

# Commonwealth of Pennsylvania Campaign Finance Report

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

|  |                                   |                     |                           |                    |                      |    |                     |     |    |          |
|--|-----------------------------------|---------------------|---------------------------|--------------------|----------------------|----|---------------------|-----|----|----------|
| Filer Identification Number: <b>8000245</b>  | Report Filed By: <b>CANDIDATE</b> | 1. <b>COMMITTEE</b> | 2. <b>X</b>               | 3. <b>LOBBYIST</b> |                      |    |                     |     |    |          |
| Name of Filing Committee, Candidate or Lobbyist:<br><b>CASA- COMMONWEALTH ASSOCIATION OF SCHOOL ADMINISTRATORS</b> |                                   |                     |                           |                    |                      |    |                     |     |    |          |
| Street Address:<br><b>855 N BROAD STREET</b>   |                                   |                     |                           |                    |                      |    |                     |     |    |          |
| City:<br><b>PHILADELPHIA</b>   |                                   | State:<br><b>PA</b> | Zip Code:<br><b>19123</b> |                    |                      |    |                     |     |    |          |
| TYPE OF REPORT   | 6th Tuesday Pre-Primary           | 1. <b>X</b>         | 2nd Friday Pre-Primary    | 2.                 | 30 Day Post-Primary  | 3. | Amendment Report?   | YES | NO | <b>X</b> |
|  | 6th Tuesday Pre-Election          | 4.                  | 2nd Friday Pre-Election   | 5.                 | 30 Day Post-Election | 6. | Termination Report? | YES | NO | <b>X</b> |
|  | Annual Report                     | 7.                  | YEAR <b>2018</b>          |                    |                      |    |                     |     |    |          |

|                                     |   |                  |              |             |              |
|-------------------------------------|---|------------------|--------------|-------------|--------------|
| Name of Office Sought by Candidate: | DATE OF ELECTION<br>MO: DAY: YEAR<br><b>5 15 2018</b> | District Number: | Office Code: | Party Code: | County Code: |
|-------------------------------------|---|------------------|--------------|-------------|--------------|

|  |                                  |    |                                   |   |
|--|----------------------------------|----|-----------------------------------|---|
| Summary of Receipts and Expenditures from:                     | MO: DAY: YEAR<br><b>1 1 2018</b> | To | MO: DAY: YEAR<br><b>3 26 2018</b> | <b>FOR OFFICE USE ONLY</b>                                  |
| A. Amount Brought Forward From Last Report                     | \$ 7,480.00                      |    |                                   | 2018 APR 14 A<br>CITY COMMISSIONER<br>ROOM 138<br>CITY HALL |
| B. Total Monetary Contributions and Receipts (From Schedule I) | \$ 941.50                        |    |                                   |   |
| C. Total Funds Available (Sum of Lines A and B)                | \$ 8,421.50                      |    |                                   |   |
| D. Total Expenditures (From Schedule III)                      | \$ 6.00                          |    |                                   |   |
| E. Ending Cash Balance (Subtract Line D from Line C)           | \$ 8,415.50                      |    |                                   |   |
| F. Value of In-Kind Contributions Received (From Schedule II)  | \$ 0                             |    |                                   |   |
| G. Unpaid Debts and Obligations (From Schedule IV)             | \$ 0                             |    |                                   |   |

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

Sworn to and subscribed before me this 15th day of April, 2018

Robin Cooper } Signature of Person Submitting Report  
Robin Cooper } Printed Name  
(215) } Area Code  
(215) 236-7222 } Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA  
 NOTARIAL SEAL  
 My commission expires 25 DAY of 20 YEAR  
 City of Philadelphia, Phila. County

**PART II: If this is a report of a Candidate, 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 }  
 \_\_\_\_\_ } Printed Name  
 \_\_\_\_\_ } Area Code  
 \_\_\_\_\_ } Daytime Telephone Number

My commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YEAR

Department of State Bureau of Commissions, Elections and Legislation  
 210 North Office Building Harrisburg, PA 17120-0029 (717) 787-5280

**SCHEDULE I**  
**Contributions And Receipts**  
 Detailed Summary Page

|   |   |
|---|---|
| Name of Filing Committee or Candidate<br>CASA- COMMONWEALTH ASSOCIATION OF SCHOOL ADMINISTRAT | Reporting Period<br>From <u>01/01/2018</u> To <u>03/26/2018</u> |
|---|---|

| <b>UNITEMIZED CONTRIBUTIONS AND RECEIPTS, \$50.00 OR LESS PER CONTRIBUTOR</b> |           |
|---|-----------|
| TOTAL for the Reporting Period (1)  | \$ 941.50 |

| <b>CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b> |      |
|---|------|
| Contributions Received from Political Committees (Part A)         | \$ 0 |
| All Other Contributions (Part B)                                  | \$ 0 |
| TOTAL for the Reporting Period (2)                                | \$ 0 |

| <b>CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b> |      |
|---|------|
| Contributions Received from Political Committees (Part C)   | \$ 0 |
| All Other Contributions (Part D)                            | \$ 0 |
| TOTAL for the Reporting Period (3)                          | \$ 0 |

| <b>OTHER RECEIPTS, REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b> |      |
|--|------|
| TOTAL for the Reporting Period (4)   | \$ 0 |

|  |           |
|--|-----------|
| <b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.) | \$ 941.50 |
|--|-----------|

SCHEDULE III  
**Statement Of Expenditures**

|  |  |  |   |     |                            |                               |
|--|--|--|---|-----|----------------------------|-------------------------------|
| Name of Filing Committee or Candidate<br>CASA- COMMONWEALTH ASSOCIATION OF SCHOOL ADMINISTRATORS |  |  | Reporting Period<br>From <u>01/01/2018</u> To <u>03/26/2018</u> |     |                            |                               |
| To Whom Paid<br>TD Bank  |  |  | MO  | DAY | YEAR                       | \$ 2.00                       |
|  |  |  | 1   | 31  | 2018                       |                               |
| Mailing Address<br>2201 South Broad Street   |  |  | State<br>PA   |     | Zip Code (Plus 4)<br>19148 |                               |
| City<br>Philadelphia   |  |  |   |     |                            |                               |
| Description of Expenditure<br>PAPER STATEMENT FEE  |  |  |   |     |                            |                               |
| To Whom Paid<br>TD Bank  |  |  | MO  | DAY | YEAR                       | \$ 2.00                       |
|  |  |  | 2   | 28  | 2018                       |                               |
| Mailing Address<br>2201 South Broad Street   |  |  | State<br>PA   |     | Zip Code (Plus 4)<br>19148 |                               |
| City<br>Philadelphia   |  |  |   |     |                            |                               |
| Description of Expenditure<br>PAPER STATEMENT FEE  |  |  |   |     |                            |                               |
| To Whom Paid<br>TD Bank  |  |  | MO  | DAY | YEAR                       | \$ 2.00                       |
|  |  |  | 3   | 26  | 2018                       |                               |
| Mailing Address<br>2201 South Broad Street   |  |  | State<br>PA   |     | Zip Code (Plus 4)<br>19148 |                               |
| City<br>Philadelphia   |  |  |   |     |                            |                               |
| Description of Expenditure<br>PAPER STATEMENT FEE  |  |  |   |     |                            |                               |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.                          |  |  |   |     |                            | Schedule III Total<br>\$ 6.00 |