# **Campaign Finance Report**

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

Filer Identificat	ion	2019	0230			Repor	t	CANDI	DATE		сомм	<b>1ITTEE</b>	✓	LOBE	BYIST		
Number :	-					Filed I	By:						•				
Name of Filing (	Committe	e, Candida	ate or Lo	obbyist:		Benhar	n for	PA									
Street Address:	PO E	3ox 42398	8					-									
City:	Pitts	burgh						State:	PA			Zip Coo	<b>de:</b> 15	203			
TYPE OF REPORT	6TH TUES PRE-PRIN		1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	3.		AMENDM REPORT		Yes	N	D	$\checkmark$
(place X to the right of	6TH TUES	-	4.	2ND FRIDA ELECTION	y pre	- 5.	30 D ELEC	AY F TION	POST-	6.		TERMIN/ REPORT		Yes	N	C	$\checkmark$
report type)	ANNUAL	. REPORT	7. <b>X</b>	<b>Year</b> 2024				NG METHO CHECK O				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	L Sought by	y Candidat	e:					DATE O	F ELEC	TION		District Number	Office Code	Par	ty Code	Cour	
DEDDECENTAT								мо	DAY	YEA	R	36	STH	DEN	1	02	
REPRESENTAT		1E GENER	AL ASSI	EMBLY				11		5 2	2024		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		s and	мо	DAY	YEAR	1		мо	DAY	YEA	R	FC	R OFFIC	E USE	ONLY		
Expenditures	s from:		1	.1 26	2	024 <b>1</b>	Ο	12	3	1	2024						
A. Amount Bro	ught For	ward Fron	n Last Re	eport	-		\$			13,30	1.86						
B. Total Monet	ary Conti	ributions A	And Rece	eipts (From	Sche	dule I)	\$	5		7	7.50						
C. Total Funds	Available	e (Sum Of	Lines A	and B)			\$	5		13,37	9.36						
D. Total Expen	ditures (	From Sche	edule III	[)			\$	5		1,47	7.93						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)		4	5		11,90	1.43						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le II)	\$	5		(	0.00						
G. Unpaid Deb	ts And Ob	oligations	(From S	chedule IV	)		\$	5			0.00						
					AFF	IDAVI	IT SE	CTION									
PART I - If this i	s a Comn	nittee repo	ort, treas	surer sign	here. I	If this is	s a Ca	ndidate re	eport, ca	andida	te sig	jn here.					
I swear (or affirm correct and compl		report, incl	uding the	attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, a	re to t	he best o:	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	scribed bef day of	ore me this		20						Sig	nature	e of Perso	n Submitt	ing Rep	ort		-
	_						_					Prin	ted Name				-
My Commission E	xpires	Signatur	re									Ema	il				-
		мо	DA	Y	YR				Area	a Code		Daytim	e Teleph	one Nu	mber		-
Part II- If this is	a report	t of a cand	lidate's a	authorized	Comn	nittee, C	Candio	late shall	sign he	re.							
I swear (or affirm) No 320) as amend		ne best of m	ıy knowle	dge and beli	ef this	political	comn	nittee has n	ot violate	ed any j	provisi	ions of th	e act of Ju	ine 3,19	937 (P.	L. 133	з,
Sworn to and subso	cribed befo day of	ore me this		20							Si	ignature (	of Candida	ite			-
							_					Printe	d Name				-
My Commission F		Signature					_					Ema	il				_
My Commission Exp	oires _						_										
	_	мо	DA	NY	YR				Area C	Code		D	aytime Te	elephon	e Numl	per	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>11/26/2024</u> **To:** Benham for PA <u>12/31/2024</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 77.50 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting 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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 77.50 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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		Rep	orting I	Period		
			From	m:		То	
		·			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 Sche	dule I, Detailed Sun	nmary Page, Se	ection	12.			\$ 0.00

Use this Part to it	emize all othei 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an Ig per	aggreg iod.			rom
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	State	Zip Code (Plus 4	)					
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 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				
			From:			То:		
				DA	TE			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 Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	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			Rep	orting Pe	riod			
			Froi	n:		Т	):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
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#	<b>AGE TOTAL</b> 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 Candidate			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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 Perio	d	
Benham for PA	From:	<u>11/26/2024</u> то:	<u>12/31/2024</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			Reporting	Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b>]</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	-			•		
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	L
						\$		0.00

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

Name of Filing Committee or Candidate			Rep	porting I	Period		
			Fro	m:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							<b>\$</b> 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupa	ation		
Employer Mailing Address/Principal Plac	e of Business (	City	State	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	l Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
Benham for PA			From	<u>11/20</u>	<u>5/2024</u>	То:	<u>12/31/2024</u>
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
ActBlue							
Mailing Address PO Box 441146			12	1	2024	\$	3.35
City West Somerville	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	МА	021440031	Service	fee			
To Whom Paid Brentwood Athletic Association			мо	DAY	YEAR		
Mailing Address 98162 PO			12	19	2024	\$	250.00
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure		
	PA	15227	sponsor				
To Whom Paid Google, LLC			мо	DAY	YEAR		
Mailing Address 1600 Amphitheatre	Pkwy		12	2	2024	\$	34.42
City Mountain View	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	CA	940431351	email /	domain se	rvice		
To Whom Paid Minuteman Press Pittsburgh			мо	DAY	YEAR		
Mailing Address 521 E Ohio St			12	10	2024	\$	797.84
<b>City</b> Pittsburgh	State	Zip Code (Plus 4)	Descrip	i tion of Exp	enditure	I	
	PA	152125516	printing				
To Whom Paid NGP VAN, Inc			мо	DAY	YEAR		
Mailing Address 1445 New York Ave	NW Ste 200		12	3	2024	\$	342.40
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	200052158	fundrais	sing tool			
To Whom Paid South Side Chamber of Commerce			мо	DAY	YEAR		
Mailing Address 1910 E Carson St St	e 2		12	5	2024	\$	30.00
<b>City</b> Pittsburgh	State	Zip Code (Plus 4)	Descrip	l tion of Exp	l enditure	I	
	PA	152031803	event d	onation			

To Whom Paid			мо	DAY	YEAR	
Squarespace, Inc			MO		TEAR	
Mailing Address 225 Varick St Fl 12			12	12	2024	\$ 12.72
City New York	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	
	NY	100144383	website			
To Whom Paid			мо	DAY	YEAR	
Stripe			MO		TEAR	
Mailing Address 354 Oyster Point Blv	′d		12	1	2024	\$ 7.20
City South San Francisco	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	
	CA	940801912	Credit c	ard proces	sing fee	
						PAGE TOTAL
Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item D.	•			\$ 1,477.93