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 :	on 2	20240	038			Repoi Filed			CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST	
Name of Filing C	ommittee, Ca	ndidat	te or Lo	obbyist:			-	USI	HUE FOF	R 172N	D						
Street Address: 9526 RISING SUN AVE																	
City:	PHILADEL	.PHIA						5	State:	PA			Zip Co	de: 19	115		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND FRIDA PRIMARY	2ND FRIDAY PRE- 2. 30 PRIMARY							AMENDMENT REPORT?		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION		4. X	2ND FRIDAY PRE- ELECTION 5. 30 DAY ELECTI					POST- 6.			TERMIN/ REPORT		Yes	No		
report type)	ANNUAL REP	ORT 7	7.	Year 2024					G METHO HECK OF				PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Can	didate	e:					1	ΟΑΤΕ Ο	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
REPRESENTATI								ľ	40	DAY	YE	AR	172	STH	REP	,	51
REPRESENTATI	VE IN THE GE	INERA	AL ASSI	EMBLY					11		5	2024		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		d	мо	DAY	YEAR			1	чо	DAY	YI	EAR	FC	R OFFIC	E USE	ONLY	
Expenditures	from:			5 14	20	024	ГО		9	1	.6	2024					
A. Amount Bro	ught Forward	From	Last Re	eport				\$			1,4	149.51					
B. Total Moneta	ary Contributi	ons Ai	nd Rece	eipts (From	Scheo	dule I)		\$				0.00					
C. Total Funds	Available (Su	m Of L	Lines A	and B)				\$			1,4	449.51					
D. Total Expen	ditures (From	Scheo	dule III	[)				\$			1,4	49.51					
E. Ending Cash	Balance (Sub	tract I	Line D I	From Line	C)			\$				0.00	-				
F. Value Of In-	Kind Contribu	tions I	Receive	ed (From S	chedul	e II)		\$				0.00					
G. Unpaid Debt	s And Obligat	ions (From S	chedule IV	')			\$				0.00					
					AFF	IDAV	IT S	SEC	TION								
PART I - If this is		-	•	-						• •		-	-				
I swear (or affirm) correct and comple		t, inclu	ding the	attached sc	hedules	filed or	i pape	er ol	by electi	ronic me	dium	, are to t	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before m day of	e this		20							S	ignature	e of Perso	n Submitt	ing Rep	oort	
		nature	•				_						Prin	ted Name			
My Commission Ex	-		-										Ema	il			
	мо		DA	NY	YR					Are	a Cod	le	Daytin	e Teleph	one Nu	mber	
Part II- If this is	a report of a	candi	date's a	authorized	Comm	ittee, (Candi	ida	te shall s	sign he	re.						
I swear (or affirm) No 320) as amende		t of my	y knowle	dge and beli	ef this	politica	com	nmit	tee has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me day of	this		20								s	ignature (of Candida	ite		
							_						Printe	d Name			
Mu Gaz	Signat	ture					_						Ema	il			
My Commission Exp	ires						_							•			
	мс)	DA	Y	YR		-			Area (Code		D	aytime Te	elephor	e Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PATRICK GUSHUE FOR 172ND	From:	<u>5/14/202</u>	<u>4</u> To:	<u>9/16/2024</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
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)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
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)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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 Candidate				orting I	Period				
					From: To:				
		·			DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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 Candida	te		Rep	orting P	eriod				
			Fror	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City	City State Zip Code (Plus 4)								
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00									

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			Reporting Period						
						То:			
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Pa				n 3.			\$	0.00	

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				Reporting Period					
Fro						Т	То:		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

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 Cand	Name of Filing Committee or Candidate			ing Peri	od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus 4)					
Receipt Description					1	1		
			.				PAGE TOT	AL
Enter Grand Total of Part E on So	chedule I, Detailed	i 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		
PATRICK GUSHUE FOR 172ND	From:	<u>5/14/2024</u> то:	<u>9/16/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting	Period	·			
F			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

Name of Filing Committee or Candidate				porting I	Period			
						То:		
					DATE		AMOUNT	
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$ 0.00	
City	State	Zip Code(Plus 4)						
Employer of Contributor		•		Occupa	ation			
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	ate		Reporti	ng Period					
PATRICK GUSHUE FOR 172ND	PATRICK GUSHUE FOR 172ND			From <u>5/14/2024</u>		То:	<u>9/16/2024</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
Samuel Oropeza									
Mailing Address 3924 Richmond Street			5	30	2024	\$	483.17		
City Philadelphia State Zip Code (Plus 4)			Descrip	Description of Expenditure					
	PA	19137	Campaign Staff Payment						
To Whom Paid			мо	DAY	YEAR				
Alec Shaffer									
Mailing Address 33 South York Ro	oad Apt 3A		5	30	2024	\$	483.17		
City Hatboro	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	19040	Campaign Staff Payment						
To Whom Paid Rossman Shaffer			мо	DAY	YEAR				
Mailing Address 35 Arbor Lane			5	30	2024	\$	483.17		
City Feasterville-Trevose	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19053	Campai	gn Staff Pa	yment				
							PAGE TOTAL		
Enter Grand Total of Expenditure	s on Page 1, F	Report Cover Page, Item	D.			\$	1,449.51		