

Commonwealth of Pennsylvania - Campaign Finance Report

(NOTE: This report must be clear and legible. It should be typed)

Filer Identification Number	00	Report Filed By:	Candidate <input type="checkbox"/>	Committee <input checked="" type="checkbox"/>	Lobbyist <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist			Friends of Deb Gross		
Street Address			5800 Wayne Road		
City	Pittsburgh	State	PA	Zip Code	15206

TYPE OF REPORT (Place x under report type)

1-6th Tuesday Pre-Primary	2-2nd Friday Pre-Primary	3-30 Day Post Primary	4-6th Tuesday Pre-Election	5-2nd Friday Pre-Election	6-30 Day Post Election	7 - Annual	Special 2nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DATE OF ELECTION (MM/DD/YYYY)		11/05/2019	YEAR	2019	AMENDMENT REPORT?	<input type="checkbox"/>	TERMINATION REPORT?	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	09/01/2019	09/30/2019	
A. Amount Brought Forward From Last Report		\$3,301.48	
B. Total Monetary Contributions and Receipts (From Schedule I)		\$2,020.00	
C. Total Funds Available (Sum of Lines A and B)		\$5,321.48	
D. Total Expenditures (From Schedule III)		\$153.28	
E. Ending Cash Balance (Subtract Line D from Line C)		\$5,168.20	
F. Value of In-Kind Contributions Received (From Schedule II)		\$0.00	
G. Unpaid Debts and Obligations (From Schedule IV)		\$0.00	

RECEIVED

OCT 01 2019

ETHICS HEARING BOARD

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, on computer diskette, are to the best of my knowledge and belief true, correct, and complete.

Sworn to and subscribed before me this 1 day of October, 2019

Signature
 Lisa J. Mekovsky, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Nov 20, 2020

Signature of Person Submitting Report
 Shelly Danko Day
 Printed Name
 (412) 478-7435
 Area Code Daytime Telephone Number

My commission expires 11 20 20
 MO. DAY YR.

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 the 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 1 day of October, 2019

Signature
 Lisa J. Mekovsky, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Nov 20, 2020

Signature of Person Submitting Report
 Deborah L. Gross
 Printed Name
 Area Code Daytime Telephone Number

My commission expires 11 20 20
 MO. DAY YR.

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Lisa J. Mekovsky, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Nov 20, 2020
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Schedule I
Contributions and Receipts
 Detailed Summary Page

Page 1 of 1

Name of Filing Committee or Candidate Friends of Deb Gross	Reporting Period From <u> 9/1/2019 </u> to <u> 9/30/2019 </u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period	(1) \$20.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND B)		
Contributions Received from Political Committees (Part A)		\$0.00
All Other Contributions (Part B)		\$0.00
	TOTAL for the Reporting Period	(2) \$0.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND D)		
Contributions Received from Political Committees (Part C)		\$1,000.00
All Other Contributions (Part D)		\$1,000.00
	TOTAL for the Reporting Period	(3) \$2,000.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period	(4) \$0.00

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.)	\$2,020.00
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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.

Name of Filing Committee or Candidate Friends of Deb Gross	Reporting Period From 9/1/2019 To 9/30/2019
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Fraternal Association of Professional Paramedics PAC	9	11	2019	\$1,000.00
Mailing Address PO Box 8454				
City Pittsburgh	State PA	Zip Code (Plus 4) 15220-0454		

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

PAGE TOTAL \$1,000.00

**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.)

Name of Filing Committee or Candidate Friends of Deb Gross	Reporting Period From <u>9/1/2019</u> To <u>9/30/2019</u>
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			DATE	AMOUNT
Full Name of Contributor	MO.	DAY	YEAR	
Ms. Melissa McSwigan	9	12	2019	\$1,000.00
Mailing Address 4131 Bigelow Blvd.				
City Pittsburgh	State PA	Zip Code (Plus 4) 15213		
Employer Name Self Employed			Occupation Non-Profit Management	
Employer Mailing Address/Principal Place of Business 4131 Bigelow Blvd. Pittsburgh PA 15213				

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

PAGE TOTAL	\$1,000.00
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SCHEDULE II

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

Detailed Summary Page

Name of Filing Committee or Candidate Friends of Deb Gross	Reporting Period From 9/1/2019 To 9/30/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$0.00
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$0.00
3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1. Report Cover Page, Item F.)	\$0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Deb Gross			Reporting Period From <u>9/1/2019</u> To <u>9/30/2019</u>			
To Whom Paid NationBuilder			MO.	DAY	YEAR	Amount
			9	13	2019	\$143.00
Mailing Address 520 S Grand Ave, 2nd floor			Description of Expenditure software			
City Los Angeles	State CA	Zip Code (Plus 4) 90071				
To Whom Paid Vantiv eCommerce			MO.	DAY	YEAR	Amount
			9	10	2019	\$1.33
Mailing Address 900 Chelmsford St			Description of Expenditure fee			
City Lowell	State MA	Zip Code (Plus 4) 01852				
To Whom Paid GMass.com			MO.	DAY	YEAR	Amount
			9	5	2019	\$8.95
Mailing Address online			Description of Expenditure software			
City	State	Zip Code (Plus 4)				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.
DSEB-502 (7-99)

PAGE TOTAL \$153.28
