

**Campaign Finance Report**

346511

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

|   |                          |                   |                         |   |                      |           |                              |                                     |                                     |             |                                     |
|---|--------------------------|-------------------|-------------------------|---|----------------------|-----------|------------------------------|-------------------------------------|-------------------------------------|-------------|-------------------------------------|
| Filer Identification Number : 20190314  |                          | Report Filed By : | CANDIDATE               | COMMITTEE <input checked="" type="checkbox"/> | LOBBYIST             |           |                              |                                     |                                     |             |                                     |
| Name of Filing Committee, Candidate or Lobbyist: ALLEGHENY COUNTY JUSTICE FOR ALL |                          |                   |                         |   |                      |           |                              |                                     |                                     |             |                                     |
| Street Address: 5513 MARGARETTA STREET  |                          |                   |                         |   |                      |           |                              |                                     |                                     |             |                                     |
| City: PITTSBURGH  |                          |                   | State: PA               | Zip Code: 15206                               |                      |           |                              |                                     |                                     |             |                                     |
| TYPE OF REPORT<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                                 | <input checked="" type="checkbox"/> | No          | <input type="checkbox"/>            |
|   | 6TH TUESDAY PRE-ELECTION | 4.                | 2ND FRIDAY PRE-ELECTION | 5.  | 30 DAY POST-ELECTION | 6.        | TERMINATION REPORT?          | Yes                                 | <input type="checkbox"/>            | No          | <input checked="" type="checkbox"/> |
|   | ANNUAL REPORT            | 7. X              | Year 2019               | FILING METHOD<br>( ) CHECK ONE                |                      |           | PAPER                        | <input checked="" type="checkbox"/> | DISKETTE                            |             |                                     |
| Name of Office Sought by Candidate:   |                          |                   |                         | DATE OF ELECTION                              |                      |           | District Number              | Office Code                         | Party Code                          | County Code |                                     |
|   |                          |                   |                         | MO  | DAY                  | YEAR      |                              |                                     |                                     |             |                                     |
|   |                          |                   |                         | 11  | 5                    | 2019      | (SEE INSTRUCTIONS FOR CODES) |                                     |                                     |             |                                     |
| Summary of Receipts and Expenditures from:  |                          | MO                | DAY                     | YEAR  | TO                   | MO        | DAY                          | YEAR                                | FOR OFFICE USE ONLY                 |             |                                     |
|   |                          | 11                | 26                      | 2019  | TO                   | 12        | 31                           | 2019                                |                                     |             |                                     |
| A. Amount Brought Forward From Last Report  |                          |                   |                         | \$  |                      | 0.00      |                              |                                     |                                     |             |                                     |
| B. Total Monetary Contributions And Receipts (From Schedule I)                    |                          |                   |                         | \$  |                      | 50,000.00 |                              |                                     |                                     |             |                                     |
| C. Total Funds Available (Sum Of Lines A and B)                                   |                          |                   |                         | \$  |                      | 50,000.00 |                              |                                     |                                     |             |                                     |
| D. Total Expenditures (From Schedule III)   |                          |                   |                         | \$  |                      | 42,628.31 |                              |                                     |                                     |             |                                     |
| E. Ending Cash Balance (Subtract Line D From Line C)                              |                          |                   |                         | \$  |                      | 7,371.69  |                              |                                     |                                     |             |                                     |
| F. Value Of In-Kind Contributions Received (From Schedule II)                     |                          |                   |                         | \$  |                      | 0.00      |                              |                                     |                                     |             |                                     |
| G. Unpaid Debts And Obligations (From Schedule IV)                                |                          |                   |                         | \$  |                      | 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

My Commission Expires \_\_\_\_\_

MO DAY YR

\_\_\_\_\_  
Signature of Person Submitting Report

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
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

My Commission Expires \_\_\_\_\_

MO DAY YR

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
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>                       |
| ALLEGHENY COUNTY JUSTICE FOR ALL             | From: <u>11/26/2019</u> To: <u>12/31/2019</u> |

|  |         |
|--|---------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |         |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 0.00 |

|  |         |
|--|---------|
| <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>                 | \$ 0.00 |
| <b>All Other Contributions (Part B)</b>  | \$ 0.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 0.00 |

|   |              |
|---|--------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |              |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 0.00      |
| <b>All Other Contributions (Part D)</b>                                 | \$ 50,000.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 50,000.00 |

|  |         |
|--|---------|
| <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> | \$ 50,000.00 |
|---|--------------|

**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>                 | <b>Reporting Period</b>                                    |
|  | <b>From:</b> <span style="float: right;"><b>To:</b></span> |
| <b>DATE</b> <span style="float: right;"><b>AMOUNT</b></span> |  |

| Full Name of Contributing Committee | MO           | DAY                      | YEAR |         |
|-------------------------------------|--------------|--------------------------|------|---------|
| <b>Mailing Address</b>              |              |                          |      | \$ 0.00 |
| <b>City</b>                         | <b>State</b> | <b>Zip Code (Plus 4)</b> |      |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |

**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> | <b>Reporting Period</b>             |
|  | <b>From:</b> _____ <b>To:</b> _____ |

|                                 |              |                          | DATE | AMOUNT  |
|---------------------------------|--------------|--------------------------|------|---------|
| <b>Full Name of Contributor</b> |              |                          |      | \$ 0.00 |
| <b>Mailing Address</b>          | MO           | DAY                      | YEAR |         |
| <b>City</b>                     | <b>State</b> | <b>Zip Code (Plus 4)</b> |      |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |

**PART C**  
**Contributions Received From Political Committees**  
**OVER \$250.00**

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

|                                       |  |
|---------------------------------------|--|
| Name of Filing Committee or Candidate | Reporting Period                                   |
|                                       | From: <span style="margin-left: 100px;">To:</span> |

|                                     | DATE  |                   |      | AMOUNT  |
|-------------------------------------|-------|-------------------|------|---------|
| Full Name of Contributing Committee | MO    | DAY               | YEAR |         |
| Mailing Address                     |       |                   |      | \$ 0.00 |
| City                                | State | Zip Code (Plus 4) |      |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |

**PART D**  
**ALL OTHER CONTRIBUTIONS**  
**OVER \$250.00**

**Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C.)**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b><br><br>ALLEGHENY COUNTY JUSTICE FOR ALL | <b>Reporting Period</b><br><br>From: <u>11/26/2019</u> To: <u>12/31/2019</u> |
|--|--|

|  |                   |              |                          | DATE | AMOUNT    |
|--|-------------------|--------------|--------------------------|------|-----------|
| Full Name of Contributor   | MO                | DAY          | YEAR                     |      |           |
| ALL HANDS ON DECK NETWORK A/K/A MOVEMENT VOTER PROJECT                 |                   |              |                          |      |           |
| <b>Mailing Address</b> P.O. BOX 749                                    | 10                | 25           | 2019                     | \$   | 50,000.00 |
| <b>City</b> NORTHAMPTON <b>State</b> MA <b>Zip Code (Plus 4)</b> 01061 |                   |              |                          |      |           |
| <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> |      |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 50,000.00      |

**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.**

|  |                         |            |  |
|--|-------------------------|------------|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b> |            |  |
|  | <b>From:</b>            | <b>To:</b> |  |

|                     |       |                   | 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><br><br>ALLEGHENY COUNTY JUSTICE FOR ALL  | <b>Reporting Period</b><br><br>From: <u>11/26/2019</u> To: <u>12/31/2019</u> |
| <b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>  |  |
| <b>TOTAL for the Reporting Period (1)</b>   | \$ 0.00  |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>   |  |
| <b>TOTAL for the Reporting Period (2)</b>   | \$ 0.00  |
| <b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>   |  |
| <b>TOTAL for the Reporting Period (3)</b>   | \$ 0.00  |
| <b>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.)</b> | \$ 0.00  |



**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OF \$50.01 TO \$250.00**

|  |                                     |
|--|-------------------------------------|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>             |
|  | <b>From:</b> _____ <b>To:</b> _____ |

|  |              |                          | DATE | AMOUNT                       |
|--|--------------|--------------------------|------|------------------------------|
| Full Name of Contributor   | MO           | DAY                      | YEAR |                              |
| <b>Mailing Address</b>   |              |                          |      | \$ 0.00                      |
| <b>City</b>  | <b>State</b> | <b>Zip Code (Plus 4)</b> |      |                              |
| <b>Description of Contribution:</b>  |              |                          |      |                              |
| <b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b> |              |                          |      | <b>PAGE TOTAL</b><br>\$ 0.00 |

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

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b><br><br>From: _____ To: _____ |
|--|--|

|  |              |                         |                         | DATE                               | AMOUNT                    |
|--|--------------|-------------------------|-------------------------|------------------------------------|---------------------------|
| Full Name of Contributor   | MO           | DAY                     | YEAR                    |                                    |                           |
| <b>Mailing Address</b>   |              |                         |                         | \$                                 | 0.00                      |
| <b>City</b>  | <b>State</b> | <b>Zip Code(Plus 4)</b> |                         |                                    |                           |
| <b>Employer of Contributor</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>Description of Contribution</b> |                           |
| <b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b> |              |                         |                         |                                    | <b>PAGE TOTAL</b><br>0.00 |

## SCHEDULE III STATEMENT OF EXPENDITURES

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                      |
| ALLEGHENY COUNTY JUSTICE FOR ALL             | From <u>11/26/2019</u> To: <u>12/31/2019</u> |

|   |                 |                                | DATE | AMOUNT   |
|---|-----------------|--------------------------------|------|--|
| To Whom Paid                                      | MO              | DAY                            | YEAR |  |
| SCOTTIE PUBLIC AFFAIRS LLC                        | 10              | 29                             | 2019 | \$ 35,580.81   |
| <b>Mailing Address</b> 220 GRANT ST STE 600       |                 |                                |      |  |
| <b>City</b> PITTSBURGH                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 15219 |      | <b>Description of Expenditure</b><br>COMMUNICATIONS CONSULTING |
| <b>To Whom Paid</b><br>SEQUAL CONSULTING          | 10              | 31                             | 2019 | \$ 5,000.00  |
| <b>Mailing Address</b> 5821 BRYANT ST             |                 |                                |      |  |
| <b>City</b> PITTSBURGH                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 15206 |      | <b>Description of Expenditure</b><br>COMMUNICATIONS CONSULTING |
| <b>To Whom Paid</b><br>SCOTTIE PUBLIC AFFAIRS LLC | 11              | 21                             | 2019 | \$ 800.00  |
| <b>Mailing Address</b> 220 GRANT ST STE 600       |                 |                                |      |  |
| <b>City</b> PITTSBURGH                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 15219 |      | <b>Description of Expenditure</b><br>COMMUNICATIONS CONSULTING |
| <b>To Whom Paid</b><br>SEQUAL CONSULTING          | 11              | 21                             | 2019 | \$ 935.00  |
| <b>Mailing Address</b> 5821 BRYANT ST             |                 |                                |      |  |
| <b>City</b> PITTSBURGH                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 15206 |      | <b>Description of Expenditure</b><br>COMMUNICATIONS CONSULTING |
| <b>To Whom Paid</b><br>HEALEY BLOCK LLC           | 11              | 21                             | 2019 | \$ 300.00  |
| <b>Mailing Address</b> 247 FT. PITT BLVD.         |                 |                                |      |  |
| <b>City</b> PITTSBURGH                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 15222 |      | <b>Description of Expenditure</b>                              |

|  |                    |                                   |   |            |             |                                   |
|--|--------------------|-----------------------------------|---|------------|-------------|-----------------------------------|
| <b>To Whom Paid</b><br>PNC PAC   |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> |                                   |
| <b>Mailing Address</b> The Tower at PNC Plaza 300 Fifth Avenue                 |                    |                                   | 12  | 2          | 2019        | \$ 12.50                          |
| <b>City</b> Pittsburgh   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>15222 | <b>Description of Expenditure</b><br>Bank Fee |            |             |                                   |
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |                    |                                   |   |            |             | <b>PAGE TOTAL</b><br>\$ 42,628.31 |



**Campaign Finance Report**

346512

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

|   |                          |  |                         |   |                      |   |                              |             |                     |                                     |
|---|--------------------------|--|-------------------------|---|----------------------|---|------------------------------|-------------|---------------------|-------------------------------------|
| Filer Identification Number : 20190314  |                          | Report Filed By :                      | CANDIDATE               | COMMITTEE <input checked="" type="checkbox"/> | LOBBYIST             |   |                              |             |                     |                                     |
| Name of Filing Committee, Candidate or Lobbyist: ALLEGHENY COUNTY JUSTICE FOR ALL |                          |  |                         |   |                      |   |                              |             |                     |                                     |
| Street Address: 5513 MARGARETTA STREET  |                          |  |                         |   |                      |   |                              |             |                     |                                     |
| City: PITTSBURGH  |                          |  | State: PA               | Zip Code: 15206                               |                      |   |                              |             |                     |                                     |
| TYPE OF REPORT<br><br>(place X to the right of report type)                       | 6TH TUESDAY PRE-PRIMARY  | 1. <input checked="" type="checkbox"/> | 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.                                     | Year 2021               | FILING METHOD<br>( ) CHECK ONE                |                      | PAPER <input checked="" type="checkbox"/> |                              | DISKETTE    |                     |                                     |
| Name of Office Sought by Candidate:   |                          |  |                         | DATE OF ELECTION                              |                      |   | District Number              | Office Code | Party Code          | County Code                         |
|   |                          |  |                         | MO  | DAY                  | YEAR                                      |                              |             |                     |                                     |
|   |                          |  |                         | 11  | 2                    | 2021                                      | (SEE INSTRUCTIONS FOR CODES) |             |                     |                                     |
| Summary of Receipts and Expenditures from:  |                          | MO                                     | DAY                     | YEAR  | TO                   | MO  | DAY                          | YEAR        | FOR OFFICE USE ONLY |                                     |
|   |                          | 1                                      | 1                       | 2021  | TO                   | 3   | 29                           | 2021        |                     |                                     |
| A. Amount Brought Forward From Last Report  |                          |  |                         | \$  |                      | 7,371.69                                  |                              |             |                     |                                     |
| B. Total Monetary Contributions And Receipts (From Schedule I)                    |                          |  |                         | \$  |                      | 150,000.00                                |                              |             |                     |                                     |
| C. Total Funds Available (Sum Of Lines A and B)                                   |                          |  |                         | \$  |                      | 157,371.69                                |                              |             |                     |                                     |
| D. Total Expenditures (From Schedule III)   |                          |  |                         | \$  |                      | 18,000.00                                 |                              |             |                     |                                     |
| E. Ending Cash Balance (Subtract Line D From Line C)                              |                          |  |                         | \$  |                      | 139,371.69                                |                              |             |                     |                                     |
| F. Value Of In-Kind Contributions Received (From Schedule II)                     |                          |  |                         | \$  |                      | 33,389.28                                 |                              |             |                     |                                     |
| G. Unpaid Debts And Obligations (From Schedule IV)                                |                          |  |                         | \$  |                      | 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

My Commission Expires \_\_\_\_\_

MO DAY YR

\_\_\_\_\_  
Signature of Person Submitting Report

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
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

My Commission Expires \_\_\_\_\_

MO DAY YR

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
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>                    |
| ALLEGHENY COUNTY JUSTICE FOR ALL             | From: <u>1/1/2021</u> To: <u>3/29/2021</u> |

|  |         |
|--|---------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |         |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 0.00 |

|  |         |
|--|---------|
| <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>                 | \$ 0.00 |
| <b>All Other Contributions (Part B)</b>  | \$ 0.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 0.00 |

|   |               |
|---|---------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |               |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 150,000.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 0.00       |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 150,000.00 |

|  |         |
|--|---------|
| <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> | \$ 150,000.00 |
|---|---------------|

**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>                 | <b>Reporting Period</b>                                    |
|  | <b>From:</b> <span style="float: right;"><b>To:</b></span> |
| <b>DATE</b> <span style="float: right;"><b>AMOUNT</b></span> |  |

| Full Name of Contributing Committee | MO           | DAY                      | YEAR |         |
|-------------------------------------|--------------|--------------------------|------|---------|
| <b>Mailing Address</b>              |              |                          |      | \$ 0.00 |
| <b>City</b>                         | <b>State</b> | <b>Zip Code (Plus 4)</b> |      |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |



**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> | <b>Reporting Period</b>             |
|  | <b>From:</b> _____ <b>To:</b> _____ |

|                                 |              |                          |             | DATE | AMOUNT |         |
|---------------------------------|--------------|--------------------------|-------------|------|--------|---------|
| <b>Full Name of Contributor</b> |              |                          |             |      |        |         |
| <b>Mailing Address</b>          | <b>MO</b>    | <b>DAY</b>               | <b>YEAR</b> |      |        | \$ 0.00 |
| <b>City</b>                     | <b>State</b> | <b>Zip Code (Plus 4)</b> |             |      |        |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |

**PART C**  
**Contributions Received From Political Committees**  
**OVER \$250.00**

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

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br>ALLEGHENY COUNTY JUSTICE FOR ALL | <b>Reporting Period</b><br>From: <u>1/1/2021</u> To: <u>3/29/2021</u> |
|--|---|

|                                     |                                |             | DATE | AMOUNT |      |               |
|-------------------------------------|--------------------------------|-------------|------|--------|------|---------------|
| Full Name of Contributing Committee | Mailing Address                | City        | MO   | DAY    | YEAR |               |
| LOCAL 66 PAC CLUB                   | 111 Zeta Drive                 | Monroeville | 3    | 8      | 2021 | \$ 100,000.00 |
| <b>State</b> PA                     | <b>Zip Code (Plus 4)</b> 15146 |             |      |        |      |               |
| SEIU Healthcare PA COPE             | 1500 N 2nd St STE 12           | Harrisburg  | 3    | 9      | 2021 | \$ 50,000.00  |
| <b>State</b> PA                     | <b>Zip Code (Plus 4)</b> 17102 |             |      |        |      |               |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 150,000.00     |

**PART D**  
**ALL OTHER CONTRIBUTIONS**  
**OVER \$250.00**

**Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C.)**

|  |                                     |
|--|-------------------------------------|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>             |
|  | <b>From:</b> _____ <b>To:</b> _____ |

|   | DATE              |                          |                          | AMOUNT  |
|---|-------------------|--------------------------|--------------------------|---------|
| Full Name of Contributor                                    | MO                | DAY                      | YEAR                     |         |
| <b>Mailing Address</b>                                      |                   |                          |                          | \$ 0.00 |
| <b>City</b>   | <b>State</b>      | <b>Zip Code (Plus 4)</b> |                          |         |
| <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> |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |

**PART E**  
**OTHER RECEIPTS**

**REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.**

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

|  |                         |            |  |
|--|-------------------------|------------|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b> |            |  |
|  | <b>From:</b>            | <b>To:</b> |  |

| <b>Full Name</b>           | <b>DATE</b>  |                          |             | <b>AMOUNT</b> |
|----------------------------|--------------|--------------------------|-------------|---------------|
|                            | <b>MO</b>    | <b>DAY</b>               | <b>YEAR</b> |               |
| <b>Mailing Address</b>     |              |                          |             | \$ 0.00       |
| <b>City</b>                | <b>State</b> | <b>Zip Code (Plus 4)</b> |             |               |
| <b>Receipt Description</b> |              |                          |             |               |

**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><br><br>ALLEGHENY COUNTY JUSTICE FOR ALL  | <b>Reporting Period</b><br><br>From: <u>1/1/2021</u> To: <u>3/29/2021</u> |
| <b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>  |   |
| <b>TOTAL for the Reporting Period (1)</b>   | \$ 0.00   |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>   |   |
| <b>TOTAL for the Reporting Period (2)</b>   | \$ 0.00   |
| <b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>   |   |
| <b>TOTAL for the Reporting Period (3)</b>   | \$ 33,389.28  |
| <b>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.)</b> | \$ 33,389.28  |

**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OF \$50.01 TO \$250.00**

|  |                                     |
|--|-------------------------------------|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>             |
|  | <b>From:</b> _____ <b>To:</b> _____ |

|  |              |                          | DATE | AMOUNT                       |
|--|--------------|--------------------------|------|------------------------------|
| Full Name of Contributor   | MO           | DAY                      | YEAR |                              |
| <b>Mailing Address</b>   |              |                          |      | \$ 0.00                      |
| <b>City</b>  | <b>State</b> | <b>Zip Code (Plus 4)</b> |      |                              |
| <b>Description of Contribution:</b>  |              |                          |      |                              |
| <b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b> |              |                          |      | <b>PAGE TOTAL</b><br>\$ 0.00 |

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

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br>ALLEGHENY COUNTY JUSTICE FOR ALL | <b>Reporting Period</b><br>From: <u>1/1/2021</u> To: <u>3/29/2021</u> |
|--|---|

|  |                 |                               |                 | DATE                          | AMOUNT  |      |             |
|--|-----------------|-------------------------------|-----------------|-------------------------------|---|------|-------------|
| Full Name of Contributor   | MO              | DAY                           | YEAR            |                               |   |      |             |
| SEIU Healthcare PA COPE  |                 |                               |                 |                               |   |      |             |
| <b>Mailing Address</b> 1500 N 2nd St STE 12  |                 |                               |                 | 3                             | 29  | 2021 | \$ 1,106.00 |
| <b>City</b> Harrisburg   | <b>State</b> PA | <b>Zip Code(Plus 4)</b> 17102 |                 |                               |   |      |             |
| <b>Employer of Contributor</b> NA  |                 |                               |                 | <b>Occupation</b> NA          |   |      |             |
| <b>Employer Mailing Address/Principal Place of Business</b><br>SEIU Healthcare PA COPE |                 | <b>City</b> Harrisburg        | <b>State</b> PA | <b>Zip Code(Plus 4)</b> 17102 | <b>Description of Contribution</b><br>Labor Donated |      |             |

| Full Name of Contributor   | MO              | DAY                           | YEAR            |                               |   |      |             |
|--|-----------------|-------------------------------|-----------------|-------------------------------|---|------|-------------|
| SEIU Healthcare PA COPE  |                 |                               |                 |                               |   |      |             |
| <b>Mailing Address</b> 1500 N 2nd St STE 12  |                 |                               |                 | 3                             | 29  | 2021 | \$ 1,043.80 |
| <b>City</b> Harrisburg   | <b>State</b> PA | <b>Zip Code(Plus 4)</b> 17102 |                 |                               |   |      |             |
| <b>Employer of Contributor</b> NA  |                 |                               |                 | <b>Occupation</b> NA          |   |      |             |
| <b>Employer Mailing Address/Principal Place of Business</b><br>SEIU Healthcare PA COPE |                 | <b>City</b> Harrisburg        | <b>State</b> PA | <b>Zip Code(Plus 4)</b> 17102 | <b>Description of Contribution</b><br>Labor Donated |      |             |

| Full Name of Contributor   | MO              | DAY                           | YEAR            |                               |   |      |           |
|--|-----------------|-------------------------------|-----------------|-------------------------------|---|------|-----------|
| SEIU Healthcare PA COPE  |                 |                               |                 |                               |   |      |           |
| <b>Mailing Address</b> 1500 N 2nd St STE 12  |                 |                               |                 | 3                             | 29  | 2021 | \$ 243.80 |
| <b>City</b> Harrisburg   | <b>State</b> PA | <b>Zip Code(Plus 4)</b> 17102 |                 |                               |   |      |           |
| <b>Employer of Contributor</b> NA  |                 |                               |                 | <b>Occupation</b> NA          |   |      |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>SEIU Healthcare PA COPE |                 | <b>City</b> Harrisburg        | <b>State</b> PA | <b>Zip Code(Plus 4)</b> 17102 | <b>Description of Contribution</b><br>Labor Donated |      |           |

|   |                    |                                  |                           |                      |                                  |   |           |
|---|--------------------|----------------------------------|---------------------------|----------------------|----------------------------------|---|-----------|
| <b>Full Name of Contributor</b><br>One Pennsylvania                               |                    |                                  |                           | <b>MO</b>            | <b>DAY</b>                       | <b>YEAR</b>   | \$ 902.75 |
| <b>Mailing Address</b> 1515 Brighton Road   |                    |                                  |                           | 3                    | 29                               | 2021  |           |
| <b>City</b> Pittsburgh  | <b>State</b><br>PA | <b>Zip Code(Plus 4)</b><br>15212 |                           |                      |                                  |   |           |
| <b>Employer of Contributor</b> NA   |                    |                                  |                           | <b>Occupation</b> NA |                                  |   |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1515 Brighton Road |                    |                                  | <b>City</b><br>Pittsburgh | <b>State</b><br>PA   | <b>Zip Code(Plus 4)</b><br>15212 | <b>Description of Contribution</b><br>Labor Donated |           |

  

|   |                    |                                  |                           |                      |                                  |  |              |
|---|--------------------|----------------------------------|---------------------------|----------------------|----------------------------------|--|--------------|
| <b>Full Name of Contributor</b><br>One Pennsylvania                               |                    |                                  |                           | <b>MO</b>            | <b>DAY</b>                       | <b>YEAR</b>  | \$ 29,652.93 |
| <b>Mailing Address</b> 1515 Brighton Road   |                    |                                  |                           | 3                    | 29                               | 2021   |              |
| <b>City</b> Pittsburgh  | <b>State</b><br>PA | <b>Zip Code(Plus 4)</b><br>15212 |                           |                      |                                  |  |              |
| <b>Employer of Contributor</b> NA   |                    |                                  |                           | <b>Occupation</b> NA |                                  |  |              |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1515 Brighton Road |                    |                                  | <b>City</b><br>Pittsburgh | <b>State</b><br>PA   | <b>Zip Code(Plus 4)</b><br>15212 | <b>Description of Contribution</b><br>Phone Banking and Canvassing |              |

  

|  |                    |                                  |                                    |                      |                                  |   |           |
|--|--------------------|----------------------------------|------------------------------------|----------------------|----------------------------------|---|-----------|
| <b>Full Name of Contributor</b><br>Center for Popular Democracy Action             |                    |                                  |                                    | <b>MO</b>            | <b>DAY</b>                       | <b>YEAR</b>   | \$ 440.00 |
| <b>Mailing Address</b> 449 Troutman Street   |                    |                                  |                                    | 3                    | 29                               | 2021  |           |
| <b>City</b> Brooklyn   | <b>State</b><br>NY | <b>Zip Code(Plus 4)</b><br>11237 |                                    |                      |                                  |   |           |
| <b>Employer of Contributor</b> NA  |                    |                                  |                                    | <b>Occupation</b> NA |                                  |   |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>449 Troutman Street |                    |                                  | <b>City</b><br>449 Troutman Street | <b>State</b><br>NY   | <b>Zip Code(Plus 4)</b><br>11237 | <b>Description of Contribution</b><br>Labor Donated |           |

  

|  |  |  |  |  |  |                                |
|--|--|--|--|--|--|--------------------------------|
| <b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b> |  |  |  |  |  | <b>PAGE TOTAL</b><br>33,389.28 |
|--|--|--|--|--|--|--------------------------------|



## SCHEDULE III STATEMENT OF EXPENDITURES

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b><br>ALLEGHENY COUNTY JUSTICE FOR ALL | <b>Reporting Period</b><br>From <u>1/1/2021</u> To: <u>3/29/2021</u> |
|--|--|

|  |                    |                                   | DATE | AMOUNT   |
|--|--------------------|-----------------------------------|------|--|
| To Whom Paid   | MO                 | DAY                               | YEAR |  |
| New Heights Communications LLC   |                    |                                   |      |  |
| <b>Mailing Address</b> 6632 32nd Street NW                                     | 3                  | 11                                | 2021 | \$ 6,000.00  |
| <b>City</b> Washington   | <b>State</b><br>DC | <b>Zip Code (Plus 4)</b><br>20015 |      | <b>Description of Expenditure</b><br>Consulting Retainer |
| New Heights Communications LLC   |                    |                                   |      |  |
| <b>Mailing Address</b> 6632 32nd Street NW                                     | 3                  | 22                                | 2021 | \$ 12,000.00   |
| <b>City</b> Washington   | <b>State</b><br>DC | <b>Zip Code (Plus 4)</b><br>20015 |      | <b>Description of Expenditure</b><br>Consulting Retainer |
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |                    |                                   |      | <b>PAGE TOTAL</b><br>\$ 18,000.00                        |

