

## Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible. It should be typed)

Filer Identification Number		Repo ( Mar	rt Filed B k X)	y Ca	andida	te	X	Comr	nittee				Lobby	st.
Name of Filing Committee, Ca Lobbyist	ındidate or		el Spellma	n										
Street Address		48 Ber	nwood Dr											
<b>City</b> North Ea	st		<u>.</u>	St	ate	PA		Zip C	ode	16428				
Type of Report (Place x under	report type)													
1- 6 <sup>th</sup> Tuesday 2- 2 <sup>nd</sup> Friday		4- 6 <sup>th</sup>	Tuesday	5- 2 <sup>nd</sup> F	riday	6- 30 D	ay Post	7- An	nual			Friday		l 30 Day
Pre-Primary Pre-Primary		F 75 59A	lection	Pre- Ele	12. Oct. 1. L	Election			7	Pre-E	lection	on	Post-E	lection
							100-112		<u> </u>	Term	Inati	Agen Ni	<u> </u>	<u>_</u>
Date Of Election (MM/DD/YYYY)	05/18/2021	Year		202	1	Amend Report	新新27 1.00%			Repo	rt.			
Summary of Receipts and Expenditures	From Date		To Date	<b>a</b>					For	Office l	Use C	Only		
	02/16/2021		05	/03/2021			. Heye. 1		Transi Transi				<u> </u>	
A. Amount Brought Forward		5 7 A 5 7 A		0										
B. Total Monetary Contributi (From Schedule I)	ons and Receipts	(1) P (1) P	_	0										
C. Total Funds Available (Sum of Lines A and B)		\$		0										
D. Total Expenditures (From Schedule III)		\$		1258.54	_								2021	
E. Ending Cash Balance (Subtract Line D from Line C)		\$		0										
F. Value of In-Kind Contribut (From Schedule II)		\$		0										
G. Unpaid Debts and Obligat (From Schedule IV)	ions	\$		0										
					davit Se		ian hore			<del></del>		3.77 mag	<del>بن -</del>	
Part 1- If this is a Committee report swear (or affirm) that this report	ort, treasurer sign h t. including the atta	ere. If t	nis is a Ca chedules o	ngidate re n paper, is	s to the	best of m	y knowle	dge and	belief t	rue, cor	rect a	nd comple	ete. N	
Sworn to and subscribed before							/						٠.	
day of	20	_	1		_	m	Signature	of Pers	on Subr	nitting r	eport		_	
		_	<u> </u>		_	140	Signature Chal	<u> </u>	<u> </u>	1577_				
Signature			, 1			2-111		PTIN	eu Nar (	/	,	2 6		
My Commission expiresMO.	DAY YR.	_				X / Y Area Code			<u>47</u>	<del>7 - 0</del> ytime Te	<b>d</b> eleph	<u>とら</u> one Numb	er	
	Milesele Accel	Comme	iaa	didete si -	ا دامه ا	nore								<u> </u>
Part II- If this is a report of a Can I swear (or affirm) that to the be amended.	αιαate's Authorized st of my knowledge	and be	lief this po	olitical con	nmittee	has not v	iolated a	ny provis	sions of	the Act	of Jui	ne 3, <b>193</b> 7	(P.L. 133	3, NO.320) a
Sworn to and subscribed before	me this													
day of	20		٠,		_			_						
		_	Į,				Sig	gnature	of Cand	lidate				
Signature		_			-			Printe	d Name	•				
My Commission expiresMO.	DAY YR.	_			_	Area Code	<u>-</u>		Day	time Te	lepho	ne Numbe	 er	
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## Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible, it should be typed)

Filer Identificat	ion	(Note: )	Repo	ort Filed I		Candida			X		mittee	•			Lobl	oyist	
Name of Filing Lobbyist	Committee, Ca	ndidate or		el Spellma	ın		· · · · · · · · · · · · · · · · · · ·	_انن	<u> </u>	1		•					
Street Address			48 Be	rnwood Di	r.												
City	North Eas	st				State	PA			Zip C	ode	164	28				
Type of Report	(Place x under	report type)				,	,			.d							
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary		Tuesday lection	1 1 1 1 1 1 1 1	d Friday Election	6- 30 Electi		y Post	7- An	nual		cial :	2 <sup>nd</sup> Friday tion	7	ial 30 -Elect	and the second
		, , iiiiai y	F.E-E	lection	Г	Liection								<u> </u>			
Date Of Election (MM/DD/YYYY	gall for the office feet of the contract of	05/18/2021	Year		<u>                                     </u>	2021	: Amer	1 TV	nent		<u> </u>	11.11.61	mina oort	] tión			
Summary of Re	ceipts and	From Date	Material Control	To Date	9		ere file Galego	4(-3)			For	Offic	e Use	Only	Bayer		
Expenditures		02/16/2021	n gri	05	/03/20	)21											
A. Amount Brou	ight Forward F	rom Last Repor	<b>t</b> \$		0		277	,	<u> </u>		<u></u>	<u> </u>	· ·	· ·			<u>ta kaine</u>
B. Total Moneta (From Schedule		ns and Receipts	\$		0												
C. Total Funds A (Sum of Lines A	vailable		\$		0												
D. Total Expend (From Schedule	itures		\$	:	1258.5	4											
E. Ending Cash I (Subtract Line D	Balance		\$		0												
F. Value of In-Ki (From Schedule	nd Contributio	ns Received	\$		0	-											
G. Unpaid Debt (From Schedule	s and Obligatio	ns	\$		0												
		The second of th				ffidavit Se											
Part 1- If this is a C I swear (or affirm)										las and l	aliaf t		ara at				
Sworn to and subs			Gried Sci	iedules of	i hahei	, 13 to the	best of f	iiy r	KIIOWIEU	ige anu i	Jellei Li	ue, cc	uieci	and complet	.e.		
day of_		20	_	1											_		
				<u> </u> _				Sig	nature	of Perso	n Subm	nitting	repor	t			
	Signature		_	,						Printe	d Nam	e		,			
My Commission ex	pires MO.	DAY YR.	_			A	rea Cod	е	_		Day	rtime 1	Геlерһ	ione Numbe	 r		
Part II- If this is a re	apart of a Condia	latale Authorized	Commi		ام مدما	II -: h-											
I swear (or affirm) amended.								/iola	ated any	/ provision	ons of t	he Act	t of Ju	ne 3, 1937 (I	P.L. 133	3, NO	.320) as
Sworn to and subs	cribed before me	e this															
day of		20															
uay oi		20	_			_			Sign	ature of	Candid	fate			_		
	Signature	<u>-</u>	_			-				Printed	Name						
My Commission ex	pires MO.	DAY YR.	_			A	rea Code	2	_		Dayt	ime Te	elepho	ne Number			

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## SCHEDULE I Contributions and Receipts

Detailed Summary Page

		<del></del>	
1.Uniternized Contributions and Receipts-\$50.0	00 or Less per Contributor		

1:Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		사용하는 것이 가는 사람들이 생각하다는 것으로 함께 되는 것 같습니다. 하늘 것 같습니다.
Total for the reporting period	(1)	\$ TO MANY TO THE TO THE TOTAL TO THE PROPERTY OF THE PROPERTY
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$
Total for the reporting period	(2)	\$
3. Contributions Over \$250,00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$
Total for the reporting period	(3)	\$ 
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	reason Palaka Palak	
Total for the reporting period	(4)	\$
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 Page 1, Rep Cover Page, Item B)	port	\$

#### 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.

Filer Identificatio	n Number				
Mark Street	and the second of the second				Amount
Full Name of Co	ontributing			Date [MM/DD/YYYY]	\$
Committee				×	₹.   \$
House #	Street Address			Date [MM/DD/YYYY]	\$:
City		State	Zip Code	Date [MM/DD/YYYY]	\$: \$:
Full Name of Co	ontributing			Date [MM/DD/YYYY]	S
Committee					Vie.
House #	Street Address			Date [MM/DD/YYYY]	<u>.:                                    </u>
City		State	Zip Code	Date [MM/DD/YYYY]	\$
				1	
Full Name of Co	ontributing	PACT OF ST	Programme two p	Date [MM/DD/YYYY]	State
Committee					
House #	Street Address			Date [MM/DD/YYYY]	\$
City	<u> </u>	State	Zip Code	Date [MM/DD/YYYY]	\$:
			A TOTAL CONTROL OF THE PARTY OF	A CONTROL OF THE PROPERTY OF T	
Full Name of Co	ontributing		register in and the	Date [MM/DD/YYYY]	\$   \$
Committee				TO DO SO MISTOR STORE ST	[6] [5]
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY] (5	\$
		28, 25, 85,		A District Control of the Control of	
Full Name of Co	ontributing	Territory	Principle of the second	Date [MM/DD/YYYY]	\$) 
Committee				8 - 5 - 25 s to 27 s to ap ( 25 + 5 + 10 + 10 + 1 + 10 + 10 + 10 + 10	
House #	Street Address			Date [MM/DD/YYYY]	\$,
				The second secon	
City		State	Zip Code	Date [MM/DD/YYYY] 5	<sup>©</sup> \$ :
		State	Zih code	Date Hanari DN 1 1 1 11	<b>₹</b> 3] +4]
Full Name of Co	ntributing		grade Communication	Date [MM/DD/YYYY]	\$-1
Committee				<u> </u>	<b>范</b> [1]
House #	Street Address			Date [MM/DD/YYYY] \$	53
City	6 0.7 w : 5-75.	State	Zip Code	Date [MM/DD/YYYY] \$	5
				**************************************	
a 5 (38 f 04.8)		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		1 1:	s.

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## PART B All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:				
- · · · · · · · · · · · · · · · · · · ·	 ·			
NAME OF THE PROPERTY OF THE PR				
Full Name of Contributor		Date (MM/DD/VV)	OYVI STORE	

		· · · · · · · · · · · · · · · · · · ·		
Füll Name of Contributor	_		Date [MM/DD/AYYY]	
House # Street Address			Date [MM/DD/YYYY]	\$ \$ 1
City	State	Zip Code	Date [MM/DD/YYYY]	<b>25</b>
Full Name of Contributor	1000	Bridge dates in the contract of the	Date [MM//DD/YYYY]	
House'# Street Address			Date [MM/DD/YYYY]	<b>\$</b>
. City	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributor			Date [MM/DD/YYYY]	<b>\$</b>
House # Street Address	<u> </u>		Date [MM/DD/YYYY]	S
City	State	Zip Code	Date [MM/DD/YYYY]	***
Füll Name of Contributor	Complete and EAST word all	[子學是第二百學表演學學的意志][58] [152]	Date [MM/DD//W/Y]	
			The state of the s	
House # Street Address			Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/YYYY]	
Full Name of Contributor	<b>法是证券上证</b> 证	<u> </u>	Date [MM/DD/YYYY]	
# 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1	_		10 Territation and a second of the second of the second	
House # Street Address			Date [MM/DD/YYYY]	
City	State	Zip Code		
Eull Name of Contributors	Mayor Agree - Springer	[1847] Mg - Mg (174, 472) (1838) or 1944 in 1842 (1		
		ļ		*
House # Street Address		1	Date [MM/DD/YYYY]	
City	State	-Zip Code		

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#### 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 over \$250.00 in the reporting period.

Filer identification Number:				
Full Name of	arce)			
Full Name of Contributing Committee			Date [MM/DD/YYYY]	<b>S</b>
House # Str	rreet Address		Date [MM/DD/YYYY]	<b>S</b>
			The State Contraction	
Gity	State	Zip Code	Date [MM/DD/YYYY]	
Full Name of			Date [MM/DD/YYYY]	等基础 加强 最后,
Contributing Committee			Date IVIVIDUATE	<b>(\$</b>
House # Str	rreet Address		Date [MM/DD/YYYY]	<b>\$</b>
City	State	Zip Gode	Date [MM/DD/YYYY]	
Full Name of	146000000000000000000000000000000000000	部(多数是CYTELRATION DECONOTION DEC	Date [MM/DD/YYYY]	
Contributing Committee	5.		]	
	reet Address		Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	<b>\$</b>
			A service of the publishment of the service of the	
Full Name of Contributing Committee			Date [MM/DD/YYYY]	\$
Target (	reet Address		Date [MM/DD/YYYY]	\$
Chy.	State	Zip Code		\$
Full Name of Contributing Committee	of Participations	1	Date MM/DD/YYYY	<b>\$</b>
	reet Address		11	\$
City	State	Zip Gode		
Full Name of Contributing Committee	SOTE Age			\$
	eet Address		Date [MM/DD/YYYY]	
city	State	Zip Code	Date [MM/DD/XXXX]	\$

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#### PART D

## **All Other Contributions**

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C)

Filer Identification Number:

Full Name of Contributor	All for spores		Date [MM/DD/YYYY] \$	
House # Stre	eet Address		Date [MM/DD/YYYY] \$	
<u>City</u>		Zip Code	Date [MM/DD/YYYY] \$	
Employer Name				
Employer Mailing Address			Occupation	
Principal Place of Business Full Name of Contributor				
			Date [MM/DD/YYYY]	
House #	et Address		Date [MM/DD/YYYY] \$	
City	State	Zip Gode	Date [MM/DD/YYYY]	
Employer Name  Employer Mailing Address //		<u> </u>	Occupation	
Principal Place of Business Full Name of Contributor				
The State of the S			Date [MM/DD/YYYY] 5	
	et, Address		Date [MM/DD/YYYY] \$	
- Sity	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name Employer Mailing Address /			Occupation	
Principal Place of Business				
Full Name of Contributor	-		Date [MM/DD/YYYY] S	
	et Address		Date:[MM/DD/YYYYY] S	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name		等是不可能是不是一种的。 1967年(1968年)	Occupation	
Employer Mailing Address / Principal Place of Business				

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#### PART E

## **Other Receipts**

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer identification Number:

Full Name			*	***
Full Name  House:#	Street Address		<del></del>	
City		State	Zip	Date [MM/DD/YYYY] 5
		er er fram i forbol f	Code	
Receipt Description			<del></del>	
Full Name				
House #	Street Address	W. 2002. 2007	En Contact Nation	Local contract of the second Libraries
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		Managa Managa	<b>  接触</b>	[数]
Full Name				***
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			The second secon	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
-			<del></del>	
Full Name House #	Street Address			
City		State	Zio	Date [MM/DD/YYYY] \$
			Code	
Receipt Description		(公置(公益基 200年))	I saffine Structure in the saffine structure i	图状部
Füll Name			· · · · · · · · · · · · · · · · · · ·	
House #	Street Address			- M =
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			Code	
Full Name		****		
	Street Address			
To the state of th		State	ZĺO	Date [MM/DD/YYYY] \$
			Code	Date [MM/DD/YYYY] \$
Receipt Description				

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#### SCHEDULE II

## IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number:			
UNITEMIZEDINEKIND CONTR		OF \$50.00 OR LESS PER CONTRIBU	TOR
TOTAL for the reporting period	(1)	\$	
2. IN-KIND CONTRIBUTIONS REG	EIVED-VALUE OF \$50.01	D \$250.00 (FROM PART F)	and the second s
TOTAL for the reporting period	(2)	\$	
3. IN-KIND CONTRIBUTION RECE	IVED-VALUE OVER \$250.0	r(FROM PARTG)	
TOTAL for the reporting period	(3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTION PERIOD (Add and enter amount totals from Page 1, Report Cover Page, Item F)			

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#### SCHEDULE II PART F

## **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

77					
Filer Identificat	lon Number:				
					<u>.</u>
Full Name of	Contributor	-		Date [MM/DD/YYYY]	\$1
House #	Street Address			Date [MM/DD/YYYY]	\$
				SAST STATE OF THE SAST STATE STATE OF THE SAST STATE STATE OF THE SAST STATE STATE STATE OF THE SAST STATE OF THE SAST STATE OF THE SAST STATE STATE STATE OF THE SAST STATE STATE OF THE SAST STATE STATE OF THE	
City	EMATS 中報 1900年 (V) - 5050 (43 × 47 € 1 m, 16 a	State	Zip Code	Date [MM/DD/YYYY]	
	**************************************	And the same		17 数 次	조 :
Description of	Contribution	Control Control Control			
Full Name of 0	ontributor			Date [MM/DD/YYYY]	<b>S</b> #
				10.00 mg/m	
House#	Street Address			Date [MM/DD/YYYY]	<b>5</b>
City	年後の後代は世界がおけるは私はあいの > ***	State	Zip Code		<b>5</b> #
					Make 2 Secret Secret Minuses
Description of	Contribution		· -		
Full Name of G	ontributor			Date (MM/DD/AYAY)	<b>6</b> 39
House#	Street Address			Date [MM/DD/YYYY]	\$,,
City		State	Zip Code	Date [MM/DD/XYYY]	\$2
Description of	Contribution		T 3.5 MARS 127-1689		
		N. A. D. C.			
Full Name of C	ontributor			Date [MM/DD/YYYY)]	
	2.76.260.00.16 2.77.27.16				
House#	Street Address			Date [MM/DD/YYYY]	\$
		(1174-1176-1176-1	To conto conto (RAIN_ANS AL		
City ::		State	Zip Code	39	\$
Description of	Contribution		2000年1月1日 - 1000年1月1日 - 1000年1月 - 1	· · · · · · · · · · · · · · · · · · ·	
o control	And Refs (Autority 1975)				×4481
Full Name of C	ontributor			Date [MM/DD/YYYY]	<b>5</b>
	120000				
House#	Street Address				\$
City		State	Zip Gode		
		oranga ora	ZIP COGE	100	
Description of	Contribution	F. WILLIAM PARTY FEE			
	AND THE RESIDENCE AND AND ADDRESS OF THE PARTY OF THE PAR				

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#### **SCHEDULE II** Part G

## **In-Kind Contributions Received**

	=====================================	VALUE OVER \$25	<u> </u>
Filer Identification Numb	er i		
Full Name of Contribu	<b>2</b> 8数4数0		Local Agents and the second se
			Date [MM/DD/XYYY] \$
House #	Street Address		Date [MM/DD/YYYY] \$
City =	State	Zip Code	Date [MM/DD/\\\\]
Employer Name		「主义多数数的发展的主要量	Occupation
Employer Mailing Addi Place of Business			Description of Contribution
Full Name of Contribut			Date [MM/DD/YYYY] \$
House #	Street Address		Date [MM/DD/YYYY] \$
Gity	State	ZIP Gode	Date [MM/DD/YYYY] \$
Employer Name		【京学教育等第4·17年中的中国公开发展中	Occupation
Employer Mailing Addr Place of Business	ess://Principal		Description of: Contribution:
Full Name of Contribute	01		Date [MIW/DD/YYYY] \$
House #	treet-Address		Date [MM/DD/YYYY] S
Chy	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Oscupation
Employer Mailing Addre	=55 //Principal		Description"
Full Name of Contributo			of Contribution
			Date [MM/DD/YYYY] \$
	reet Address		Date [MM/DD/YYYY] \$
City	State	Zip.Code	Date [MM/DD/YYYY] \$
Employer Name		[漢香粉][法][本][本][本]	Occupation:
Employer Mailing Addre Place of Business	ss://Principal		Description of S Contribution

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## Statement of Expenditures

and the state of t	
Filer Identification Number:	
2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

To Whom Paid						Date [MM/D	D/YYYY]	\$	
	bulkapparel.com					02/19/20	li li		50.34
<b>House #</b> 9225	Street Address	lowdy Dr				Description of	of Expendit	ure	
<b>City</b> San Diego		State	CA	Zip Code	92126	Shirts			
To Whom Paid	143Vinyl					Date [MM/DI	)/YYYY]	\$	
Maria Perundukan Laga		_				02/19/20	13	20.00 to 20.00 to	23.20
<b>House #</b> 4508	Street Address	hepherdsville	Rd			Description o	f Expenditu	ıre	e traver to constitution Alternation of the consti
<b>Gity</b> Louisville		State	кү	Zip Code	40218	Vinyf			
To Whom Paid	American Carnival M	art				Date [MM/DI	A CHARACTER STATE OF THE STATE	\$	62.00
						03/11/20	12		02.00
House # 1317	Street Address Li	ndbergh Plaza	a Cntr			Description o	r Expenditu	ire	
City St. Louis		*State	МО	Zip Code	63132	Easter Eggs			
To Whom Paid	Great Lakes Entertain	- ment	•			Date [MM/DI	)/ <b>/////</b> ]	\$	75.00
		mienc				03/03/20			75.00
House# po box 818	Street Address					Description of	l Expenditu	ire	
City Waterford		State F	PA	Zip Code	16441	Entertainment			
To Whom Paid									
	C&C Printing					Date [MM/DE		<b>\$</b>	00.00
House #	T-40.					03/17/20	21	1	00.00
House # 23	Street Address	outh Lake St					21	1	00.00
House #	Street Address	State	<b>P</b> A	Zip Code	16428	03/17/20	21	1	00.00
House # 23 Gity North East To Whom Paid	Street Address Sc	State	<sup>p</sup> A	Zip Gode	16428	03/17/20 Description of Graphics Date [MM/DD	21 Expenditu	ie 1	
House # 23 City North East To Whom Paid	Street Address So	State	PΑ	Zip Code	16428	03/17/20 Description of Graphics Date [MM/DE 03/17/20	21 Expenditu  //YYYY) 21	1. Tre	48.00
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#### **SCHEDULE IV**

## **Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer identification Number:

Name of Creditor			Outstanding Balance of Debt
House:#	Street Address	DATE DEBT INCURRED	
		[MM/DD/YYYY]	
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Description of Debt		Code	
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Name of Creditor			Outstanding Balance of Debt
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Name of Creditor			Outstanding Balance of Debt
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Description of Debt			•
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		[MM/DD/YYYY]	
	To The County Co		
City	St	ate Zip	Ta-
		Code	
	**************************************		
Description of Debt -			



#### PENNSYLVANIA CAMPAIGN FINANCE REPORT

This Report must be typed or printed legibly in blue or black ink.

#### INSTRUCTIONS

This form is intended for the use of candidates, political committees and contributing lobbylsts who are required to disclose contributions and expenditures. Candidates must file separate reports when they make expenditures or receive contributions on their own behalf and separate from their campaign committee. A candidate's report discloses contributions received and expenditures made individually by the candidate. A contributing lobbylst's report discloses only expenditures the lobbylst personally made to influence the outcome of a candidate's election.

Candidates and their authorized political committees file reports in the office where their nomination documents are filed. If the candidate's reports are filed with the Secretary of the Commonwealth, a copy of the reports filed by the candidate and the authorized committee must be filed with the County Board of Elections in the county in which the candidate resides.

#### REPORT COVER PAGE

The Report Cover Page identifies the filer, the type of report and what reporting period is covered. It also summarizes the detailed contribution and expenditure sections from the body of the report.

Filer Identification Number - This number is assigned by the Bureau of Commissions, Elections and Legislation to candidates and committees who register and file with the Secretary of the Commonwealth. A candidate's filer identification number is assigned by the Bureau when the candidate files nomination petitions. A political committee or lobbyist filer identification number is assigned when the committee or lobbyist files registration documents in the Bureau.

Report Filed By - Please indicate which type of filer you are by checking the appropriate box on the cover page.

Name of Filing Committee, Candidate or Lobbyist, Street Address, City, State, Zip Cade - Please enter appropriate name and address.

Type of Report - Please place an "X" by the applicable report type.

Amendment Report - Check "Yes" only if the report is being filed to correct, add to, or in some way change a report that has already been filed.

Termination Report - Check "Yes" only if the filer has no cash balance, no unpaid debts or obligations, and wishes to cease operation. Contributing lobbyists may file a termination report if they do not anticipate making further contributions to influence the outcome of a candidate's election.

Filing Method - Indicate whether the complete report is filed on paper, or if the report is filed by diskette accompanied by the signed and notarized cover sheet.

Name of Office Sought - If filed by a candidate or candidate's committee, indicate office sought.

Date of Election - If this is a pre- or post-primary/election report, indicate the date of the primary or election.

District Number - If filed by a candidate or candidate's committee, indicate district in which candidate is seeking office.

Office Code, Party Code and County Code - If filed by candidate or candidate's committee, refer to code charts at the back of this report form. Enter the corresponding code letters for the office sought and the political party of the candidate; enter the corresponding code number for the county of residence of the candidate. Candidates for local offices who file only with the County Board of Elections should enter Office Code OTH for Offices.

Summary of Receipts and Expenditures - Enter the appropriate dates of the reporting period covered.

Amount Brought Forward From Last Report (Item A) - The balance, if any, as of the first day of the reporting period. For committees, it is the amount reported as the ending cash balance on the previous report filed, if any.

Items B through G - See detailed instructions on each corresponding schedule.

Affidavit Section - Must be sworn to by the filer acknowledging the accuracy of the report (Part I). On reports filed by a candidate's authorized committee, the candidate must sign an additional affidavit (Part II).

Page Number - Calculate the total number of pages in the completed report and indicate on top of cover page. Subsequent pages should be numbered consecutively.

Reports Filed on Diskette: The cover page must accompany all filings, including diskette filings. Diskette filings must also meet the technical specifications of the Department. These specifications are available at www.dos.state.pa.us or by contacting the Bureau.

#### SCHEDULE I

#### CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page - provides a summary of all monetary contributions and receipts during the reporting period.

Item 1: Unitemized Contributions and Receipts represents the total amount of contributions and receipts of \$50.00 or less in the aggregate per contributor received during the reporting period. Items 2, 3 and 4: Enter the total for each section from the corresponding schedules in the report (Part A, Part B, Part C, Part D and Part E).

Enter the total from Schedule I on the Report Cover Page, Item B.

Definition of Contribution: Any payment, gift, subscription, assessment, contract, payment for services, dues, loan, forbearance, advance or deposit of money or any valuable thing, to a candidate or political committee made for the purpose of influencing any election in this Commonwealth or for paying debts incurred by or for a candidate or committee before or after any election. "Contribution" shall also include the purchase of tickets for events such as dinners, luncheons, rallies and other fund-raising events; the granting of discounts or rebates by television and radio stations and newspapers not extended on an equal basis to all candidates for the same office; and any payments provided for the benefit of any candidate, including any payments for the services of any person serving as an agent of a candidate or committee by a person other than the candidate or committee or a person whose expenditures the candidate or committee must report under the act. The word "contribution" includes any receipt or use of anything of value received by a political committee from another political committee and also includes any return on investments by a political committee. (See 25 P.S. §3241)

#### Instructions for Reporting Contributions

The *aggregate* total of contributions from an individual contributor within a reporting period determines which part of the report form should be used to disclose a contribution or receipt. The form is designed to list the dates and amounts of as many as three separate contributions from the same source in one line item.

Contributions and receipts of \$50 or less, per contributor, during the reporting period, need not be itemized on the report. The total amount of all unitemized contributions should appear on Schedule I, Contributions and Receipts Detailed Summary Page, Line 1. A record must be kept of the receipt dates of contributions and the names and addresses of each person from whom a contribution of over \$10 has been received.

Contributions and receipts over \$50 to \$250 - report the name of the contributor, mailing address, amount and date received on Schedule I, Part A, "Contributions Received from Political Committees," or Part B "All Other Contributions."

Contributions and receipts over \$250 - report the name of the contributor, mailing address, occupation, employer's name and address, amount and date received on Schedule I, Part C, "Contributions Received from Political Committees," or Part D, "All Other Contributions."

Receipts - Use Part E, "Other Receipts" to report all other monetary receipts or income; e.g. refunds received, interest income, returned checks and prior expenditures that were returned to the filer during the reporting period.

Address - In all Parts, a complete address, including zip code, must be provided. Space is provided for the Zip Code Plus Four. The State block should be completed with the U.S. Postal Service's standard two-letter abbreviation, such as PA for Pennsylvania.

Date - all date blocks in the report must be completed with eight digits. For instance, March 24, 2000 would appear as 03 24 2000.

Total - of each Part should be transferred to the appropriate section on the Schedule I, "Contributions and Receipts Detailed Summary Page" (Page 2 of the report form).

Occupation and Employer - Part D, which lists individuals who have contributed over \$250, also requires the occupation and name and address of the employer of the contributor. Report the principal place of business of any contributor who is self-employed.

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#### SCHEDULE II

#### IN-KIND CONTRIBUTIONS RECEIVED

Detailed Summary Page - provides a summary of all in-kind contributions and valuable things received during the reporting period.

Item 1: Unitemized In-Kind Contributions Received represents the total value of in-kind contributions of \$50.00 or less, in the aggregate per contributor, received during the reporting period.

Items 2 and 3: Enter the total for each section from the corresponding schedules in the report (Part F and Part G).

Enter the page total on Page 1, Report Cover Page, Item F.

Part F and Part G - Use these Parts to itemize in-kind contributions from individuals or political committees according to the dollar value of the contribution. The form is designed to list the dates and amounts of as many as three separate in-kind contributions from the same source in one line item. The amount is equal to the current market value of the item or service contributed.

Totals of Parts F and G should be transferred to the appropriate section on the Schedule II Detailed Summary Page.

#### SCHEDULE III

#### **EXPENDITURES**

Definition of Expenditure: The payment, distribution, loan or advancement of money or any valuable thing by a candidate, political committee or other person for the purpose of influencing the outcome of an election; the payment, distribution, loan, advance or transfer of money or other valuable thing between or among political committees; the providing of a service or other valuable thing for the purpose of influencing the outcome of a nomination or election of any person to any public office to be voted for in this Commonwealth; or the payment or providing of money or other valuable thing by any person other than a candidate or political committee, to compensate any person for services rendered to a candidate or political committee. (See 25 P.S. §3241)

#### Instructions for Reporting Expenditures

Pursuant to state law, the Statement of Expenditures requires the filer to report the purposes for which funds were expended, the name and address of the entity to whom the expenditure was made, and the amount and date of each expenditure.

Vouchers for all expenditures over \$25.00 must be retained by the candidate or committee treasurer and shall be available for public inspection or copying. Filers are not required to submit vouchers with reports; however, vouchers must be retained for a period of three years.

Transactions between a candidate and his/her committee should be recorded on both the candidate's and committee's reports. For example, if a candidate contributes to or loans the committee money, the amount should appear on the candidate's report as an expenditure and on the committee's report as a receipt. A loan must also be reported by the recipient on the Statement of Unpaid Debts (Schedule IV).

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#### **SCHEDULE IV**

#### STATEMENT OF UNPAID DEBTS

All unpaid debts and obligations which are outstanding at the end of the reporting period must be reported. If a debt is incurred in one reporting period and not repaid, every report filed must continue to show the outstanding debt, even though there was no activity during the current reporting period.

A debt owed to an individual may be forgiven. A copy of the letter of forgiveness from the individual to the committee must accompany the report filed by the committee in the reporting period in which the debt was forgiven. A debt that is forgiven is considered a contribution to the committee. Such contributions from corporations or unincorporated associations are prohibited by the Election Code.

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#### REPORT FILING DEADLINES

Sixth Tuesday Pre-Election - Reporting period closes 50 days prior to election day. Filed only by candidates for Statewide office and political committees/lobbyists supporting such candidates.

Second Friday Pre-Election - Reporting period closes 15 days prior to election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Thirty Day Post-Election - Reporting period closes 20 days after election day. File 30 days after election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Annual Report - Reporting period closes December 31. File by January 31 of the year following the reporting period. Filed by all candidates for nomination or election, political committees and contributing lobbyists.

Political committees required to file pre-election reports must also file post-election reports.

Postmarks - are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the U.S. Postal Service no later than the day prior to the filing deadline.

Late filling fee - A late filling fee of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the report is overdue, plus an additional fee of \$10.00 for the first six days that a report is overdue will be assessed.

#### County Code Table:

Cor	unty Code Table:				
01	Adams	24	Elk	47	Montour
02	Allegheny	25	Erie	48	Northampton
03	Armstrong	26	Fayette	49	Northumberland
04	Beaver	27	Franklin	50	Perry
05	Bedford	28	Forest	51	Philadelphia
06	Berks	29	Fulton	52	Pike
07	Blair	30	Greene	53	Potter
80	Bradford	31	Huntingdon	54	Schuylkill
09	Bucks	32	Indiana	55	Snyder
10	Butler	33	Jefferson	56	Somerset
11	Cambria	34	Juniata	57	Sullivan
12	Cameron	35	Lackawanna	58	Susquehanna
13	Carbon	36	Lancaster	59	Tioga
14	Centre	37	Lawrence	60	Union
15	Chester	38	Lebanon	61	Venango
16	Clarion	38	Lehigh	62	Warren
17	Clearfield	40	Luzerne	63	Washington
18	Clinton	41	Lycoming	64	Wayne
19	Columbia	42	McKean	65	Westmoreland
20	Crawford	43	Mercer	66	Wyoming
21	Cumberland	44	Mifflin	67	York
22	Dauphin	45	Monroe		
23	Delaware	46	Montgomery		

#### Party Code Table:

REP	Republican Party
DEM	Democratic Party
CST	Constitutional Party
LIB	Libertarian Party
REF	Reform Party
OTH	Other

#### Office Code Table:

Office	o Code Table:
GOV	Governor
LTG	Lieutenant Governor
ATT	Attorney General
AUD	Auditor General
TRE	State Treasurer
SPM	Justice of the Supreme Court
SPR	Judge of the Superior Court
CCJ	Judge of the Commonwealth Court
STS	Senator in the General Assembly
STH	Representative in the General
	Assembly
CPJ	Judge of the Court of Common Pleas
MCJ	Judge of the Municipal Court
TCJ	Judge of the Traffic Court
OTH	Other (Candidates for local offices
	who file only with the County
	Board of Elections)

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#### **Pennsylvania Department of State**

Name of Filing Committee, Candidate, or Lobbyist

Bureau of Campaign Finance & Civic Engagement
210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

2021 MAY -7 PM 7: 57

# Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

**Note:** Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports.** This form must be signed by hand where a signature is required.

Reporting Cycle	Name					
□ <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<b>区 Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	☐ Cycle 3 30 Day Post Primary	☐ <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election		□ <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election	
☐ Cycle 6  30 Day Post-Election	☐ <b>Cycle 7</b> Annual Report	☐ <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Specia			☐ Cycle 9  30 Day Post-Special Election	
Part I - If this form this form is submit is submitted with a declare under pe that the accompare	ted with a Candid report by a cont nalty of perjury u	late report, the car ributing lobbyist, t Inder the law of th	ndidate i the lobby ne Comn	must sign h vist must si n <b>onwealth</b>	nere. If this repor ign here.	
Signature of Treasurer, Candidate, or Lobbyist			05 - 07 - 2021 Date (DD/MM/YYYY)			
Michael .	Spellman inted Name	<del></del>	North Locat	<u>৲ িন্দ্র</u> ion (City/S	PA US <u>A</u> tate/Country)	



## **Pennsylvania Department of State**

Bureau of Campaign Finance & Civic Engagement
210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

**Part II** - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist	Date (DD/MM/YYYY)		
Printed Name	Location (City/State/Country)		