

# Campaign Finance Report

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

|   |                          |           |                         |                                    |                      |                         |  |  |                              |                                     |                   |                    |
|---|--------------------------|-----------|-------------------------|------------------------------------|----------------------|-------------------------|--|--|------------------------------|-------------------------------------|-------------------|--------------------|
| <b>Filer Identification Number :</b>                                  |                          | 20170364  |                         | <b>Report Filed By :</b>           |                      | <b>CANDIDATE</b>        |  | <b>COMMITTEE</b> <input checked="" type="checkbox"/> |                              | <b>LOBBYIST</b>                     |                   |                    |
| <b>Name of Filing Committee, Candidate or Lobbyist:</b> MARIA FOR PA  |                          |           |                         |                                    |                      |                         |  |  |                              |                                     |                   |                    |
| <b>Street Address:</b> PO BOX 1006                                    |                          |           |                         |                                    |                      |                         |  |  |                              |                                     |                   |                    |
| <b>City:</b> SPRING HOUSE   |                          |           |                         |                                    |                      | <b>State:</b> PA        |  |  | <b>Zip Code:</b> 19477       |                                     |                   |                    |
| <b>TYPE OF REPORT</b><br><br>(place X to the right of report type)    | 6TH TUESDAY PRE-PRIMARY  | 1.        | 2ND FRIDAY PRE-PRIMARY  | 2.                                 | 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. X      | Year 2024               | <b>FILING METHOD ( ) CHECK ONE</b> |                      |                         | <b>PAPER</b> <input checked="" type="checkbox"/> | <b>DISKETTE</b>                                      |                              |                                     |                   |                    |
| <b>Name of Office Sought by Candidate:</b>                            |                          |           |                         |                                    |                      | <b>DATE OF ELECTION</b> |  |  | <b>District Number</b>       | <b>Office Code</b>                  | <b>Party Code</b> | <b>County Code</b> |
| SENATOR IN THE GENERAL ASSEMBLY                                       |                          |           |                         |                                    |                      | <b>MO</b>               | <b>DAY</b>                                       | <b>YEAR</b>  | 12                           | STS                                 | DEM               | 46                 |
|   |                          |           |                         |                                    |                      | 11                      | 5  | 2024   | (SEE INSTRUCTIONS FOR CODES) |                                     |                   |                    |
| <b>Summary of Receipts and Expenditures from:</b>                     |                          | <b>MO</b> | <b>DAY</b>              | <b>YEAR</b>                        | <b>TO</b>            | <b>MO</b>               | <b>DAY</b>                                       | <b>YEAR</b>  | <b>FOR OFFICE USE ONLY</b>   |                                     |                   |                    |
|   |                          | 11        | 26                      | 2024                               |                      | 12                      | 31   | 2024   |                              |                                     |                   |                    |
| <b>A. Amount Brought Forward From Last Report</b>                     |                          |           |                         |                                    |                      | \$                      |  |  | 19,710.13                    |                                     |                   |                    |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b> |                          |           |                         |                                    |                      | \$                      |  |  | 30,516.00                    |                                     |                   |                    |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                |                          |           |                         |                                    |                      | \$                      |  |  | 50,226.13                    |                                     |                   |                    |
| <b>D. Total Expenditures (From Schedule III)</b>                      |                          |           |                         |                                    |                      | \$                      |  |  | 16,973.11                    |                                     |                   |                    |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>           |                          |           |                         |                                    |                      | \$                      |  |  | 33,253.02                    |                                     |                   |                    |
| <b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>  |                          |           |                         |                                    |                      | \$                      |  |  | 0.00                         |                                     |                   |                    |
| <b>G. Unpaid Debts And Obligations (From Schedule IV)</b>             |                          |           |                         |                                    |                      | \$                      |  |  | 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

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                       |
| MARIA FOR PA                                 | From: <u>11/26/2024</u> To: <u>12/31/2024</u> |

|  |          |
|--|----------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |          |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 66.00 |

|  |             |
|--|-------------|
| <b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b> |             |
| <b>Contributions Received From Political Committees (Part A)</b>                 | \$ 350.00   |
| <b>All Other Contributions (Part B)</b>  | \$ 1,850.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 2,200.00 |

|   |              |
|---|--------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |              |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 9,500.00  |
| <b>All Other Contributions (Part D)</b>                                 | \$ 18,750.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 28,250.00 |

|  |         |
|--|---------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |         |
| <b>TOTAL for the Reporting Period (4)</b>  | \$ 0.00 |

|   |              |
|---|--------------|
| <b>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.)</b> | \$ 30,516.00 |
|---|--------------|

**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.**

|  |  |             |               |
|--|--|-------------|---------------|
| <b>Name of Filing Committee or Candidate</b><br><br>MARIA FOR PA   | <b>Reporting Period</b><br><br>From: <u>11/26/2024</u> To: <u>12/31/2024</u> |             |               |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table> |  | <b>DATE</b> | <b>AMOUNT</b> |
| <b>DATE</b>  | <b>AMOUNT</b>  |             |               |

|   |                    |                                       |           |            |             |           |
|---|--------------------|---------------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b><br>GMEREK GOVERNMENT RELATIONS INC PAC |                    |                                       | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| <b>Mailing Address</b> 212 LOCUST ST STE 300                                      |                    |                                       | 12        | 10         | 2024        |           |
| <b>City</b> HARRISBURG  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>171011510 |           |            |             |           |

  

|  |                    |                                   |           |            |             |           |
|--|--------------------|-----------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b><br>PENNSYLVANIA PSYCHOLOGICAL PAC |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| <b>Mailing Address</b> 6925 STEVENSON AVE SUITE H                            |                    |                                   | 12        | 2          | 2024        |           |
| <b>City</b> HARRISBURG   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17112 |           |            |             |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 350.00         |

## 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)**

|  |                    |                                       |  |  |            |               |           |
|--|--------------------|---------------------------------------|--|--|------------|---------------|-----------|
| <b>Name of Filing Committee or Candidate</b><br>MARIA FOR PA |                    |                                       |  | <b>Reporting Period</b><br>From: <u>11/26/2024</u> To: <u>12/31/2024</u> |            |               |           |
|  |                    |                                       |  | <b>DATE</b>  |            | <b>AMOUNT</b> |           |
| <b>Full Name of Contributor</b><br>SCOTT BADAMI              |                    |                                       |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 250.00 |
| <b>Mailing Address</b> 961 CROSS LN                          |                    |                                       |  | 12   | 18         | 2024          |           |
| <b>City</b> BLUE BELL  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194221575 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>KATHRYN CACCIAMANI        |                    |                                       |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 100.00 |
| <b>Mailing Address</b> 1800 JOHN F KENNEDY BLVD STE 300      |                    |                                       |  | 12   | 18         | 2024          |           |
| <b>City</b> PHILADELPHIA                                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191037402 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>KIMBERLY KOCH             |                    |                                       |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 250.00 |
| <b>Mailing Address</b> 121 GILLIN RD                         |                    |                                       |  | 12   | 18         | 2024          |           |
| <b>City</b> AMBLER   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190025708 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>PHILIP LACHENMAYER        |                    |                                       |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 250.00 |
| <b>Mailing Address</b> 1772 BUTLER PIKE                      |                    |                                       |  | 12   | 10         | 2024          |           |
| <b>City</b> CONSHOHOCKEN                                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194281565 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>JANINE MARTIN             |                    |                                       |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 250.00 |
| <b>Mailing Address</b> 605 EDERER LN                         |                    |                                       |  | 12   | 18         | 2024          |           |
| <b>City</b> LOWER GWYNEDD                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190022006 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>KEVIN MCPHILLIPS          |                    |                                       |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 100.00 |
| <b>Mailing Address</b> 304 LANSDOWNE RD                      |                    |                                       |  | 12   | 5          | 2024          |           |
| <b>City</b> HAVERTOWN  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190835306 |  |  |            |               |           |

|                          |  |               |                   |           |     |      |    |        |
|--------------------------|--|---------------|-------------------|-----------|-----|------|----|--------|
| Full Name of Contributor |  |               |                   | MO        | DAY | YEAR | \$ | 100.00 |
| DOTTIE MILLER            |  |               |                   |           |     |      |    |        |
| Mailing Address          |  |               |                   | 12        | 13  | 2024 |    |        |
| 701 THATCHER LN          |  | State         | Zip Code (Plus 4) |           |     |      |    |        |
| City                     |  | HATFIELD      | PA                | 194402200 |     |      |    |        |
| Full Name of Contributor |  |               |                   | MO        | DAY | YEAR | \$ | 200.00 |
| JANICE M. MILLER         |  |               |                   |           |     |      |    |        |
| Mailing Address          |  |               |                   | 12        | 10  | 2024 |    |        |
| 102 CLAREMONT DR         |  | State         | Zip Code (Plus 4) |           |     |      |    |        |
| City                     |  | LANSDALE      | PA                | 194466359 |     |      |    |        |
| Full Name of Contributor |  |               |                   | MO        | DAY | YEAR | \$ | 100.00 |
| MICHAEL TWERSKY          |  |               |                   |           |     |      |    |        |
| Mailing Address          |  |               |                   | 12        | 9   | 2024 |    |        |
| 810 SPRING HOUSE FARM LN |  | State         | Zip Code (Plus 4) |           |     |      |    |        |
| City                     |  | LOWER GWYNEDD | PA                | 190022171 |     |      |    |        |
| Full Name of Contributor |  |               |                   | MO        | DAY | YEAR | \$ | 250.00 |
| JOSEPH WALSH             |  |               |                   |           |     |      |    |        |
| Mailing Address          |  |               |                   | 12        | 16  | 2024 |    |        |
| 110 FAIRVIEW DR          |  | State         | Zip Code (Plus 4) |           |     |      |    |        |
| City                     |  | LANSDALE      | PA                | 194466364 |     |      |    |        |

**PAGE TOTAL**

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

\$ 1,850.00

## 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.**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b><br><br>MARIA FOR PA | <b>Reporting Period</b><br><br><b>From:</b> <u>11/26/2024</u> <b>To:</b> <u>12/31/2024</u> |
|--|--|

|   |  |          |                             | DATE |     | AMOUNT |             |
|---|--|----------|-----------------------------|------|-----|--------|-------------|
| Full Name of Contributing Committee         |  |          |                             | MO   | DAY | YEAR   | \$ 500.00   |
| CARROLL ENGINEERING CORP LEADERSHIP PAC     |  |          |                             | 12   | 11  | 2024   |             |
| Mailing Address 949 EASTON RD               |  |          |                             |      |     |        |             |
| City WARRINGTON                             |  | State PA | Zip Code (Plus 4) 189761812 |      |     |        |             |
| Full Name of Contributing Committee         |  |          |                             | MO   | DAY | YEAR   | \$ 1,000.00 |
| COMMITTEE FOR GOOD GOVERNMENT PAC           |  |          |                             | 12   | 18  | 2024   |             |
| Mailing Address PO BOX 212                  |  |          |                             |      |     |        |             |
| City CHALFONT                               |  | State PA | Zip Code (Plus 4) 189140212 |      |     |        |             |
| Full Name of Contributing Committee         |  |          |                             | MO   | DAY | YEAR   | \$ 500.00   |
| DUQUESNE LIGHT COMPANY PA PAC               |  |          |                             | 12   | 2   | 2024   |             |
| Mailing Address 411 7TH AVE # MAILDROP16-4  |  |          |                             |      |     |        |             |
| City PITTSBURGH                             |  | State PA | Zip Code (Plus 4) 152191919 |      |     |        |             |
| Full Name of Contributing Committee         |  |          |                             | MO   | DAY | YEAR   | \$ 2,500.00 |
| IUPAT DISTRICT COUNCIL 21 PAC               |  |          |                             | 12   | 17  | 2024   |             |
| Mailing Address 2980 SOUTHAMPTON RD         |  |          |                             |      |     |        |             |
| City PHILADELPHIA                           |  | State PA | Zip Code (Plus 4) 191541202 |      |     |        |             |
| Full Name of Contributing Committee         |  |          |                             | MO   | DAY | YEAR   | \$ 1,000.00 |
| PFIZER PAC                                  |  |          |                             | 12   | 17  | 2024   |             |
| Mailing Address 235 E 42ND ST               |  |          |                             |      |     |        |             |
| City NEW YORK                               |  | State NY | Zip Code (Plus 4) 100175703 |      |     |        |             |
| Full Name of Contributing Committee         |  |          |                             | MO   | DAY | YEAR   | \$ 1,000.00 |
| PHILADELPHIA ASSOCIATION OF RETAIL DRUGGIST |  |          |                             | 12   | 11  | 2024   |             |
| Mailing Address 2417 WELSH RD STE 21        |  |          |                             |      |     |        |             |
| City PHILADELPHIA                           |  | State PA | Zip Code (Plus 4) 191142209 |      |     |        |             |

|  |          |                             |    |     |      |             |
|--|----------|-----------------------------|----|-----|------|-------------|
| Full Name of Contributing Committee    |          |                             | MO | DAY | YEAR | \$ 2,500.00 |
| STEAMFITTERS LOCAL UNION 420 COPE FUND |          |                             | 12 | 30  | 2024 |             |
| Mailing Address 14420 TOWNSEND RD      |          |                             |    |     |      |             |
| City PHILADELPHIA                      | State PA | Zip Code (Plus 4) 191541030 |    |     |      |             |

|   |          |                             |    |     |      |          |
|---|----------|-----------------------------|----|-----|------|----------|
| Full Name of Contributing Committee     |          |                             | MO | DAY | YEAR | \$500.00 |
| TRANSPORT WORKERS LABOR UNION LOCAL 234 |          |                             | 12 | 2   | 2024 |          |
| Mailing Address 500 N 2ND ST            |          |                             |    |     |      |          |
| City PHILADELPHIA                       | State PA | Zip Code (Plus 4) 191234216 |    |     |      |          |

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

|   |
|---|
| <p><b>PAGE TOTAL</b></p> <p>\$ 9,500.00</p> |
|---|

**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.)**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b><br><br>MARIA FOR PA | <b>Reporting Period</b><br><br>From: <u>11/26/2024</u> To: <u>12/31/2024</u> |
|--|--|

|  |                    |                                       |                           | DATE                                | AMOUNT             |                                       |             |
|--|--------------------|---------------------------------------|---------------------------|-------------------------------------|--------------------|---------------------------------------|-------------|
| <b>Full Name of Contributor</b><br>JOHN J ZAHARCHUK                                      |                    |                                       |                           | <b>MO</b>                           | <b>DAY</b>         | <b>YEAR</b>                           | \$ 1,000.00 |
| <b>Mailing Address</b> 8 DEVONSHIRES CT  |                    |                                       |                           | 12                                  | 4                  | 2024                                  |             |
| <b>City</b> BLUE BELL  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194222560 |                           |                                     |                    |                                       |             |
| <b>Employer Name</b> SUMMIT REALTY ADVISORS  |                    |                                       |                           | <b>Occupation</b> REALTOR & MANAGER |                    |                                       |             |
| <b>Employer Mailing Address/Principal Place of Business</b><br>201 MAPLE AVESTE 100      |                    |                                       | <b>City</b><br>PENLLYN    |                                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194221009 |             |
| <b>Full Name of Contributor</b><br>WISLER PEARLSTINE LLP                                 |                    |                                       |                           | <b>MO</b>                           | <b>DAY</b>         | <b>YEAR</b>                           | \$ 500.00   |
| <b>Mailing Address</b> 460 NORRISTOWN RD STE 110   |                    |                                       |                           | 12                                  | 18                 | 2024                                  |             |
| <b>City</b> BLUE BELL  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194222344 |                           |                                     |                    |                                       |             |
| <b>Employer Name</b>   |                    |                                       |                           | <b>Occupation</b>                   |                    |                                       |             |
| <b>Employer Mailing Address/Principal Place of Business</b>                              |                    |                                       | <b>City</b>               |                                     | <b>State</b>       | <b>Zip Code (Plus 4)</b>              |             |
| <b>Full Name of Contributor</b><br>MITCHELL L. WEIN                                      |                    |                                       |                           | <b>MO</b>                           | <b>DAY</b>         | <b>YEAR</b>                           | \$ 1,000.00 |
| <b>Mailing Address</b> 739 HEMINGWAY DR  |                    |                                       |                           | 12                                  | 9                  | 2024                                  |             |
| <b>City</b> AMBLER   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190021421 |                           |                                     |                    |                                       |             |
| <b>Employer Name</b> BROOKINGS INSTITUTION   |                    |                                       |                           | <b>Occupation</b> SVP/COO           |                    |                                       |             |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1775 MASSACHUSETTS AVE NW |                    |                                       | <b>City</b><br>WASHINGTON |                                     | <b>State</b><br>DC | <b>Zip Code (Plus 4)</b><br>200362103 |             |
| <b>Full Name of Contributor</b><br>SWANSON STREET ASSOCIATES                             |                    |                                       |                           | <b>MO</b>                           | <b>DAY</b>         | <b>YEAR</b>                           | \$ 2,500.00 |
| <b>Mailing Address</b> 630 SENTRY PKWY   |                    |                                       |                           | 12                                  | 18                 | 2024                                  |             |
| <b>City</b> BLUE BELL  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194222316 |                           |                                     |                    |                                       |             |
| <b>Employer Name</b>   |                    |                                       |                           | <b>Occupation</b>                   |                    |                                       |             |
| <b>Employer Mailing Address/Principal Place of Business</b>                              |                    |                                       | <b>City</b>               |                                     | <b>State</b>       | <b>Zip Code (Plus 4)</b>              |             |

|  |                    |                                       |                         |                                |                    |             |                                       |
|--|--------------------|---------------------------------------|-------------------------|--------------------------------|--------------------|-------------|---------------------------------------|
| <b>Full Name of Contributor</b><br>ALBERT RIECK                                  |                    |                                       |                         | <b>MO</b>                      | <b>DAY</b>         | <b>YEAR</b> | \$ 500.00                             |
| <b>Mailing Address</b> 521 PERKIOMEN AVE   |                    |                                       |                         | 12                             | 4                  | 2024        |                                       |
| <b>City</b> LANSDALE   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194463430 |                         |                                |                    |             |                                       |
| <b>Employer Name</b> NOT EMPLOYED  |                    |                                       |                         | <b>Occupation</b> NOT EMPLOYED |                    |             |                                       |
| <b>Employer Mailing Address/Principal Place of Business</b><br>521 PERKIOMEN AVE |                    |                                       | <b>City</b><br>LANSDALE |                                | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>194463430 |

  

|  |                    |                                       |                           |                                       |                    |             |                                       |
|--|--------------------|---------------------------------------|---------------------------|---------------------------------------|--------------------|-------------|---------------------------------------|
| <b>Full Name of Contributor</b><br>ALAN LINDY                                |                    |                                       |                           | <b>MO</b>                             | <b>DAY</b>         | <b>YEAR</b> | \$ 750.00                             |
| <b>Mailing Address</b> 117 CHESTON LN  |                    |                                       |                           | 11                                    | 27                 | 2024        |                                       |
| <b>City</b> AMBLER   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190022753 |                           |                                       |                    |             |                                       |
| <b>Employer Name</b> LINDY PROPERTY MANAGEMENT                               |                    |                                       |                           | <b>Occupation</b> PROPERTY MANAGEMENT |                    |             |                                       |
| <b>Employer Mailing Address/Principal Place of Business</b><br>209 LEEDOM ST |                    |                                       | <b>City</b><br>JENKINTOWN |                                       | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>190463263 |

  

|   |                    |                                       |                       |                       |                    |             |                                       |
|---|--------------------|---------------------------------------|-----------------------|-----------------------|--------------------|-------------|---------------------------------------|
| <b>Full Name of Contributor</b><br>MICHAEL B. LAIGN                       |                    |                                       |                       | <b>MO</b>             | <b>DAY</b>         | <b>YEAR</b> | \$ 500.00                             |
| <b>Mailing Address</b> 6 BARON LN   |                    |                                       |                       | 12                    | 4                  | 2024        |                                       |
| <b>City</b> AMBLER  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190021520 |                       |                       |                    |             |                                       |
| <b>Employer Name</b> HOLY REDEEMER HEALTH SYSTEM                          |                    |                                       |                       | <b>Occupation</b> CEO |                    |             |                                       |
| <b>Employer Mailing Address/Principal Place of Business</b><br>6 BARON LN |                    |                                       | <b>City</b><br>AMBLER |                       | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>190021520 |

  

|   |                    |                                       |                           |                           |                    |             |                                       |
|---|--------------------|---------------------------------------|---------------------------|---------------------------|--------------------|-------------|---------------------------------------|
| <b>Full Name of Contributor</b><br>SEAN P KILKENNY ESQUI                    |                    |                                       |                           | <b>MO</b>                 | <b>DAY</b>         | <b>YEAR</b> | \$ 500.00                             |
| <b>Mailing Address</b> 715 WASHINGTON LN                                    |                    |                                       |                           | 12                        | 5                  | 2024        |                                       |
| <b>City</b> JENKINTOWN  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190462953 |                           |                           |                    |             |                                       |
| <b>Employer Name</b> MONTGOMERY COUNTY                                      |                    |                                       |                           | <b>Occupation</b> SHERIFF |                    |             |                                       |
| <b>Employer Mailing Address/Principal Place of Business</b><br>519 SWEDE ST |                    |                                       | <b>City</b><br>NORRISTOWN |                           | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>194014806 |

  

|  |                    |                                       |                       |                             |                    |             |                                       |
|--|--------------------|---------------------------------------|-----------------------|-----------------------------|--------------------|-------------|---------------------------------------|
| <b>Full Name of Contributor</b><br>SCOTT FREDA                                 |                    |                                       |                       | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b> | \$ 2,500.00                           |
| <b>Mailing Address</b> 348 FRANKLIN CT   |                    |                                       |                       | 12                          | 19                 | 2024        |                                       |
| <b>City</b> AMBLER   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190021019 |                       |                             |                    |             |                                       |
| <b>Employer Name</b> SCF CONSULTING  |                    |                                       |                       | <b>Occupation</b> PRESIDENT |                    |             |                                       |
| <b>Employer Mailing Address/Principal Place of Business</b><br>348 FRANKLIN CT |                    |                                       | <b>City</b><br>AMBLER |                             | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>190021019 |

  

|   |                    |                                       |             |                   |              |             |                          |
|---|--------------------|---------------------------------------|-------------|-------------------|--------------|-------------|--------------------------|
| <b>Full Name of Contributor</b><br>DILWORTH PAXSON LLP      |                    |                                       |             | <b>MO</b>         | <b>DAY</b>   | <b>YEAR</b> | \$ 1,000.00              |
| <b>Mailing Address</b> 1500 MARKET ST STE 3500E             |                    |                                       |             | 12                | 17           | 2024        |                          |
| <b>City</b> PHILADELPHIA                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191022101 |             |                   |              |             |                          |
| <b>Employer Name</b>  |                    |                                       |             | <b>Occupation</b> |              |             |                          |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b> |                   | <b>State</b> |             | <b>Zip Code (Plus 4)</b> |

|   |                    |                                       |                               |                             |                    |                                       |                  |
|---|--------------------|---------------------------------------|-------------------------------|-----------------------------|--------------------|---------------------------------------|------------------|
| <b>Full Name of Contributor</b><br>CHRISTOPHER DEZZI                      |                    |                                       |                               | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b>                           | <b>\$</b> 500.00 |
| <b>Mailing Address</b> 857 HAMILTON DR                                    |                    |                                       |                               | 12                          | 18                 | 2024                                  |                  |
| <b>City</b> LAFAYETTE HILL  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194441746 |                               |                             |                    |                                       |                  |
| <b>Employer Name</b> THE DEZZI GROUP, LTD.                                |                    |                                       |                               | <b>Occupation</b> PRESIDENT |                    |                                       |                  |
| <b>Employer Mailing Address/Principal Place of Business</b><br>PO BOX 235 |                    |                                       | <b>City</b><br>LAFAYETTE HILL |                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194440235 |                  |

  

|   |                    |                                       |                         |                           |                    |                                       |                  |
|---|--------------------|---------------------------------------|-------------------------|---------------------------|--------------------|---------------------------------------|------------------|
| <b>Full Name of Contributor</b><br>PATRICK J COSTELLO                         |                    |                                       |                         | <b>MO</b>                 | <b>DAY</b>         | <b>YEAR</b>                           | <b>\$</b> 500.00 |
| <b>Mailing Address</b> 119 HOLLY DR   |                    |                                       |                         | 12                        | 18                 | 2024                                  |                  |
| <b>City</b> HATBORO   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190401516 |                         |                           |                    |                                       |                  |
| <b>Employer Name</b> RE/MAX   |                    |                                       |                         | <b>Occupation</b> REALTOR |                    |                                       |                  |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1955 STREET RD |                    |                                       | <b>City</b><br>BENSALEM |                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190202804 |                  |

  

|   |                    |                                       |                             |                            |                    |                                       |                    |
|---|--------------------|---------------------------------------|-----------------------------|----------------------------|--------------------|---------------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>MICHAEL P. CLARKE                          |                    |                                       |                             | <b>MO</b>                  | <b>DAY</b>         | <b>YEAR</b>                           | <b>\$</b> 1,000.00 |
| <b>Mailing Address</b> 506 LANTERN LN   |                    |                                       |                             | 12                         | 30                 | 2024                                  |                    |
| <b>City</b> PHILADELPHIA  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191281052 |                             |                            |                    |                                       |                    |
| <b>Employer Name</b> RUDOLPH CLARKE LLC                                       |                    |                                       |                             | <b>Occupation</b> ATTORNEY |                    |                                       |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>506 LANTERN LN |                    |                                       | <b>City</b><br>PHILADELPHIA |                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191281052 |                    |

  

|   |                    |                                       |                             |                            |                    |                                       |                    |
|---|--------------------|---------------------------------------|-----------------------------|----------------------------|--------------------|---------------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>MICHAEL P. CLARKE                          |                    |                                       |                             | <b>MO</b>                  | <b>DAY</b>         | <b>YEAR</b>                           | <b>\$</b> 1,000.00 |
| <b>Mailing Address</b> 506 LANTERN LN   |                    |                                       |                             | 12                         | 2                  | 2024                                  |                    |
| <b>City</b> PHILADELPHIA  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191281052 |                             |                            |                    |                                       |                    |
| <b>Employer Name</b> RUDOLPH CLARKE LLC                                       |                    |                                       |                             | <b>Occupation</b> ATTORNEY |                    |                                       |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>506 LANTERN LN |                    |                                       | <b>City</b><br>PHILADELPHIA |                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191281052 |                    |

  

|  |                    |                                       |                            |                       |                    |                                       |                    |
|--|--------------------|---------------------------------------|----------------------------|-----------------------|--------------------|---------------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>KENNETH D BAKER                           |                    |                                       |                            | <b>MO</b>             | <b>DAY</b>         | <b>YEAR</b>                           | <b>\$</b> 5,000.00 |
| <b>Mailing Address</b> 1034 RADCLIFF LN                                      |                    |                                       |                            | 12                    | 3                  | 2024                                  |                    |
| <b>City</b> AMBLER   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190022134 |                            |                       |                    |                                       |                    |
| <b>Employer Name</b> NEW AGE INDUSTRIES                                      |                    |                                       |                            | <b>Occupation</b> CEO |                    |                                       |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>145 JAMES WAY |                    |                                       | <b>City</b><br>SOUTHAMPTON |                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>189663817 |                    |

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

**PAGE TOTAL****\$** 18,750.00

## 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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|                     |       |                   | 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.

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 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**

|  |  |   |         |
|--|--|---|---------|
| <b>Name of Filing Committee or Candidate</b>   |  | <b>Reporting Period</b>                       |         |
| MARIA FOR PA   |  | From: <u>11/26/2024</u> To: <u>12/31/2024</u> |         |
| <b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>   |  |   |         |
| TOTAL for the Reporting Period   |  | (1)   | \$ 0.00 |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>  |  |   |         |
| TOTAL for the Reporting Period   |  | (2)   | \$ 0.00 |
| <b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>  |  |   |         |
| 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: |

|   |       |                   |  | 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

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                      |
| MARIA FOR PA                                 | From <u>11/26/2024</u> To: <u>12/31/2024</u> |

| DATE  |                 |                                    |  | AMOUNT       |
|---|-----------------|------------------------------------|--|--------------|
| To Whom Paid  | MO              | DAY                                | YEAR   |              |
| ACTBLUE   |                 |                                    |  |              |
| <b>Mailing Address</b> PO BOX 441146                | 12              | 23                                 | 2024   | \$ 511.31    |
| <b>City</b> WEST SOMERVILLE                         | <b>State</b> MA | <b>Zip Code (Plus 4)</b> 021440031 | <b>Description of Expenditure</b> PROCESSING FEE             |              |
| To Whom Paid  | MO              | DAY                                | YEAR   |              |
| GODADDY   |                 |                                    |  |              |
| <b>Mailing Address</b> 14455 N HAYDEN RD            | 12              | 24                                 | 2024   | \$ 44.34     |
| <b>City</b> SCOTTSDALE                              | <b>State</b> AZ | <b>Zip Code (Plus 4)</b> 852606993 | <b>Description of Expenditure</b> SOFTWARE FEE               |              |
| To Whom Paid  | MO              | DAY                                | YEAR   |              |
| NGP VAN   |                 |                                    |  |              |
| <b>Mailing Address</b> 1445 NEW YORK AVE NW STE 200 | 12              | 6                                  | 2024   | \$ 339.20    |
| <b>City</b> WASHINGTON                              | <b>State</b> DC | <b>Zip Code (Plus 4)</b> 200052158 | <b>Description of Expenditure</b> SOFTWARE LICENSE           |              |
| To Whom Paid  | MO              | DAY                                | YEAR   |              |
| NORTHBOUND  |                 |                                    |  |              |
| <b>Mailing Address</b> 2 W BROAD ST                 | 12              | 23                                 | 2024   | \$ 377.34    |
| <b>City</b> SOUDERTON                               | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 189641535 | <b>Description of Expenditure</b> MEETING                    |              |
| To Whom Paid  | MO              | DAY                                | YEAR   |              |
| PA SENATE DEMOCRATIC CAMPAIGN COMMITTEE             |                 |                                    |  |              |
| <b>Mailing Address</b> PO BOX 59358                 | 12              | 27                                 | 2024   | \$ 10,000.00 |
| <b>City</b> PHILADELPHIA                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 191029358 | <b>Description of Expenditure</b> CONTRIBUTION               |              |
| To Whom Paid  | MO              | DAY                                | YEAR   |              |
| RITTENHOUSE POLITICAL PARTNERS                      |                 |                                    |  |              |
| <b>Mailing Address</b> 121 S BROAD ST FL 4          | 12              | 12                                 | 2024   | \$ 4,000.00  |
| <b>City</b> PHILADELPHIA                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 191074544 | <b>Description of Expenditure</b> CONSULTING FEES & EXPENSES |              |

|  |                    |                                       |  |            |             |                  |
|--|--------------------|---------------------------------------|--|------------|-------------|------------------|
| <b>To Whom Paid</b><br>SPRING HOUSE TAVERN   |                    |                                       | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 876.42 |
| <b>Mailing Address</b> 1032 N BETHLEHEM PIKE |                    |                                       | 12   | 18         | 2024        |                  |
| <b>City</b> AMBLER                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190022114 | <b>Description of Expenditure</b><br>EVENT EXPENSE |            |             |                  |

  

|  |                    |                                       |   |            |             |                 |
|--|--------------------|---------------------------------------|---|------------|-------------|-----------------|
| <b>To Whom Paid</b><br>WELLS FARGO       |                    |                                       | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 25.00 |
| <b>Mailing Address</b> 420 MONTGOMERY ST |                    |                                       | 12  | 27         | 2024        |                 |
| <b>City</b> SAN FRANCISCO                | <b>State</b><br>CA | <b>Zip Code (Plus 4)</b><br>941041207 | <b>Description of Expenditure</b><br>WIRE FEE |            |             |                 |

  

|   |                    |                                       |   |            |             |                  |
|---|--------------------|---------------------------------------|---|------------|-------------|------------------|
| <b>To Whom Paid</b><br>YIA YIAS BAKLAVA LLC |                    |                                       | <b>MO</b>                                 | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 799.50 |
| <b>Mailing Address</b> PO BOX 293           |                    |                                       | 12  | 19         | 2024        |                  |
| <b>City</b> PERKASIE                        | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>189440293 | <b>Description of Expenditure</b><br>GIFT |            |             |                  |

  

|  |  |  |  |  |  |                     |
|--|--|--|--|--|--|---------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b>   |
|  |  |  |  |  |  | <b>\$</b> 16,973.11 |

