COMMONWEALTH OF PENNSYLVANIA

CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* did not exceed $250.00 during the reporting period.

FILER IDENTIFICATION NUMBER: 9400383

REPORT FILED ON BEHALF OF: CANDIDATE [1] COMMITTEE [2] ✓ LOBBYIST [3]

NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST: Pac 102

STREET ADDRESS: 2137 KNORR ST

CITY: PHILA STATE: PA ZIP CODE: 19149

TYPE OF REPORT (CHECK ONE)	
6TH TUESDAY PRE-PRIMARY	1
2ND FRIDAY PRE-PRIMARY	2
30 DAY POST-PRIMARY	3
6TH TUESDAY PRE-ELECTION	4
2ND FRIDAY PRE-ELECTION	5
30 DAY POST-ELECTION	6 X
ANNUAL REPORT	7

NAME OF OFFICE SOUGHT BY CANDIDATE: DISTRICT NO.: PARTY:

DATE OF ELECTION: MO. 11 DAY 6 YEAR 12

DATES OF REPORTING PERIOD: MO. 11 DAY 27 YEAR 12 TO MO. 12 DAY 31 YEAR 12

CASH BALANCE AT END OF REPORTING PERIOD: $ 18051.20

TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: $ _____

AMENDMENT REPORT?	YES	✓	NO	
TERMINATION REPORT?	YES		NO	✓

FOR OFFICE USE ONLY

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee *or* Candidates's Committee, the Treasurer must sign here.
If statement is filed on behalf of a Candidate, the Candidate must sign here.
If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS ($250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 29 DAY OF January 2021

Trina P. Bodnik
SIGNATURE

Carol Zapiec
SIGNATURE OF PERSON SUBMITTING REPORT

CAROL ZAPIEC
PRINTED NAME

MY COMMISSION EXPIRES 5 7 2022 (MO. DAY YR.)

215 AREA CODE 578 1621 DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal
TRINA P. BODNIK, Notary Public
Philadelphia County
My Commission Expires May 7, 2022
Commission Number 1187135

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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

_____ AREA CODE _____ DAYTIME TELEPHONE NUMBER

Reset Form | Print Form

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	9410383	Report Filed By (Mark X)	Candidate		Committee	X	Lobbyist	
Name of Filing Committee, Candidate or Lobbyist	POC 102							
Street Address	2137 KNORR ST							
City	Phila	State	Pa	Zip Code	19149			

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
☐	☐	☐	☐	☐	☐	X	☐	☐

Date Of Election (MM/DD/YYYY)	11-6	Year	2012	Amendment Report	X	Termination Report	☐

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	11-27-12	12-31-2012	

A. Amount Brought Forward From Last Report	$	18051.20
B. Total Monetary Contributions and Receipts (From Schedule I)	$	1500 -
C. Total Funds Available (Sum of Lines A and B)	$	19551.20
D. Total Expenditures (From Schedule III)	$	24 -
E. Ending Cash Balance (Subtract Line D from Line C)	$	19527.20
F. Value of In-Kind Contributions Received (From Schedule II)	$	
G. Unpaid Debts and Obligations (From Schedule IV)	$	

Affidavit Section

Part 1- 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, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

29 day of January 20 21

Trina P. Bodnik

Signature

My Commission expires 5 7 2022 (MO. DAY YR.)

Commonwealth of Pennsylvania - Notary Seal
TRINA P. BODNIK, Notary Public
Philadelphia County
My Commission Expires May 7, 2022
Commission Number 1187135

Carol Lapicola

Signature of Person Submitting report

CAROL LAPICOLA

Printed Name

215 578 1621

Area Code Daytime Telephone Number

Part II- If this report is for 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

_____ _____

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
PAC 102	From: 11/27/2012 To: 12/31/2012

1. Unitemized Contributions Received - $ 50.00 or Less Per Contributor		
TOTAL for the Reporting Period (1)	$	0.00

2. Contributions Received - $ 50.01 To $250.00 (From Part A and Part 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 Received Over $250.00 (From Part C and Part D)		
Contributions Received From Political Committees (Part C)	$	0.00
All Other Contributions (Part D)	$	1,500.00
TOTAL for the Reporting Period (3)	$	1,500.00

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 Page1, Report Cover Page, Item B.)	$	1,500.00

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	Reporting Period
PAC 102	From: 11/27/2012 To: 12/31/2012

Full Name of Contributor	Mailing Address	City	State	Zip Code (Plus 4)	DATE MO	DAY	YEAR	AMOUNT
WILLIAM RINALDI	PO BOX 3972	SCRANTON	PA	18505	11	30	2012	$ 1,500.00

Employer Name	Occupation
SELF	ATTORNEY

Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)
538 SPRUCE ST	SCRANTON	PA	18503

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

PAGE TOTAL
$ 1,500.00

SCHEDULE III

Statement of Expenditures

Filer Identification Number: 941173837	PAC 102

To Whom Paid	PNC Bank					Date [MM/DD/YYYY] 12-31-13	$	24-
House #	Street Address	COTTMAN & LARGE				Description of Expenditure		
City	Phila	State	PA	Zip Code	19149	Service Chg		
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	$	
House #	Street Address					Description of Expenditure		
City		State		Zip Code				

COMMONWEALTH OF PENNSYLVANIA

CAMPAIGN FINANCE STATEMENT

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FILER IDENTIFICATION NUMBER	9401383	REPORT FILED ON BEHALF OF	CANDIDATE		COMMITTEE		LOBBYIST	

NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST: PAC 102

STREET ADDRESS: 2137 KNORR ST

CITY: PHILA | STATE: PA | ZIP CODE: 19149

TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY	1				11		2013
2ND FRIDAY PRE-PRIMARY	2						
30 DAY POST-PRIMARY	3						
6TH TUESDAY PRE-ELECTION	4						
2ND FRIDAY PRE-ELECTION	5						
30 DAY POST-ELECTION	6						
ANNUAL REPORT	7 X						

DATES OF REPORTING PERIOD: 01 / 01 / 13 TO 12 / 31 / 13 (MO. / DAY / YEAR)

FOR OFFICE USE ONLY

CASH BALANCE AT END OF REPORTING PERIOD: $ 9503.20

TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: $ _____

AMENDMENT REPORT?	YES	X	NO	
TERMINATION REPORT?	YES		NO	✓

AFFIDAVIT SECTION

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Trina P. Bodnik
SIGNATURE

Commonwealth of Pennsylvania - Notary Seal
TRINA P. BODNIK, Notary Public
Philadelphia County
My Commission Expires May 7, 2022
Commission Number 1187186

MY COMMISSION EXPIRES: 7 DAY 2022 YR.

Carol Zapiec
SIGNATURE OF PERSON SUBMITTING REPORT

CAROL ZAPIEC
PRINTED NAME

215 AREA CODE 5781621 DAYTIME TELEPHONE NUMBER

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SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20___

_____
SIGNATURE

MY COMMISSION EXPIRES _____ MO. DAY YR.

_____
SIGNATURE OF CANDIDATE

_____
PRINTED NAME

_____ AREA CODE _____ DAYTIME TELEPHONE NUMBER