

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 :		20120115		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: SCHLOSSBERG, MIKE FRIENDS OF												
Street Address: 1620 POND RD, STE 200												
City: ALLENTOWN						State: PA			Zip Code: 18104-2255			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	132	STH	DEM	39
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		4	9	2024		5	13	2024				
A. Amount Brought Forward From Last Report						\$		8,183.33				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		5,410.00				
C. Total Funds Available (Sum Of Lines A and B)						\$		13,593.33				
D. Total Expenditures (From Schedule III)						\$		12,811.60				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		781.73				
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

Name of Filing Committee or Candidate	Reporting Period
SCHLOSSBERG, MIKE FRIENDS OF	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 160.00

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

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 4,500.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 5,000.00

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.)	\$ 5,410.00
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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 SCHLOSSBERG, MIKE FRIENDS OF	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
PA ADVOCATES AND RESOURCES FOR AUTISM AND INTELLECTUAL DISABILITIES PAC (PAR ID/A PAC)							
Mailing Address 4 LEMOYNE DRIVE SUITE 203				4	23	2024	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043					

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

PAGE TOTAL
\$ 250.00

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 SCHLOSSBERG, MIKE FRIENDS OF	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
BALLARD SPAHR LLP PAC				4	9	2024	
Mailing Address1735 MARKET ST, 51ST FL							
CityPHILADELPHIA	StatePA	Zip Code (Plus 4)19103					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
UNITEDHEALTH GROUP INC PAC OF PA				5	4	2024	
Mailing Address701 PENNSYLVANIA AVE, N.W.							
CityWASHINGTON	StateDC	Zip Code (Plus 4)20004					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
PA-THA-PAC				5	8	2024	
Mailing AddressPO Box 300							
CityBensalem	StatePA	Zip Code (Plus 4)19020					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
ELEVANCE HEALTH INC POLITICAL ACTION COMMITTEE				5	8	2024	
Mailing Address1001 PENNSYLVANIA AVENUE SUITE, 710							
CityWASHINGTON	StateDC	Zip Code (Plus 4)20004					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
INDEPENDENCE BLUE CROSS PAC (IBC PAC)				5	8	2024	
Mailing Address1901 MARKET ST							
CityPHILADELPHIA	StatePA	Zip Code (Plus 4)19103					

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

PAGE TOTAL
\$ 4,500.00

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 SCHLOSSBERG, MIKE FRIENDS OF	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Matthew Plummer				\$ 500.00
Mailing Address 3279 Longview Road				
City Mechanicsburg	4	29	2024	
State PA				
Zip Code (Plus 4) 17055				
Employer Name The DT Firm	Occupation Partner			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	
909 Green Street	Harrisburg	PA	17102	

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

PAGE TOTAL
\$ 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.

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	
SCHLOSSBERG, MIKE FRIENDS OF		From: <u>4/9/2024</u> To: <u>5/13/2024</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)		\$	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: 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
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
SCHLOSSBERG, MIKE FRIENDS OF	From <u>4/9/2024</u> To: <u>5/13/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Mike Schlossberg				
Mailing Address 2905 West Highland	5	2	2024	\$ 1,067.27
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Reimbursement/Miles	
To Whom Paid	MO	DAY	YEAR	
Emerge PA				
Mailing Address P.O. Box 60078	4	16	2024	\$ 258.32
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure Contribution	
To Whom Paid	MO	DAY	YEAR	
Allentown School District Foundation				
Mailing Address 31 South Penn Street	4	22	2024	\$ 460.00
City Allentown	State PA	Zip Code (Plus 4) 18101	Description of Expenditure Event Sponsorship	
To Whom Paid	MO	DAY	YEAR	
Syrian Arab American Charitable Association				
Mailing Address 608 1/2 N 2nd St	4	22	2024	\$ 215.00
City Allentown	State PA	Zip Code (Plus 4) 18101	Description of Expenditure Event Sponsorship	
To Whom Paid	MO	DAY	YEAR	
Mary Ann Donuts				
Mailing Address 1601 West Liberty	4	24	2024	\$ 528.00
City Allentown	State PA	Zip Code (Plus 4) 18102	Description of Expenditure Campaign Expense - Meals for Election Day	
To Whom Paid	MO	DAY	YEAR	
AT&T				
Mailing Address 1906 Macarthur Road	4	26	2024	\$ 65.49
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Cell Phone Data Plan	

To Whom Paid AT&T			MO	DAY	YEAR	\$ 217.52
Mailing Address 1906 Macarthur Road			4	26	2024	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Cell Phone			

To Whom Paid PA HDCC			MO	DAY	YEAR	\$ 10,000.00
Mailing Address PO Box 35			5	2	2024	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 12,811.60

