### **Campaign Finance Report**

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

Filer Identificati Number :	<b>on</b> 201	20419			Rep File			CANE	OID	OATE		COMN	1ITTEE	<b>✓</b>	LOBI	BYIS	Т	
Name of Filing C	ommittee, Candi	date or L	obbyist:		CAMI	PAI	GN F	OR COM	1P <i>A</i>	ASSIO	N							
Street Address:																		
City:	WYNCOTE							State:		PA			<b>Zip Code:</b> 19095					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE-	- 2	2.	30 DA PRIMA		PO	OST-	3. <b>X</b>		AMENDMENT REPORT?		Yes	<b>\</b>	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	Y PRE	:- 5	j.	30 DA		PC	POST- 6.			TERMINATION REPORT?		Yes		No	<b>/</b>
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2024					NG METI CHECK		_			PAPER		$\checkmark$	DIS	KETTE	
Name of Office S	ought by Candid	ate:						DATE	OF	ELE(	CTIC	N	District Number	Office Code	Par	ty Co	de Cou Cod	
								МО		DAY	YI	EAR	4		DEN	1	46	
								1	.1		5	2024		(SEE INS	TRUCTI	ONS F	OR CODE	S)
Summary of		МО	DAY	YEAR				МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONL	Y	
Expenditures	irom:		4 9	20	024	Т	<u> </u>		5	1	.3	2024						
A. Amount Bro	ught Forward Fro	om Last R	eport				\$				14,	708.55						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				1,2	280.00						
C. Total Funds	Available (Sum (	Of Lines A	and B)				\$				15,9	988.55						
D. Total Expend	ditures (From Sc	hedule II	I)				\$				2,9	915.44						
E. Ending Cash	Balance (Subtra	ct Line D	From Line (	C)			\$				13,0	73.11						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedul	le II)	)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	)			\$					0.00						
				AFF	IDA	VI	ΓSE	CTION	١									
PART I - If this is			_						_	-		_						
I swear (or affirm) correct and comple	that this report, in ete.	cluding th	e attached scl	nedules	filed	on	paper	or by ele	ctro	onic me	dium	, are to t	he best o	f my know	/ledge	and b	elief , t	rue
Sworn to and subs	cribed before me th day of	nis	20						-		S	Signature	of Perso	1 Submitt	ing Rep	ort		
	Signat	ure					-		-				Prin	ted Name				_
My Commission Ex	rpires						_		-				Emai	il				
	МО	D	AY	YR						Are	a Coc	le	Daytim	e Teleph	one Nu	mber		$\underline{}$
Part II- If this is	a report of a ca	ndidate's	authorized	Comm	ittee	e, Ca	andid	ate sha	ll s	ign he	re.							
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ef this	politi	ical	comm	ittee has	no	t violat	ed an	y provisi	ions of the	e act of Ju	ine 3,1	937 (	P.L. 133	33,
Sworn to and subsc	ribed before me thi day of	s	20									Si	ignature o	f Candida	te			_
							-		•				Printe	d Name				-
	Signature	<u> </u>					-		_									_
My Commission Exp	ires												Emai	ıı				
	мо	D	AY	YR			•		•	Area	Code		Da	ytime Te	lephor	ne Nu	nber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
CAMPAIGN FOR COMPASSION	From:	<u>4/9/202</u>	<u>4</u> To:	<u>5/13/2024</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	30.00
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)	\$	250.00		
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)			\$	0.00
All Other Contributions (Part D)			\$	1,000.00
TOTAL for the Reporting	) Period	(3)	<del>\$</del>	1,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,280.00

#### **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 Candidat	e	R	eporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### 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** 

CAMPAIGN FOR COMPASSION

From:  $\frac{4/9/2024}{}$  To:

DATE

5/13/2024

**AMOUNT** 

Full Name of Contributor			МО	DAY	YEAR	
Ken Weinstein						
Mailing Address						<b>\$</b> 250.00
<b>City</b> Philadelphia	State	Zip Code (Plus 4)	4	17	2024	
	PA	19119				

**PAGE TOTAL** 250.00

\$

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							<b>-</b>   \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary Pa	age, Sectio	n 3.			\$	0.00

### 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			Repo	orting Pe	riod			
CAMPAIGN FOR COMPASSION			Fron	n:	<u>4/9/2</u>	<u>024</u> 1	То:	5/13/2024
				D/	<b>ATE</b>			AMOUNT
Full Name of Contributor				МО	DAY	YEAR	R	<b>\$</b> 1,000.00
Sherman McLeod								1,000.00
Mailing Address				5	6	202	,,	
<b>City</b> Philadelphia	State	Zip Code (Plus	5 4)		0	202	-4	
	l <sub>PA</sub>	19138					-	
Employer Name Philadelphia Technicia	an Training Institute			Occupat	ion	Busine	ess O	wner
Employer Mailing Address/Principal Plac	ce of Business	City			State		Zi	p Code (Plus 4)
		Philadelph	nia		PA		19	9130
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.				PAGE TOTAL
							\$	1,000.00

## 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		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	4.			\$	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		
CAMPAIGN FOR COMPASSION	From:	4/9/2024 <b>To</b> :	<u>5/13/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate			Reporting	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	<b>-</b>	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Po	eriod		
CAMPAIGN FOR COMPASSION	From	4/9/2024	То:	5/13/2024

					DATE			AMOUNT
To Whom	n Paid			МО	DAY	YEAR		
Nicole for	r PA			МО		ILAK		
Mailing A	Address			5	3	2024	\$	500.00
<b>City</b> S	South Park	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15129	Donatio	n			
To Whom	ı Paid			мо	DAY	YEAR		
Wallace \	Weaver			МО	DAI	ILAK		
Mailing A	Address			4	26	2024	\$	500.00
<b>City</b> P	hiladelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19150	Campai				
To Whom	n Paid			мо	DAY	YEAR		
Zoom US	5A			МО		ILAK		
Mailing A	Address			5	1	2024	\$	16.95
<b>City</b> S	San Jose	State	Zip Code (Plus 4)	Descrip				
		CA	95113	Virtual I	Meeting Se	rvices		
To Whom	n Paid		-		DAY	YEAR		
Amazon				МО	DAT	TEAK		
Mailing A	Address			5	1	2024	\$	105.99
<b>City</b> S	Seattle	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		CA	98109	Event M	laterials			
To Whom	n Paid			мо	DAY	YEAR		
Montgom	nery County Democratic Comm	ittee		1410	DAI	ILAK		
Mailing A	Address			4	10	2024	\$	1,500.00
City E	ast Norriton	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19401	Donatio	n			
To Whom	n Paid			мо	DAY	YEAR		
Santande	er Bank			МО		ILAK		
Mailing A	Address			5	2	2024	\$	27.50
City V	Vyncote	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19095	Bank Fe	ee			
		•	•	•				

To Whom Paid			МО	DAY	YEAR		
NGPVAN Mailing Address			МО	DAY	YEAK		
			5	3	2024	\$	265.00
City Washington	State	Zip Code (Plus 4)	Description of Expenditure				
	DC	20005	Database Fee				
Inter Grand Total of Expe	nditures on Page 1, R	eport Cover Page, Item D	_				PAGE TOTAL
nter Grand Total of Expe	nditures on Page 1, R	eport Cover Page, Item D				\$	
inter Grand Total of Expe	nditures on Page 1, R	eport Cover Page, Item D				\$	
Enter Grand Total of Expe	nditures on Page 1, R	eport Cover Page, Item D				\$	<b>PAGE TOTAL</b> 2,915.44
inter Grand Total of Expe	nditures on Page 1, R	eport Cover Page, Item D				\$	