

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	TO	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
 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
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 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
FRIENDS OF CAROLYN COMITTA	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

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

Full Name of Contributor VINCE M POMPO			MO	DAY	YEAR	\$ 250.00
Mailing Address 995 SUNSET HOLLOW RD			1	2	2024	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193801849				
Full Name of Contributor NATHANIEL B SMITH			MO	DAY	YEAR	\$ 75.00
Mailing Address 513 W NIELDS ST			3	9	2024	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193823518				
Full Name of Contributor MARK STEVENS			MO	DAY	YEAR	\$ 100.00
Mailing Address 342 MACKENZIE DR PA19380			1	2	2024	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193803816				
Full Name of Contributor AARON A WALTON			MO	DAY	YEAR	\$ 52.00
Mailing Address 1 SCHOLARS WAY			1	6	2024	
City CHEYNEY	State PA	Zip Code (Plus 4) 193191023				
Full Name of Contributor SHIRLEY WARREN			MO	DAY	YEAR	\$ 100.00
Mailing Address			1	2	2024	
City	State	Zip Code (Plus 4)				

PAGE TOTAL

\$ 992.50

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

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	Mailing Address	City	MO	DAY	YEAR	
APSCUF/CAP PA	319 N FRONT ST	HARRISBURG	1	2	2024	\$ 500.00
		State PA Zip Code (Plus 4) 171011203				
CITIZENS FOR HUGHES	4950 PARKSIDE AVE # 106	PHILADELPHIA	1	2	2024	\$ 2,500.00
		State PA Zip Code (Plus 4) 191314700				
CITIZENS FOR HUGHES	4950 PARKSIDE AVE # 106	PHILADELPHIA	4	5	2024	\$ 1,000.00
		State PA Zip Code (Plus 4) 191314700				
FRIENDS OF LISA BOSCOLA	385 PALMETTO DR	EASTON	1	2	2024	\$ 3,000.00
		State PA Zip Code (Plus 4) 180453795				
FRIENDS OF NICK MILLER	PO BOX 1799	ALLENTOWN	1	2	2024	\$ 1,500.00
		State PA Zip Code (Plus 4) 181051799				
HAPAC	30 N 3RD ST STE 600	HARRISBURG	1	2	2024	\$ 1,000.00
		State PA Zip Code (Plus 4) 171011730				

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

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

Full Name of Contributing Committee UFCW LOCAL 1776			MO	DAY	YEAR	\$ 500.00
Mailing Address 3031 A WALTON RD STE 201			1	2	2024	
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: _____

	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 FRIENDS OF CAROLYN COMITTA	Reporting Period 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 RECEIVED - 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: _____

			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 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	MO	DAY	YEAR		
SENATE DEMOCRATIC CAMPAIGN COMMITTEE	4	8	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	MO	DAY	YEAR		
CAPITOL PROMOTIONS	3	6	2024	\$	2,380.76
Mailing Address PO BOX 231					
City GLENSIDE				Description of Expenditure	
State PA				YARD SIGNS	
Zip Code (Plus 4) 190380231					
To Whom Paid	MO	DAY	YEAR		
CITIZENS BANK	2	5	2024	\$	5.00
Mailing Address 39 LEOPARD RD					
City PAOLI				Description of Expenditure	
State PA				CERTIFIED CK FEE	
Zip Code (Plus 4) 193011518					
To Whom Paid	MO	DAY	YEAR		
COMMONWEALTH OF PENNSYLVANIA	2	5	2024	\$	100.00
Mailing Address 401 NORTH ST					
City HARRISBURG				Description of Expenditure	
State PA				PETITION FILING FEE	
Zip Code (Plus 4) 171200500					
To Whom Paid	MO	DAY	YEAR		
DIRECT CONTACT	1	2	2024	\$	115.09
Mailing Address 3901 CENTERVIEW DR STE W					
City CHANTILLY				Description of Expenditure	
State VA				MERCH FEES	
Zip Code (Plus 4) 201513229					
To Whom Paid	MO	DAY	YEAR		
DIRECT CONTACT	2	2	2024	\$	41.10
Mailing Address 3901 CENTERVIEW DR STE W					
City CHANTILLY				Description of Expenditure	
State VA				MERCH FEES	
Zip Code (Plus 4) 201513229					
To Whom Paid	MO	DAY	YEAR		
DIRECT CONTACT	3	1	2024	\$	84.20
Mailing Address 3901 CENTERVIEW DR STE W					
City CHANTILLY				Description of Expenditure	
State VA				MERCH FEES	
Zip Code (Plus 4) 201513229					

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

