PAGE 1 OF (COVER PAGE)

### CAMPAIGN FINANCE REPORT

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

Filer Identification	THE RESERVE THE PERSON NAMED IN	WS	Report			1.		2.	3.	
Number:			Filed By:		CANDIDATE		COMMITT	EE X	LOBBYIST	
	ds of Coant	un Rol	DINSON	,						
Street Address:	ex 9232									
City:	Moun			3	State; PA		Zip Code:	5	- 9232	
TYPE OF	6TH TUESDAY 1.	2ND FRIDA		1	DAY T PRIMARY	3.	AMENDMEN REPORT?	YES YES		٦
REPORT	8TH TUESDAY 4.	2ND FRID. PRE-ELEC	AY 5.	110000000000000000000000000000000000000	DAY T ELECTION	6.	TERMINATI REPORT?	ION YES	NO	
(place X to the right of report type)	ANNUAL 7.	YEAR	2019		G METHOD CHECK ONE	<b>D</b>	PAPER		DISKETTE	7
Name of Office Sough	nt by Candidate:		7011	100	ATE OF ELE	-	District Number	Office Sode	Party Count	
C. II st	111	.1		МО		EAR	1	274	28m2039	
Whenlow	N City Cour	voil		12	12/120	9/9	FO		USE ONLY	)ES)
Summary of R		1. 1	EAR	MC		EAR		17	0 11	
and Expenditur	es from:	1 20	19 T			119			Y Y	
	t Forward From Last Rep		\$		3.07			AR	2:5	1
	Contributions and Receip		nedule I) \$		200.00/100		1 1	≺° :		
	ailable (Sum of Lines A a			(2) 8	263.07/10	5	ł			
	res (From Schedule III) ance (Subtract Line D fr	om Line C)	\$	3, 1	14. 2/100					1
	d Contributions Received			3, 7	48.22/105		ł			
	nd Obligations (From Sch		s s	40	0e -					
Marine III II a second			AFFIDAVIT				PAUL NA			anned Alexandr
PART I - If this i	s a Committee report, t	reasurer sign		_		port, c	andidate sig	n here.		
correct and complete				er or com	puter diskette,	are to	the best of r	ny knowled	ge and belief true	e,
Sworn to and subscr	ribed before Commonwealth Jessica M.	of Pennsylvania DeJesus, Nota	- Notary Seat		165		N/8	K.		1
LO-M day o		Bucks County 2 n expires Octo			Sign Sign	nature o	of Person Sub	mitting Re	port	-
	1 de Marcha Danne	ion number 13			CARM	ÊN		TIL		_
My commission exp	pires 10 /24	1202			610		390	935	7	_
	MO. L DAY	YR.	ر		Area Code		Day	ytime Telep	hone Number	
PART II - If this	is a report of a Candida	te's Authori	zed Commi	ttee, ca	ndidate shall	sign he	ere.			
(P.L. 1333, No. 320)				al commit	tee has not vi	olated a	any provision	s of the Ac	et of June 3, 1937	'
Sworn to and subso	Commonwealth of Penns	s, Notary Publi	Seal 9 7	,	ours	40	1. 1/2	in.		
Jan	My commission expire	s October 24. 2			Carl	· ·	ature of Can	ri .		-
/=	Member Partisylvania A	seciption of Net	acies	-	court	Ney	Printed Nam	ie	-	-
My commission exp	mo. DAY	/ 202 YR.	L J	-	Area Code		29 Da		phone Number	

### SCHEDULE I

PAGE 2 OF \_\_\_\_\_

### CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

lame of Filing Committee or Candidate	Reporting F	
		То
. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00	OR LESS PER CO	ALKIROTOK
TOTAL for the Report	ing Period (	1) \$ 400. %w
CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AM	ID PART B)	
Contributions Received from Political Committees (Part A)		\$ 500 00/
		\$ 500.000
All Other Contributions (Part B)		\$ 1,400. Jaw
TOTAL for the Report	ing Period (i	2) \$ 1,900.00/00
. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND P.	ART D)	
Contributions Received from Political Committees (Part C)		\$ 3,000. 9/2
All Other Contributions (Part D)		\$ 1,500.00
TOTAL for the Report	ing Period (	3) \$ 4,500.00/105
. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RET	URNED CHECKS, E	TC. (FROM PART E)
TOTAL for the Report	ing Period (	4) \$ 0.00
TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURI THIS REPORTING PERIOD (Add and enter amount totals fro Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Rep Cover Page, Item B.)	m	\$ 6,800.00/00

PAGE	OF	

Reporting Period

#### PART A

### CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate

DSEB-502 (7-99)

	From _		То
	DATE		AMOUNT
allentown Fire Fighters Daff Local 302 2	DAY	2019	\$ 250. co foot
Mailing Address  Alextown Fire Fighters Doff Local 302  Mailing Address  723 W. Chew St. Suite 302  City  Clientown  Allextown  PA 1810 2 -	18	20 / 9	\$ 250.00/00
allestown PH 18102 -	. DAY	YEAR	\$
Full Name of Contributing Committee	DAY	YEAR	\$
Mailing Address MO	DAY:	YEAR	\$
City State Zip Code (Plus 4) MO	DAY	YEAR	\$
Full Name of Contributing Committee	DAY	YEAR	\$
Mailing Address MO	DAY	YEAR	\$
City State Zip Code (Plus 4) MO	DAY	YEAR	\$
Full Name of Contributing Committee MO	DAY	YEAR	\$
Mailing Address MO	DAY	YEAR	\$
City State Zip Code (Plus 4) MO	DAY	YEAR	\$
Full Name of Contributing Committee MC	DAY-	YEAR	\$
Mailing Address Mc	DAY	YEAR	\$
City State Zip Code (Plus 4) MG	DAY	YEAR	\$
Full Name of Contributing Committee	DAY	YEAR	\$
Mailing Address	DAY	YEAR	\$
City State Zip Code (Plus 4) MC	DAY	YEAR	
Full Name of Contributing Committee	DAY	YEAR	\$
Mailing Address MG	D. DAY	YEAR	\$
City   State   Zip Code (Plus 4) MC	D. DAY	YEAR	\$
	DAY		\$
Full Name of Contributing Committee  Mailing Address		YEAR	\$
			\$
State Zip Code (Plus 4)	DAY	YEAR	\$
Enter Grand Total of Part A on Schedule I, Detailed Summary Pa	ge, Secti	on 2.	\$ 250. There

PAGE	OF	

Reporting Period

## ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

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

Name of Filing Committee or Candidate

DSEB-502 (7-99)

			From			То
			DATE			AMOUNT
Full Name of Contributor  Susan Ellis Wild  Mailing Address		мо.	DAY	YEAR	\$	250. %/00
Mailing Address		MO.	2 3 DAY	YEAR		10. 1100
1386 Doe Trail Rd. State					\$	
	Zip Code (Plus 4)  18[0 4 -	MO.	DAY	YEAR	\$	
Full Name of Contributor		MQ.	DAY	YEAR	\$	2 56 001 -
Raz Mond & Mary Both O'C. Mailing/Address	MAN	2 MO:	DAY	19 YEAR	4	250. Mov
2446 Chen St City State		mo.	DO!	TEAR	\$	stadt.
	Zip Code (Plus 4)	MO.	- DAY	YEAR	\$	
	18104 -4956	MG.	DAY	YEAR		
Denice & Edward Hozza  Mailing Address		2	20	19	\$ .	200. %/00
Mailing Address		MO.	DAY	YEAR	\$	7100
4347 Phillip St. City State	Zip Code (Plus 4)	MO	DAY	YEAR	_	
whitehall PA	18052 -	MUL	LANT	TEAR	\$	
Full Name of Contributor		MO.	DAY	YEAR	\$	100 02/
Rober & Roseman Kocher Mailing Address		MO.	15 DAY	20/1 YEAR	<b>—</b>	100.00/100
287 Blankein Dr		4	23	2019	\$	100. Too
	Zip Code (Plus 4) 18045 -	MO.	DAY	YEAR	\$	
Full Name of Contributor	18077	MO.	DAY	YEAR		
Lauren Golden Mailing Address		4	23	2019	\$	100. 00/NOV
Mailing Address		MO.	DAY	YEAR	\$	1100
6434 Mamorial RE.	Zip Code (Plus 4)	000	6.5	WELL	_	
	18106 - 2800	MO.	- DAY	YEAR	\$	
Full Name of Contributor		MO.	DAY	YEAR	¢	1000 OD/
Mailing Address T. Spany 2r.		4 MO.	2-3 DAY	2019 YEAR	*	100-00/100
435 Ridge Ove State		W.U.	DAT	TEAR	\$	
	Zip Code (Plus 4)	MO.	DAY	YEAR	4	
	18102 -		27.17	10000	\$	
Full Name of Contributor Lawrence T. Larner		₩0	23	2019	\$	100.0900
Mailing Address		MO.	BAY.	YEAR	•	700
2720 Livings Von St	Zip Code (Plus 4)			1100240	\$	
	18104 -	MO.	DAY	YEAR	\$	
Full Name of Contributor		MO.	DAY	YEAR	¢	100 /20/
Mailing Address Stephenic Tocher		4	2-3	2019	\$	100.00/00
3640 Wilmone St.		MO.	DAY	YEAR	\$	
Easton PA	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
2 4 3 1 0 N	18077 -	le ver	Sellenie —	No.	-	E TOTAL
Enter Grand Total of Bort B on Cahadula I	Detailed Comme		On = 47 =	- 0		v ====================================
Enter Grand Total of Part B on Schedule I,	Detailed Summary	Page,	Sectio	n 2.	\$	1, 300. 700

PAGE	OF
	0.

\$ 200. 700

Reporting Period

## ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

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

Name of Filing Committee or Candidate

DSEB-502 (7-99)

				From		То
				DATE		AMOUNT
Full Name of Contributor			MO.	19	YEAR-	\$ 200.00/00
Making Address			MO.	DAY	YEAR	\$
6 63 West Vurker 8	State	Zip Code (Plus 4)	100	DAY	VEAR	<b>3</b>
	PA	1862 -	MO;	DAY	YEAR	\$
Full Name of Contributor	and the same		MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
		7. 0. 4. 10				\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor	100		MO.	DAY	YEAR	
Mailing Address						\$
Marring Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MQ:	DAY -	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	- DAY	YEAR	4
		-		- 561	JEAN	\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			Mo.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	- DAY	YEAR	\$
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MO.	DAY :	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		=				\$
Full Name of Contributor			MO.	DAY	# YEAR	\$
Mailing Address			MO.	DAY	YEAR	•
City	B1 - 1 -	7' 8 1 181 1				\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor	100		MO.	DAY	YEAR	
Mailing Address						\$
morning Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	
		-	1			\$
						PAGE TOTAL

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

PAGE	OF	

Reporting Period

#### 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.

Friends			From		То
			DATE		AMOUNT
Full Name of Contributing Committee  Ful ends of Pater Schwager  Mailing Address		MO. 2	G	YEAR	\$ 500.00/ws
Po Box 4364		MO.	DAY	YEAR -	\$
City	Zip Code (Plus 4)	· MO.	DAY	YEAR	\$
		MO.	DAY	YEAR	
Full Name of Contributing Committee  PBEW Local union #375 PA  Mailing Address	<i>C</i>	5	2	19	\$ 1,000. 7100
1201 West Liberty St.		MO.	DAY	YEAR	\$
allutour PA 12	Plo2 -	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	All December 1	. MO	DAY	YEAR	\$ 500. 00
Mailing Address	2	MO.	DAY	YEAR-	\$
944 Nonth 1944 ST	Zip Code (Plus 4)	MO.	DAY:	YEAR	7
	8104 -	mo.	UA1	IEAN	\$
Full Name of Contributing Committee RPAC	-	Mo. 4	DAY	YEAR	\$ 1,000. Mar
Mailing Address		MO.	DAY	YEAR	
City South Commerce Way	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Bethlehen PA 18		MIC.	DAT	TEAN	\$
Full Name of Contributing Committee	-	.MO.	DAY	YEAR	\$
Mailing Address		MO.	DAY	YEAR	\$
City State State	Zip Code (Plus 4)	MO.	-DAY	YEAR	
	_				\$
Full Name of Contributing Committee		MO.	- DAY	YEAR	\$
Mailing Address		MO.	DAY	YEAR	\$
City State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contribution Constitution	-	MO.	DAY:	VEAR	Ф
Full Name of Contributing Committee		MU.	DAY	YEAR	\$
Malling Address		MO. <	DAY	YEAR	\$
City State	Zip Code (Plus 4)	Mo:	DAY	YEAR	\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address		MO.	DAY -	YEAR	\$
City   State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		MIC.	DAT	1500	\$
					PAGE TOTAL
Enter Grand Total of Part C on Schedule I, D	etailed Summary	Page,	Section	n 3.	\$ 3,000, 9/10

Name of Filing Committee or Candidate

## ALL OTHER CONTRIBUTIONS

PAGE	OF

OVER \$250.00

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

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

Name of Filing Committee or Candidate		R	eporting I	Period	
			From		То
		115 1153 V	DATE		AMOUNT
Full Name of Contributor		MO.	DAY	YEAR	\$ 500.00/00
Marat M. Guzal Mailing Address		4 MO.	Q DAY	YEAR	+ 900.00/100
Whitehall PA	O	3107	- MO1	1.400	\$
City State	Zip Code (Plus 4)	MO.	DAY	YEAR	
white hold PA	18052				\$
Employer Name		Occupation		Auc	
Natural Food Group  Employer Mailing Address/Principal Place of Business	4		SINCE	, 047	VOIT
1139 Lehigh avc. Suite 300	whitehall, Pa	1809	2		
		MO.	DAY	YEAR	\$ ~ 000
ANNIFOR L. Manne Mailing Address		3 MO.	DAY	19 YEAR	\$ 5.00. 700
2845 Parkway Blvd.		,,,,,,		· Crite	\$
City State	Zip Code (Plus 4)	MO.	DAY	YEAR	
allow town PA Employer Name	- 18104 -				\$
21 March Conselting		Occupati	WS .	4.7	
1L Mann Consulting Employer Mailing Address/Principal Place of Ausiness			NSV	an	
2845 Partiway Blud. a)	Mentown, Pa 11	2104			
m to At a fig. 1 of the state o		MO.	DAY	YEAR	\$ 500 80 5
Ed & Shahraz Hanna Mailing Address		4 MO.	23 DAY	( §	\$ 500. %
					\$
City	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name	1	Occupati	0.0		•
Employer Mailing Address/Principal Place of Business		Hea	d of	- V -	T
Employer Mailing Address/Principal Place of Business	0.	1100	0.	ٔ ساب	
1911 Spillmon Dr Bethleke	m. 14 18045				
Full Name of Contributor	•	MO.	DAY	YEAR	\$
Mailing Address		MO.	DAY	YEAR	
					\$
City	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name	1	Occupati	on		
Employer Mailing Address/Principal Place of Business					
		All San			
Full Name of Contributor		MO.	DAY	YEAR	\$
Mailing Address		MO.	DAY	YEAR	
					\$
City State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name		Occupati	on	L	
Employer Mailing Address/Principal Place of Business					
	with the terminal problem on the same	-S. PERMIN	-	- Market	
					PAGE TOTAL

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

DSEB-502 (7-99)

### SCHEDULE II

PAGE \_\_\_\_\_ OF \_\_\_\_

## IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

**Detailed Summary Page** 

Name of Filing Committee or Candidate	0 - 0	
or ming committee of canadate	Reporting Peri	ioa
	From	То
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF S	50.00 OR L	ESS PER CONTRIBUTOR
TOTAL for the Reporting Perio	d (1)	\$ 0.00 -
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$2	50.00 (FRON	PART F)
TOTAL for the Reporting Period	d (2)	\$ 0.00 -
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FRO	OM PART G	
TOTAL for the Reporting Period	d (3)	\$ 400. %
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, Report Cover Page, Item F.)		\$ 400. Jan

PAGE	OF

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Reporting	Period			
				From			То	
				DATE			AMOU	NT
Full Name of Contributor	-6		MO.		YEAR 19	\$	400.	000/
Meiling Address	C Nary	ya	MO.		YEAR	-	700.	100
CITY 10 BOX 4364	Ftata	Tie Code (Div. 4)				\$		
allestown	D A	10105 - 42/4	MO.	DAY	YEAR	\$		
Full Name of Contributor Friends of Pater Schwige  Mailing Address PO Box 4364  City  City  Charton  State Zip Code (Plus 4) PA 18105 - 4364  Employer of Contributor			Occup	ation				
Com Mon would be PA Employer Mailing Address/Principal Place of Business				STOTE	Rup			
Employer Mailing Address/Principal Place of Business				Description of Contribution  Fun dreiser food				
Full Name of Contributor	-			DAY:				
Mailing Address						\$		
morning Addition			MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	_		
Employer of Contributor		===	1			\$		
Employer of Contributor		25	Occup	ation				
Employer Mailing Address/Principal Place of Business			Descr	ption of Con	tribution			
	-			= W		W 102		
Full Name of Contributor			MO.	DAY:	YEAR	\$		
Mailing Address			MO.	DAY	YEAR	-		
City						\$		
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Employer of Contributor			Occup	ation	L			
Employer Mailing Address/Principal Place of Business								
Employer Walling Address/Friticipal Flace of Business			Descr	iption of Con	itribution			
Full Name of Contributor	-	Byllill Style - A. L A. L.	MTO.	DAY.	YEAR			
Mai Gna Address						\$		
Mailing Address			MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR			
Employer of Contributor		=:				\$		
Employer of contributor			Occup	ation				
Employer Mailing Address/Principal Place of Business			Descr	iption of Cor	ntribution	-		
Full Name of Contributor			MO.	DAY.	YEAR	\$		
Mailing Address			- Mo.	- DAY	YEAR	ļ.		
City		v				\$		
51.7	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Employer of Contributor			Occup	ation				
Employee Mailler Address C.								
Employer Mailing Address/Principal Place of Business			Descr	ption of Cor	tribution			
	1 2 3		-			In.	E TOTAL	- A-10-10-10-10-10-10-10-10-10-10-10-10-10-

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

\$ 400. Was

### SCHEDULE III

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
	From To
The same of the sa	
To Whom Paid	MO. DAY YEAR Amount
Mailing Address County Democratic Comm	2 14 2019 \$ 150. Only
Mailing Address	
P6 Box 63  City   State   Zip Code (Plus 4)	Voter File
State Lip Code (Flus 4)	
Stephanie Kochev Mailing Address	MO: DAY YEAR Amount \$ 4/3.9/
Mailing Address	Description of Expenditure
1507 West Turner St.	Reimbursements
City State Zip Code (Plus 4)	
allestown PA 18604 -	
To Whom Paid	MO. DAY YEAR Amount
Mailing Address	Description of Expenditure
1507 Wost Tunner St.	Review bessered 5
Lip code (i lus 4)	Kerne versenen - 3
alentour PA1864-	
To Whom Bold	MO. DAY YEAR Amount
Paul Ziwgne Malling Address	3 19 2019 \$ 144 09cm
Mailing Address	Description of Expenditure
308 5 74 ST City   State   Zip Code (Plus 4)	Campaign Shirts
west Easton 18042 -	
To Whom Baid	MO. DAY YEAR Amount
Meiling Address Valley Lubor Countil	4 3 14 \$ 250. Nov
Mailing Address	Description of Expenditure
PO Box 2022-6 City   State   Zin Code (Plue 4)	tickets + ad
Lohich Valley PA 18002 -	
Stephenie Kacher Mailing Address	MO. DAY YEAR Amount \$ 234-61/160
Mailing Address	Description of Expenditure
1507 West June of	Raimburgemetz
State Zip Code (Plus 4)	
allentown Crime Watch Presidity Coopeil	MO. DAY YEAR Amount
Mailing Address Crime Witch Presidity Coapie!	4 11 19 \$ 350. Why
1039 N Van Burer J.	Table + ad.
State Zip Code (Plus 4)	10900 7 000.
allow 18019 -	
To Whom Paid	MO: DAY YEAR Amount
Mailing Address	5 6 19 \$ 343.38low
5534 Bultimore ava	Description of Expenditure
City   State   Zip Code (Plus 4)	Palm Cards
Philadelphia Pu 19143 -	
	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page	ago Itam D
The state of the s	s 2,105,73

### SCHEDULE III

## STATEMENT OF EXPENDITURES

ame of Filing Committee or Candidate			- 1	Reporting Period				
				rom		То		
						Amount		
o Whom Paid	nations.		MO.	- DAY	YEAR	\$ 1,009.12/100		
Capital Promotions  Mailing Address P  249 N Keswick ave.  City  Glasside PA 19038 -			MO. DAY YEAR AMOUNT  5 6 19 \$ 1,009.12/loo  Description of Expenditure					
249 N Keswi	of ave.	Zip Code (Plus 4)	yord SigNs					
Glare: Le	PA	14038 -						
o Whom Paid	According to the second		MO.	DAY	RABY	Amount		
Tailing Address			Description	n of Expe	nditure	\$		
isting Abdress			1.000.00.000	500.0500				
City	State	Zip Code (Plus 4)						
o Whom Paid			MO.	DAY	YEAR	Amount		
o whom raid						\$		
failing Address			Description	on of Expe	enditure			
City	State	Zip Code (Plus 4)	1					
			1	version in the				
o Whom Paid			MO.	DAY	YEAR	Amount \$		
Mailing Address			Descripti	on of Exp	enditure			
	154440	Zip Code (Plus 4)						
City	State	Zip code (Fids 4)						
To Whom Paid			MO.	DAY-	YEAR	Amount		
Mailing Address			Descripti	on of Exp	enditure	\$		
Mailing Address								
City	State	Zip Code (Plus 4)	,					
To Whom Paid			MO.	DAY	YEAR	Amount		
						\$		
Mailing Address			Descript	ion of Exp	penaiture			
City	State	Zip Code (Plus 4)	T					
				7	Tween	Amount		
To Whom Paid			MO.	DAY	YEAR	\$		
Mailing Address			Descript	ion of Ex	penditure			
City	State	Zip Code (Plus 4)						
	3.000	100						
To Whom Paid		VA SHARNEY STA	мо.	DAY	YEAR	Amount		
Mailing Address			Descrip	tion of Ex	penditura	\$		
City	State	Zip Code (Plus 4)						
			-	The Control		PAGE TOTAL		
Enter Grand Total of Exper	nditures on Page 1	. Report Cover	Page. It	tem D.		1		
Enter Grand Total of Exper	Idirales All Lage I	, iteport outer	3-, .			\$ 1,009.12/100		