERRY AUMAN				MO 4	DAY 8	YEAR 2024	\$ 103.75
Mailing Address 619 N MILL RD							
City KENNETT SQUARE	State PA	Zip Code (Plus 4) 193481611					
Full Name of Contributor THOMAS E BUGLIO				MO 2	DAY 5	YEAR 2024	\$ 52.00
Mailing Address 335 E KING ST APT 304							
City MALVERN	State PA	Zip Code (Plus 4) 193552572					
Full Name of Contributor THOMAS E BUGLIO				MO 3	DAY 5	YEAR 2024	\$ 52.00
Mailing Address 335 E KING ST APT 304							
City MALVERN	State PA	Zip Code (Plus 4) 193552572					
Full Name of Contributor THOMAS E BUGLIO				MO 4	DAY 5	YEAR 2024	\$ 52.00
Mailing Address 335 E KING ST APT 304							
City MALVERN	State PA	Zip Code (Plus 4) 193552572					
Full Name of Contributor BERNARD R GREENBERG				MO 1	DAY 1	YEAR 2024	\$ 103.75
Mailing Address 894 JEFFERSON WAY							
City WEST CHESTER	State PA	Zip Code (Plus 4) 193806910					
Full Name of Contributor BARBARA MYERS				MO 1	DAY 1	YEAR 2024	\$ 52.00
Mailing Address 971 N NEW ST							
City WEST CHESTER	State PA	Zip Code (Plus 4) 193803859					

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
VINCE M POMPO			1	2	2024	
Mailing Address	995 SUNSET HOLLOW RD					
City	WEST CHESTER	State	PA	Zip Code (Plus 4)	193801849	

Full Name of Contributor			MO	DAY	YEAR	\$ 75.00
NATHANIEL B SMITH			3	9	2024	
Mailing Address	513 W NIELDS ST					
City	WEST CHESTER	State	PA	Zip Code (Plus 4)	193823518	

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
MARK STEVENS			1	2	2024	
Mailing Address	342 MACKENZIE DR PA19380					
City	WEST CHESTER	State	PA	Zip Code (Plus 4)	193803816	

Full Name of Contributor			MO	DAY	YEAR	\$ 52.00
AARON A WALTON			1	6	2024	
Mailing Address	1 SCHOLARS WAY					
City	CHEYNEY	State	PA	Zip Code (Plus 4)	193191023	

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
SHIRLEY WARREN			1	2	2024	
Mailing Address						
City		State		Zip Code (Plus 4)		

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

PAGE TOTAL

\$ 992.50

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 FRIENDS OF CAROLYN COMITTA	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
APSCUF/CAP PA				1	2	2024	
Mailing Address319 N FRONT ST							
CityHARRISBURG	StatePA	Zip Code (Plus 4)171011203					
Full Name of Contributing Committee				MO	DAY	YEAR	\$2,500.00
CITIZENS FOR HUGHES				1	2	2024	
Mailing Address4950 PARKSIDE AVE # 106							
CityPHILADELPHIA	StatePA	Zip Code (Plus 4)191314700					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
CITIZENS FOR HUGHES				4	5	2024	
Mailing Address4950 PARKSIDE AVE # 106							
CityPHILADELPHIA	StatePA	Zip Code (Plus 4)191314700					
Full Name of Contributing Committee				MO	DAY	YEAR	\$3,000.00
FRIENDS OF LISA BOSCOLA				1	2	2024	
Mailing Address385 PALMETTO DR							
CityEASTON	StatePA	Zip Code (Plus 4)180453795					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,500.00
FRIENDS OF NICK MILLER				1	2	2024	
Mailing AddressPO BOX 1799							
CityALLENTOWN	StatePA	Zip Code (Plus 4)181051799					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
HAPAC				1	2	2024	
Mailing Address30 N 3RD ST STE 600							
CityHARRISBURG	StatePA	Zip Code (Plus 4)171011730					

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
HIGHMARK PAC			1	2	2024	
Mailing Address	1800 CENTER ST					
City	CAMP HILL	State	PA	Zip Code (Plus 4)	170111702	
Full Name of Contributing Committee			MO	DAY	YEAR	\$5,000.00
IBEW #98 COMMITTEE ON POLITICAL EDUCATION			1	2	2024	
Mailing Address	1719 SPRING GARDEN ST					
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191303915	
Full Name of Contributing Committee			MO	DAY	YEAR	\$1,500.00
MARIA FOR PA			1	2	2024	
Mailing Address	PO BOX 1006					
City	SPRING HOUSE	State	PA	Zip Code (Plus 4)	194771206	
Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PA BAR ASSOCIATION			1	2	2024	
Mailing Address	100 SOUTH ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171011210	
Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PA INSURANCE PAC (PIPAC)			1	2	2024	
Mailing Address	1600 MARKET ST STE 1720					
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191037233	
Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PHILIPS NORTH AMERICA LLC PAC			1	2	2024	
Mailing Address	901 15TH ST NW STE 510					
City	WASHINGTON	State	DC	Zip Code (Plus 4)	200052319	
Full Name of Contributing Committee			MO	DAY	YEAR	\$5,000.00
REPRESENT PAC			1	2	2024	
Mailing Address	PO BOX 58432					
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191028432	
Full Name of Contributing Committee			MO	DAY	YEAR	\$2,000.00
SANTARSIERO FOR STATE SENATE			1	2	2024	
Mailing Address	PO BOX 671					
City	NEWTOWN	State	PA	Zip Code (Plus 4)	189400671	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 5,000.00
STEAMFITTERS LOCAL #420						
Mailing Address 14400 TOWNSEND RD STE A			1	2	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191541028				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
UFCW LOCAL 1776			1	2	2024	
Mailing Address 3031 A WALTON RD STE 201						
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4) 194622369				

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

PAGE TOTAL
\$ 30,500.00

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 FRIENDS OF CAROLYN COMITTA	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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				DATE			AMOUNT
Full Name of Contributor JONATHAN D INSLEE				MO	DAY	YEAR	\$ 300.00
Mailing Address 407 CREEK RD				1	2	2024	
City DOWNINGTOWN	State PA	Zip Code (Plus 4) 193351422					
Employer Name INFORMATION REQUESTED				Occupation INFORMATION REQUESTED			
Employer Mailing Address/Principal Place of Business 407 CREEK RD			City DOWNINGTOWN		State PA	Zip Code (Plus 4) 193351422	
Full Name of Contributor SEAN REILLY				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 826 KERPER ST				3	4	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191114824					
Employer Name				Occupation PRESIDENT/CEO			
Employer Mailing Address/Principal Place of Business 826 KERPER ST			City PHILADELPHIA		State PA	Zip Code (Plus 4) 191114824	
Full Name of Contributor CHRISTINA VANDEPOL				MO	DAY	YEAR	\$ 500.00
Mailing Address 403 W LAFAYETTE ST				3	6	2024	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193802207					
Employer Name RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business 403 W LAFAYETTE ST			City WEST CHESTER		State PA	Zip Code (Plus 4) 193802207	

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

PAGE TOTAL
\$ 1,800.00

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:
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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.

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		Reporting Period	
FRIENDS OF CAROLYN COMITTA		From: <u>3/5/2024</u> To: <u>4/8/2024</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 RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	3,000.00
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.)		\$	3,000.00

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:
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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.						PAGE TOTAL \$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF CAROLYN COMITTA	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE		AMOUNT	
Full Name of Contributor SENATE DEMOCRATIC CAMPAIGN COMMITTEE				MO 4	DAY 8	YEAR 2024	\$ 3,000.00
Mailing Address PO BOX 59358							
City PHILADELPHIA		State PA	Zip Code(Plus 4) 191029358				
Employer of Contributor N/A				Occupation N/A			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)		Description of Contribution VAN ACCESS
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 3,000.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF CAROLYN COMITTA	From <u>3/5/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
To Whom Paid				
CAPITOL PROMOTIONS				
Mailing Address PO BOX 231				
City GLENSIDE	State PA	Zip Code (Plus 4) 190380231		
Description of Expenditure				
YARD SIGNS				
To Whom Paid				
CITIZENS BANK				
Mailing Address 39 LEOPARD RD				
City PAOLI	State PA	Zip Code (Plus 4) 193011518		
Description of Expenditure				
CERTIFIED CK FEE				
To Whom Paid				
COMMONWEALTH OF PENNSYLVANIA				
Mailing Address 401 NORTH ST				
City HARRISBURG	State PA	Zip Code (Plus 4) 171200500		
Description of Expenditure				
PETITION FILING FEE				
To Whom Paid				
DIRECT CONTACT				
Mailing Address 3901 CENTERVIEW DR STE W				
City CHANTILLY	State VA	Zip Code (Plus 4) 201513229		
Description of Expenditure				
MERCH FEES				
To Whom Paid				
DIRECT CONTACT				
Mailing Address 3901 CENTERVIEW DR STE W				
City CHANTILLY	State VA	Zip Code (Plus 4) 201513229		
Description of Expenditure				
MERCH FEES				
To Whom Paid				
DIRECT CONTACT				
Mailing Address 3901 CENTERVIEW DR STE W				
City CHANTILLY	State VA	Zip Code (Plus 4) 201513229		
Description of Expenditure				
MERCH FEES				

To Whom Paid DIRECT CONNECT			MO	DAY	YEAR	\$ 58.04
Mailing Address 3901 CENTERVIEW DR STE W			4	1	2024	
City CHANTILLY	State VA	Zip Code (Plus 4) 201513229	Description of Expenditure MERCH FEES			

To Whom Paid FRIENDS OF NATE DAVIDSON			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 5447			2	21	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171100447	Description of Expenditure CONTRIBUTION			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 477.00
Mailing Address 1445 NEW YORK AVE NW STE 200			1	1	2024	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure DATABASE FEE			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 212.00
Mailing Address 1445 NEW YORK AVE NW STE 200			3	7	2024	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure DATABASE FEE			

To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 59358			1	8	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191029358	Description of Expenditure CONTRIBUTION			

To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 59358			2	9	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191029358	Description of Expenditure CONTRIBUTION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 13,973.19

