

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

Filer Identification Number	•		rt Filed F rk X)		te	Committee	•	Lobbyist
Name of Filing Committee, Ca	ndidate or	declar	/	aca lan	· · · ·	City ((<u>.</u>	
Lobbyist Street Address			3 71	rg Bur 13 Suna	vedale:	13hd.	(uncil	
City	En'e		<u> </u>	State	PA	Zip Code	16509	
Type of Report (Place x under	report type)							
1- 6 th Tuesday 2- 2 nd Friday Pre-Primary Pre-Primary	3-30 Day Post Primary		Tuesday lection	5- 2 nd Friday Pre- Election	6-30 Day Pos Election	t 7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
		Ī	1					
Date Of Election (MIM/DD/YYYY)	11/02/2021	Year		2021	Amendment Report		Termination Report	
Summary of Receipts and	From Date	*****	To Date) 3:		For	Office Use Only	TO THE STATE OF TH
Expenditures	6/8/2021		10/10	8/2021				er og fill 1998 og fill stil stil stil stil stil stil stil s
A. Amount Brought Forward F	rom Last Repor	3.3,7%	459	7.70				
B. Total Monetary Contributio (From Schedule I) C. Total Funds Available	ns and Receipts		1,10	0.00				
(Sum of Lines A and B)		\$	453	9.70				2.00 g
D. Total Expenditures (From Schedule III)		\$ 1,266. 53				7 6 . s 1 5 . s 2 7 . s		
E. Ending Cash Balance (Subtract Line D from Line C)		\$	28	4.17				
F. Value of In-Kind Contribution (From Schedule II)	ns Received	\$ 0					125 660 530	A 99 1 19
G.:Unpaid Debts and Obligation (From Schedule IV)	ns	\$	-6	}				errobitolik
		.		Affidavit Se			name i i	0.0 900
Part 1- If this is a Committee report I swear (or affirm) that this report,							rue, correct and comple	
Sworn to and subscribed before m					Cl.	(- R.		
day of	20	_	Ĺ	_	Signatur	e of Person Subn	nitting report	
Signature		_	ſ	_	771010	Printed Nam	//////////////////////////////////////	
My Commission expires		. ,		10509 (301) 639-4			4164	
MO.	4	rea Code	Da	ytime Telephone Numb	er			
Part II- If this is a report of a Candi								
I swear (or affirm) that to the best amended.	of my knowledge	and beli	ef this pol	litical committee	has not violated a	iny provisions of	the Act of June 3, 1937	(P.L. 1333, NO.320) as
Sworn to and subscribed before m	e this				5	21	_	
day of	20	_	1	_		ignature of Candi	date	
		_	1.	_	Cri	4 13WWn		
Signature			, [אררז. זו	Printed Name	244 250 -	
My Commission expiresMO.	DAY YR.	_			rea Code	Day	3 <i>14</i>)	2737

SCHEDULE I Contributions and Receipts

Detailed Summary Page

Filer Identification Number	

1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	ovita is	 The Alice of Wardshood Company with the News Williams Company from the Williams
Longentzer Continuations and receipts 737/00 of 1255 per Continuation		
Total for the reporting period	(1)	\$
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	(1.4) (2.5)	
Contributions Received from Political Committees (Part A)		\$ - ''' '
All Other Contributions (Part B)		\$ 100
Total for the reporting period	(2)	\$ 100
3. Contributions Over \$250:00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$ 1,000
Total for the reporting period	(3)	\$ 1,000
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$ 600 0-0
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, Report Cover Page, Item B)	ort	\$ 1,100

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.

House # Street Address Date [MM/DD/YYYY] S City State Zip Code Date [MM/DD/YYYY] S Full Name of Contributing Date [MM/DD/YYYY] S Committee Date [MM/DD/YYYY] S Date [MM/DD/YYYY] S	Filer Identification					
House # Street Address Date [MM/DD/YYYY] S						Amount
House # Street Address Date [MM/DD/YYYY] S		ontributing			Date [MM/DD/YYYY]	\$
City State Zip Code Date [MM/DD/YYYY] S	Committee					(44) (4)
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City State Zip Code Date [MM/DD/YYYY] \$						
	City	The same of the same of	State	Zip Code	Date [MM/DD/YYYY]	\$
						473 174

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.)

# C11 \$ \$ \$ 1 \$ \$ 4 \$ 4 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			
Filer Identification Number:			
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Service and the service of the servi			

Eull Name of Contributor		Date [MM/DD/YYYY)	_
Dave	Tullio	(0/05/2021 /00.00	
House # 422 Street Address	Upland Drive	Date [MM/DD/AYYY]	
Ene	State PA Zip:Code 16 509	Date [MM/DD/XXXX] \$	
Full:Name of Contributor		*Pate [MM/DD/XXXY] = \$	
House # Street Address		Date [MM//DD/YYYY] = 5	
Gity	State Zip:Code	Date [MM/DD/XXXX]	
Full Name of Contributor	According to the Accord	Date [MM/DD/YYYY) = \$	
#House # Street Address		Date:[MM/DD/XYYY] \$	
CHY :	State Zip Code:	Date [MM/DD/XYYY] 55	
		2000 AMAC	
Full Name of Contributor:	· · · ·	Date [MM/DD/\\\\\]	
House:# Street Address		Date [MM//DD//YYYY] \$	
Gity	State Zip:Code	Date [MM/DD/YYYY] = \$	
Full Name of Contributor	[275] [275]	.Date:[MM/DD/YYYY] :\$.	
House;# Street Address	416-4	Date [MM/DD/YYYY] \$	
Gity	State Zip Code	Date [MMI/DD/YYYY] 5	
			_
Full/Name of Contributor		:Date [MM!/DD/XYYY] = \$	
House # Street Address	- A	Date [MM//DD//YYYY] \$	_
City	State Zip Code	Date [MM/DD/YYYY]	

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			Date [MM/DD/XXXX) = \$	
Contributing Committee				
House# Street Ad	dress		*Date [MM/DD/YYYY/] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Property Company (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				
Full Name of			Date [MM/DD/YYYY] (\$	
Contributing Committee				
House # Street Ad	dress	****	Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
	in the control of the		22.034 22.034	
Full Name of			Date [MM/DD/YYYYY] \$	
Contributing Committee:				
House# Street Ad	dress		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Control of the Contro				
Full Name of			Date [MM/DD/YYYY] \$	
Contributing Committee:				
House # Street Ad	dress		Date [MM/DD/YYYY] \$	
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Full Name of			Date [MM/DD/YYYY] \$	
Contributing Committee			With A state of the state of th	
House # Street Ad	dress		Date [MM/DD/YYYY] \$	
			2000 100 2000 100 200	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
		A company of the desired and the second of t	A THE STATE OF THE	
Full Name of			Date [MM/,DD/,YYYY) \$	
Contributing Committee			\$200 \$200 \$200 \$200 \$200 \$200 \$200 \$200	
House # Street Ad	dress		Date [MM/DD/YYYY] \$	
			· · · · · · · · · · · · · · · · · · ·	
City	State	Zip Code	Date [MM/DD/YYYY]	
Section 15. Ch			**************************************	

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 Identil	fication Numb	eri					-				
	i de la company de la comp	w to 1 5500						-"			
Full Name	of Contribut	and the state of t	- Ricl	Lards				Date	MM/DD/\ ./o/ ∰	20.32	1,000.00
	1928 Ba	Street Address	Sugh	Shore BORAN	Drive Drive	©		Date	[MM/DD/	163.	
City	En'e		State	PA	Zip Cod	16	202	Date	[MM/DD/\	(****) \$	
Employer	Name	100000000000000000000000000000000000000	Atto	ney				Occup	ation	Atterny	•
	Mailing Addi Place of Busin		230		Sizech	Strut	<i>B</i> n'e	PA	1650	*	
CONTROL D'ALL PROPERTY	of Contribut	or which is considered an employment properties							MM/DD/\	<u>(YYYY)</u> \$	
House #		Street/Address				~=		Date	MM/DD/\	(YYY) \$	
City			State		Zip Code	2		Date	MM/DD/\	ayy) s	Figure 1
Employer	Name							Occup	ation	,	
	Mailing Addı Place of Busir							100 000 000			
Full Name	of Contribut	or.						Date [MM/DD/\	(YYY) \$	
House#		Street Address				_		Date.[MM/DD/N	· (YYYY)	23.5 7.0 2.5 2.5 2.5 2.5 2.5 2.5 2.5 2.5 2.5 2.5
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Employer								Occup	ation		
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Full Name	of Contribut	O(Date [MM/DD/Y	YYY] \$	
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Employer:l	Name Mailing Addr	ess:/						Occup	ation		

Principal Place of Business

PART E

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Filer Identification Number:

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

MANAGERAL DESCRIPTION				
	· consequence			
⊧Füll Name				
House #	Street Address			
City		State	Zip	Date [MM/DD/YYYY] \$
			Code	
Receipt Description	1, day on the processor in the control of the contr			
Full Name	T THE STATE OF THE			
House:#	Street Address			
City	The second secon	State	Zip Code	Date [MM/DD/XYYY] \$
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Full Name				
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Full Name		****		
House #	Street Address			
City		State	Zip Code	Date:[MM/DD/XXXX] = \$
Receipt: Description	ALCONOMIS .	[bigs blightlenger on spec	Processor State Conf.	- Polymen
Full Name				
House#	Street Address			
City +		State	Zip Code	Date [MM/DD/XYYY] \$
Receipt Description		[\$\frac{1}{2}\frac{1}{	(April 1977)	(\$6min)
House#	Street Address			
City	The state of the s	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	The state of the s	accounted ments only content	[1000 (- 1000 (V)]	(Sansade)

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

Eiler Identification: Number:				
1. UNITEMIZEDIN-KIND CONTR	DESTRUCTOR CONTRACTOR	IE-VIE-CEV-VONO DANGECC-DE	D*CONTDIDIPTODE « massauring	i de la martina de la companya de l
TOTAL for the reporting period	(1)	\$	KICO WINIDO ION	
To Marion and Toporating portion				
2: * N-KIND CONTR BUT ONS REG	EIVED-VALUE OF \$50:01:7	TO:\$250:00:(FROM:PART	(F)	
TOTAL for the reporting period	(2)	\$		
######################################	IVED:VALUE:OVER:\$250(DO (EROM PART G)		
TOTAL for the reporting period	(3)	\$		
TOTAL VALUE OF IN-KIND CONTRIBUTION PERIOD (Add and enter amount totals for Page 1, Report Cover Page, Item F)		1 1 1		

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Nur	mber:				
On the state of th	SECONDATE OF COLUMN SECOND				
Full Name of Contril	outor			Date [MM//DD//YYY/]	\$ 1
House#	Street Address	<u> </u>	-	Date [MM/DD/YYYY]	SS
					25 07 Feb.
City		State	Zip:Code:	Date [MM/DD/YYYY)	
Description of Contr	ibution		Similar Parish		
Full Name of Contrib	outor		···	Date [MM/DD/YYYY]	
House #	Street Address		1 - Mar-	Date [MM/DD/YYYY]	#\$ # # # # # # # # # # # # # # # # # #
City		···Caria		an a state of the	ENLANT BANKET CONTENT
		State	Zip Code	Date [MM/DD/YYYY]	
Description of Contr	ibution	Brasinski reda	1994 1994		作业共享
Full Name of Contrib	outor			Date [MM/DD/YYYY)]	*
House#	Street Address			Date [MM/DD/YYYY]	
City /		State	Zip Code	Date [MM/DD/YYYY]	Š
Description of Contr	ibution	A character of the char			\$100 King (1)
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FUIRNAME OF CONTIN				Date [MM/DD/YYYY]	45
House #	Street Address			Date [MM/DD/YYYY)	
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City		State	Zip Code	Date [MM/DD/YYYY]	\$
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Full Name of Contrib	utor Ž			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	5
CHE		× projecti		operating the section of	1500 1500 1500 1500
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contr	bution		The second second		Jacom + I

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:		
Füll:Name of Contributor		Date [MM/DD/YYYY]
House #, Street Addir	955 	Date [MM//DD/YYYY]
City	State Zip Code	"Date [MM/DD/XYYY] \$
Employer Name	Signature (Signature Signature Signa	Occupation
Employer Mailing Address / Princip Place of Business	oal .	Description of Contribution
Eull Name of Contributor		Date [MM/DD/XXXX]
House # Street Addre	SS .	Date [MM/DD/YYYY] 25
EGR Y	State Zip Code	Date [MM//DD/\\\\\)
Employer Name		Occupation/
Employer Mailing:Address://Princip Place:of:Business	ial	Description of Contribution
EulliName.of.Contributor⊴		;:Date:[MM//DD/AYYM];;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
House # Street Addre	55 5	Date [MM//DD/YYYY] \$5
SGHy.	State ZipiCode:	Date [MM/DD/YWY]
Employer Name	A second of the	«Occupation
Employer: Mailing: Address: // Princip Place: of Business	al/	Descriptions of Contributions
FulliName of Contributor.		Date [MM/DD/YYYY) Sz
House# Street Addre	5.5 5.6 6.6 6.6 6.6 6.6 6.6 6.6 6.6 6.6	Date [MM/DD/YYYY]\$
GITY	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address // Princip Place of Business		Description of Contribution

Statement of Expenditures

Colored Control of Control of Processing Control of Con		
Filer Identification Number:		
Provide Contraction (1997) Service Contraction (1997)		

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10-10-1			Committee of the commit		Code				
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City			State		Zip Code				
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House	#	Street Address					Description of Expendit	ure	
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To:Wh	om Paid						Date [MM/DD/XYXY]	\$	
House	#	Street Address					Description of Expendit	ure.	Concentration of
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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:

Tarrey W. W. Washington, N. S. S.	**************************************		
Name of Creditor			Outstanding Balance of Debt
House #	Street/Address	DATE DEBT INCURRED [MM/DD/YYYY]	Outstanding Balance of Debt
City	Si	ate Zip Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	
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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 lobbyists 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 lobbyist's report discloses only expenditures the lobbyist 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 Code - 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 filled 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 1

CONTRIBUTIONS AND RECEIPTS

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

Item 1: Unitermized 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.

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).

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.

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/lobbylsts 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 filing fee - A late filing 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:

01	Adams	24	Elk	47	Montour
02	Allegheny	25	Erie	48	Northampton
03	Armstrong	26	Fayette	49	Northumberland
04	Beaver	27	Franklin	50	Perry
Q 5	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	Vénango
16	Clarion	39	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:

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



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.

Name of Filing	Committee, Can	didate, or Lobby	ist		
Reporting Cycle	· Name				
☐ Cycle 1 6 th Tuesday Pre-Primary	□ Cycle 2 2 nd Friday Pre-Primary	Cycle 3 30 Day Post Primary	6 th T	Cycle 4 uesday Election	☐ Cycle 5 2 nd Friday Pre-Election
☐ Cycle 6 30 Day Post-Election	☐ Cycle 7 Annual Report	☐ Cycle 8 2 nd Friday Pre-Specia	Election	•	cle 9 st-Special Election

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist 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 Lobbvist

Date (DD/MM/YYYY)

, G Brown

ocation (City/State/Country)

Printed Name



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)

Congreg R. Brun Eniel IAI USF

ed Name Location (City/State/Country)