

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

Full Name of Contributor BARBARA MYERS			MO	DAY	YEAR	\$ 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)				

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	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				

Full Name of Contributing Committee HAPAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 30 N 3RD ST STE 600			1	2	2024	
City HARRISBURG	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	MO	DAY	YEAR		
JONATHAN D INSLEE					
Mailing Address 407 CREEK RD	1	2	2024	\$	300.00
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	
SEAN REILLY					
Mailing Address 826 KERPER ST	3	4	2024	\$	1,000.00
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	
CHRISTINA VANDEPOL					
Mailing Address 403 W LAFAYETTE ST	3	6	2024	\$	500.00
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		
Mailing Address				\$	0.00
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 SENATE DEMOCRATIC CAMPAIGN COMMITTEE				MO	DAY	YEAR	\$ 3,000.00
Mailing Address PO BOX 59358				4	8	2024	
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				
State PA				
Zip Code (Plus 4) 190380231				
Description of Expenditure YARD SIGNS				
To Whom Paid CITIZENS BANK	2	5	2024	\$ 5.00
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	2	5	2024	\$ 100.00
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	1	2	2024	\$ 115.09
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	2	2	2024	\$ 41.10
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			MO	DAY	YEAR	
Mailing Address 3901 CENTERVIEW DR STE W			3	1	2024	\$ 84.20
City CHANTILLY	State VA	Zip Code (Plus 4) 201513229	Description of Expenditure MERCH FEES			
To Whom Paid DIRECT CONNECT			MO	DAY	YEAR	
Mailing Address 3901 CENTERVIEW DR STE W			4	1	2024	\$ 58.04
City CHANTILLY	State VA	Zip Code (Plus 4) 201513229	Description of Expenditure MERCH FEES			
To Whom Paid FRIENDS OF NATE DAVIDSON			MO	DAY	YEAR	
Mailing Address PO BOX 5447			2	21	2024	\$ 500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 171100447	Description of Expenditure CONTRIBUTION			
To Whom Paid NGP VAN			MO	DAY	YEAR	
Mailing Address 1445 NEW YORK AVE NW STE 200			1	1	2024	\$ 477.00
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure DATABASE FEE			
To Whom Paid NGP VAN			MO	DAY	YEAR	
Mailing Address 1445 NEW YORK AVE NW STE 200			3	7	2024	\$ 212.00
City WASHINGTON	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure DATABASE FEE			
To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE			MO	DAY	YEAR	
Mailing Address PO BOX 59358			1	8	2024	\$ 5,000.00
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

