

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.} <input type="checkbox"/>		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.} <input type="checkbox"/>		
Name of Filing Committee, Candidate or Lobbyist: <i>Jessica Rothchild For Beranton</i>										
Street Address: <i>1520 E. Gibson St.</i>										
City: <i>Beranton</i>			State: <i>PA</i>			Zip Code: <i>18510</i>				
TYPE OF REPORT (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 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 type="checkbox"/>	ANNUAL REPORT ^{7.}	
	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of Office Sought by Candidate:				DATE OF ELECTION MO. DAY YEAR		District Number	Office Code	Party Code	County Code	
Summary of Receipts and Expenditures from:				MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY			
				<i>06</i>	<i>11</i>	<i>2019</i>	To	<i>10</i>	<i>21</i>	<i>2019</i>
A. Amount Brought Forward From Last Report				\$	<i>3,026.12</i>					
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	<i>6,890.00</i>					
C. Total Funds Available (Sum of Lines A and B)				\$	<i>9,896.12</i>					
D. Total Expenditures (From Schedule III)				\$	<i>4,192.84</i>					
E. Ending Cash Balance (Subtract Line D from Line C)				\$	<i>5,703.26</i>					
F. Value of In-Kind Contributions Received (From Schedule II)				\$	<i>5,047.70</i>					
G. Unpaid Debts and Obligations (From Schedule IV)				\$	<i>171.07</i>					

RECEIVED
OCT 25, 2019
4:30 PM

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

25th day of *October* 20 *19*

Joan Spott
Signature

My commission expires *10/20/22*

Commonwealth of Pennsylvania - Notary Seal
JOAN SPOTT - Notary Public
Lackawanna County
My Commission Expires Oct 20, 2022
Commission Number 62258621

Sarah E. Cruz
Signature of Person Submitting Report

Sarah E. Cruz
Printed Name

(570)
Area Code

604-2914
Daytime Telephone Number

PART II - If this is a report submitted by an 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

25 day of *October* 20 *19*

Joan Spott
Signature

My commission expires *10/20/22*

MO. DAY YR.

Jessica Rothchild
Signature of Candidate

Jessica Rothchild
Printed Name

908
Area Code

380-4325
Daytime Telephone Number

RECEIVED

OCT 28 2019

OFFICE OF CITY COUNCIL/CITY CLERK

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number		Report Filed By (Mark X)		Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Jessica Rothchild for Scranton					
Street Address		1520 E. Gibson St.					
City	Scranton	State	PA	Zip Code	18510		

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<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"/>
Date Of Election (MM/DD/YYYY)		Year		Amendment Report		Termination Report		<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date
		06/11/2019
A. Amount Brought Forward From Last Report	\$	3,026.12
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	6,890.00
C. Total Funds Available (Sum of Lines A and B)	\$	9,896.12
D. Total Expenditures (From Schedule III)	\$	4,192.86
E. Ending Cash Balance (Subtract Line D from Line C)	\$	5,703.26
F. Value of In-Kind Contributions Received (From Schedule II)	\$	5,047.70
G. Unpaid Debts and Obligations (From Schedule IV)	\$	171.07

For Office Use Only

LACKAWANNA COUNTY
 BUREAU OF ELECTIONS
 2019 OCT 25 P 4: 00

Affidavit Section

Part I- If this is a **Committee** report, treasurer sign here. If this is a **Candidate** report, candidate sign here.

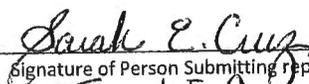
I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

_____ day of _____ 20_____

Signature

My Commission expires _____ MO. _____ DAY _____ YR.


 Signature of Person Submitting report
 Sarah E. Cruz
 Printed Name
 (570) _____ Area Code
 604-2914 _____ 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
 Jessica Rothchild
 Printed Name
 908 _____ Area Code
 388-4325 _____ Daytime Telephone Number

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number	
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1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period	(1)	\$ 2,520.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)	\$	970.00
All Other Contributions (Part B)	\$	1,690.00
Total for the reporting period	(2)	\$ 2,660.00
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)	\$	0.00
All Other Contributions (Part D)	\$	0.00
Total for the reporting period	(3)	\$ 0.00
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 <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>	\$	6,870.00

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.

Filer Identification Number											
										Amount	
Full Name of Contributing Committee						Friends of Marty Flynn				Date [MM/DD/YYYY]	\$ 250.00
										08/08/2019	
House #	Street Address		P.O. Box 91							Date [MM/DD/YYYY]	\$
City	Scranton		State	PA	Zip Code	18504				Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee						Progressive Women of NEPA				Date [MM/DD/YYYY]	\$ 250.00
										08/26/2019	
House #	Street Address		P.O. Box 191							Date [MM/DD/YYYY]	\$
City	Dunmore		State	PA	Zip Code	18512				Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee						Friends of Domenick and Notarianni				Date [MM/DD/YYYY]	\$ 120.00
										09/13/2019	
House #	Street Address		321 Spruce St. Suite 1000							Date [MM/DD/YYYY]	\$
City	Scranton		State	PA	Zip Code	18503				Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee						Friends of Kyle Mullins				Date [MM/DD/YYYY]	\$ 250.00
										10/17/2019	
House #	Street Address		P.O. Box 72							Date [MM/DD/YYYY]	\$
City	Peckville		State	PA	Zip Code	18452				Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee						Lackawanna County Federation of Democratic Women				Date [MM/DD/YYYY]	\$ 100.00
										10/18/2019	
House #	Street Address		P.O. Box 1282							Date [MM/DD/YYYY]	\$
City	Scranton		State	PA	Zip Code	18501				Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee										Date [MM/DD/YYYY]	\$
House #	Street Address									Date [MM/DD/YYYY]	\$
City			State		Zip Code					Date [MM/DD/YYYY]	\$

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from
\$50.01 TO \$250 in the reporting period.

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

Filer Identification Number:	
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Full Name of Contributor		Mandi Boyanski			Date [MM/DD/YYYY]	\$	100.00
					06/11/2019		
House #	1626	Street Address	Madison Ave.		Date [MM/DD/YYYY]	\$	
City	Dunmore	State	PA	Zip Code	18509	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Michael Cummings			Date [MM/DD/YYYY]	\$	250.00
					06/11/2019		
House #	2126	Street Address	Jefferson Ave.		Date [MM/DD/YYYY]	\$	
City	Dunmore	State	PA	Zip Code	18509	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Tom Schank			Date [MM/DD/YYYY]	\$	100.00
					06/12/2019		
House #	709	Street Address	Sanderson St.		Date [MM/DD/YYYY]	\$	
City	Throop	State	PA	Zip Code	18512	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Nina Ahmad			Date [MM/DD/YYYY]	\$	75.00
					07/28/2019		
House #	405	Street Address	E. Gowen Ave.		Date [MM/DD/YYYY]	\$	
City	Philadelphia	State	PA	Zip Code	19119	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Natasha Taylor-Smith			Date [MM/DD/YYYY]	\$	100.00
					08/05/2019		
House #	1420	Street Address	Walnut St.		Date [MM/DD/YYYY]	\$	
City	Philadelphia	State	PA	Zip Code	19102	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Steven Coyne			Date [MM/DD/YYYY]	\$	100.00
					08/19/2019		
House #	140	Street Address	S. Dewey Ave.		Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18504	Date [MM/DD/YYYY]	\$

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

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

Filer Identification Number:	
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Full Name of Contributor		Norma Moreiko		Date [MM/DD/YYYY]	\$	60.00
				08/28/2019		
House #	916	Street Address	Park St.	Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18509	Date [MM/DD/YYYY]
Full Name of Contributor		Stephen and Ellen Casey		Date [MM/DD/YYYY]	\$	60.00
				09/09/2019		
House #	817	Street Address	Olive St.	Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18510	Date [MM/DD/YYYY]
Full Name of Contributor		Robert Waldeck		Date [MM/DD/YYYY]	\$	60.00
				09/12/2019		
House #	746	Street Address	Harrison Ave.	Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18510	Date [MM/DD/YYYY]
Full Name of Contributor		Mary Kathleen Hart		Date [MM/DD/YYYY]	\$	60.00
				09/13/2019		
House #	621	Street Address	Gibbons St.	Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18505	Date [MM/DD/YYYY]
Full Name of Contributor		Oliver, Price & Rhodes, Attorneys at Law		Date [MM/DD/YYYY]	\$	100.00
				09/13/2019		
House #	1212	Street Address	S. Abington Rd. P.O. Box 240	Date [MM/DD/YYYY]	\$	
City	Clarks Summit	State	PA	Zip Code	18411	Date [MM/DD/YYYY]
Full Name of Contributor		Thomas Krivak		Date [MM/DD/YYYY]	\$	100.00
				09/13/2019		
House #	1112	Street Address	Watson St.	Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18504	Date [MM/DD/YYYY]

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

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

Filer Identification Number:	
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Full Name of Contributor		Kyle Donahue			Date [MM/DD/YYYY]	\$	100.00
					09/13/2019		
House #	621	Street Address	Gibbons St.		Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18505	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Alexander John Lotorto			Date [MM/DD/YYYY]	\$	100.00
					09/22/2019		
House #	723	Street Address	Moosic St.		Date [MM/DD/YYYY]	\$	
City	Scranton	State	PA	Zip Code	18505	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Joseph Healey			Date [MM/DD/YYYY]	\$	100.00
					09/22/2019		
House #	1011	Street Address	Scenic Dr.		Date [MM/DD/YYYY]	\$	
City	Clarks Summit	State	PA	Zip Code	18411	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Mary Jean Moran			Date [MM/DD/YYYY]	\$	100.00
					10/18/2019		
House #	1317	Street Address	Woodlawn St.		Date [MM/DD/YYYY]	\$	
City	Dunmore	State	PA	Zip Code	18509	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Ann Pehle			Date [MM/DD/YYYY]	\$	125.00
					10/18/2019		
House #		Street Address	PO Box 687		Date [MM/DD/YYYY]	\$	
City	Mechanicsburg	State	PA	Zip Code	17055	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$

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

Filer Identification Number:	
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the reporting period	(1)	\$ 47.70

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)	\$ 5,000

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)		\$ 5,047.70
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SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:	
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Full Name of Contributor					Date [MM/DD/YYYY]		\$
Alexander Monelli					10/08/2019		5,000
House #	Street Address				Date [MM/DD/YYYY]		\$
19	Roselle Ave.						
City	State		Zip Code	Date [MM/DD/YYYY]		\$	
Lancaster	PA		17603				
Employer Name			Self-employed		Occupation	Filmmaker	
Employer Mailing Address / Principal Place of Business			Same as above		Description of Contribution	Campaign Video	
Full Name of Contributor					Date [MM/DD/YYYY]		\$
House #	Street Address				Date [MM/DD/YYYY]		\$
City	State		Zip Code	Date [MM/DD/YYYY]		\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business					Description of Contribution		
Full Name of Contributor					Date [MM/DD/YYYY]		\$
House #	Street Address				Date [MM/DD/YYYY]		\$
City	State		Zip Code	Date [MM/DD/YYYY]		\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business					Description of Contribution		
Full Name of Contributor					Date [MM/DD/YYYY]		\$
House #	Street Address				Date [MM/DD/YYYY]		\$
City	State		Zip Code	Date [MM/DD/YYYY]		\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business					Description of Contribution		

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	44.46
					06/11/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State	MA	Zip Code	02144	Donation fee	
To Whom Paid		Facebook			Date [MM/DD/YYYY]	\$	59.33
					06/24/2019		
House #	1	Street Address	Hacker Way		Description of Expenditure		
City	Menlo Park	State	CA	Zip Code	94025	Ads	
To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	28.52
					07/03/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State	MA	Zip Code	02144	Donation fee	
To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	53.66
					07/09/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State	MA	Zip Code	02144	Donation fee	
To Whom Paid		Mansour's Market Cafe			Date [MM/DD/YYYY]	\$	53.02
					07/22/2019		
House #	969	Street Address	Prescott Ave.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18510	Video lunch	
To Whom Paid		Pittsburgh Buttoneer			Date [MM/DD/YYYY]	\$	103.90
					07/26/2019		
House #	219	Street Address	Briggs St.		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17102	Buttons	
To Whom Paid		Waldorf Park Social Club			Date [MM/DD/YYYY]	\$	50.00
					07/26/2019		
House #	13	Street Address	Waldorf Ln.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18505	Event sponsorship	
To Whom Paid		The 16th Ward			Date [MM/DD/YYYY]	\$	350.00
					07/29/2019		
House #	306	Street Address	Penn Ave.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18503	Event food	

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		NEPA Rainbow Alliance			Date [MM/DD/YYYY]	\$	150.00
					07/31/2019		
House #	100	Street Address	Quarry Rd.		Description of Expenditure		
City	Laurel Run	State	PA	Zip Code	18706 Event sponsorship		
To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	1.13
					08/08/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State	MA	Zip Code	02144 Donation fee		
To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	5.69
					08/09/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State	MA	Zip Code	02144 Donation fee		
To Whom Paid		Jenis Walsh			Date [MM/DD/YYYY]	\$	411.90
					08/13/2019		
House #	349	Street Address	High Blvd.		Description of Expenditure		
City	Wilkes Barre	State	PA	Zip Code	18702 Campaign manager stipend		
To Whom Paid		Facebook			Date [MM/DD/YYYY]	\$	4.01
					08/23/2019		
House #	1	Street Address	Hacker Way		Description of Expenditure		
City	Menlo Park	State	CA	Zip Code	94025 Ads		
To Whom Paid		PA Democratic Party			Date [MM/DD/YYYY]	\$	252.00
					08/30/2019		
House #	229	Street Address	State Street		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17101 VAN access		
To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	4.43
					09/05/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State		Zip Code	02144 Donation fee		
To Whom Paid		Amazon.com, Inc.			Date [MM/DD/YYYY]	\$	34.94
					09/09/2019		
House #		Street Address	P.O. Box 81226		Description of Expenditure		
City	Seattle	State	WA	Zip Code	98108 Event decorations		

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	9.50
					09/10/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State	MA	Zip Code	02144		
					Donation fee		
To Whom Paid		Jaworski Sign Company			Date [MM/DD/YYYY]	\$	993.75
					09/11/2019		
House #	913	Street Address	S. Main Ave.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18504		
					Lawn signs		
To Whom Paid		Electric City Bakehouse			Date [MM/DD/YYYY]	\$	166.95
					09/13/2019		
House #	314	Street Address	Penn Ave.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18503		
					Event desserts		
To Whom Paid		Saturbae			Date [MM/DD/YYYY]	\$	250.00
					09/13/2019		
House #	417	Street Address	Highland Ave.		Description of Expenditure		
City	Clarks Summit	State	PA	Zip Code	18411		
					Event DJs		
To Whom Paid		Jenis Walsh			Date [MM/DD/YYYY]	\$	300.00
					09/19/2019		
House #	349	Street Address	High Blvd.		Description of Expenditure		
City	Wilkes Barre	State		Zip Code	18702		
					Campaign manager stipend		
To Whom Paid		Facebook			Date [MM/DD/YYYY]	\$	5.99
					09/23/2019		
House #	1	Street Address	Hacker Way		Description of Expenditure		
City	Menlo Park	State	CA	Zip Code	94025		
					Ads		
To Whom Paid		Lowe's, Inc.			Date [MM/DD/YYYY]	\$	79.25
					09/27/2019		
House #	901	Street Address	Viewmont Dr.		Description of Expenditure		
City	Dickson City	State	PA	Zip Code	18519		
					Lawn sign supplies		
To Whom Paid		Krispy Kreme Doughnuts, Inc.			Date [MM/DD/YYYY]	\$	7.99
					09/28/2019		
House #	511	Street Address	Moosic St.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18505		
					Donuts		

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		Dorothy Gentile			Date [MM/DD/YYYY]	\$	57.77
					10/07/2019		
House #	1050	Street Address	N. Webster Ave.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18510	Event decoration reimbursement	
To Whom Paid		Alexander Monelli			Date [MM/DD/YYYY]	\$	128.93
					10/08/2019		
House #	19	Street Address	Roselle Ave.		Description of Expenditure		
City	Lancaster	State	PA	Zip Code	17603	Travel expenses and music licensing	
To Whom Paid		ActBlue			Date [MM/DD/YYYY]	\$	13.53
					10/09/2019		
House #		Street Address	P.O. Box 441146		Description of Expenditure		
City	Somerville	State	MA	Zip Code	02144	Donation fee	
To Whom Paid		Mansour's Market Cafe			Date [MM/DD/YYYY]	\$	54.36
					10/15/2019		
House #	969	Street Address	Prescott Ave.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18510	Event food	
To Whom Paid		Center City Print			Date [MM/DD/YYYY]	\$	159.00
					10/18/2019		
House #	119	Street Address	Penn Ave.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18503	Rack cards	
To Whom Paid		Jenis Walsh			Date [MM/DD/YYYY]	\$	300.00
					10/20/2019		
House #	349	Street Address	High Blvd.		Description of Expenditure		
City	Wilkes Barre	State	PA	Zip Code	8702	Campaign manager stipend	
To Whom Paid		West Side Active Older Adult Community Center			Date [MM/DD/YYYY]	\$	50.00
					10/20/2019		
House #	1004	Street Address	Jackson St.		Description of Expenditure		
City	Scranton	State	PA	Zip Code	18504	Bingo sponsorship	
To Whom Paid		Facebook			Date [MM/DD/YYYY]	\$	8.85
					10/21/2019		
House #	1	Street Address	Hacker Way		Description of Expenditure		
City	Menlo Park	State	CA	Zip Code	94025	Ads	

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number:	
------------------------------	--

Name of Creditor		Jessica Rothchild					Outstanding Balance of Debt	
House #	1520	Street Address	E. Gibson St.		DATE DEBT INCURRED [MM/DD/YYYY]		\$	171.07
City		Scranton	State	PA	Zip Code	18510		
Description of Debt		Campaign phone bills						

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

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		REPORT FILED ON BEHALF OF	CANDIDATE	<input checked="" type="checkbox"/> COMMITTEE	¹	LOBBYIST	³		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Jessica Rothchild									
STREET ADDRESS 1520 E. Gibson St.									
CITY Scranton			STATE PA		ZIP CODE 18510				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION			
6TH TUESDAY PRE-PRIMARY		Scranton City Council			Democratic	MO: 11	DAY: 05		
2ND FRIDAY PRE-PRIMARY						YEAR: 2019			
30 DAY POST-PRIMARY						FOR OFFICE USE ONLY			
6TH TUESDAY PRE-ELECTION						2019 OCT 25 P 4: 00 LACKAWANNA COUNTY BUREAU OF ELECTIONS			
2ND FRIDAY PRE-ELECTION									
30 DAY POST-ELECTION									
ANNUAL REPORT									
		DATES OF REPORTING PERIOD:		MO: 06	DAY: 11			YEAR: 2019	TO
				MO: 10	DAY: 21			YEAR: 2019	
		CASH BALANCE AT END OF REPORTING PERIOD:		\$ 0					
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 0					
		AMENDMENT REPORT?		YES	NO				
		TERMINATION REPORT?		YES	NO				

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 _____ DAY OF _____ 20__

SIGNATURE

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____

SIGNATURE OF PERSON SUBMITTING REPORT

PRINTED NAME

AREA CODE

DAYTIME TELEPHONE NUMBER

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 25 DAY OF October 2019

SIGNATURE

MY COMMISSION EXPIRES 10/20/22 MO. _____ DAY _____ YR. _____

SIGNATURE OF CANDIDATE

Jessica Rothchild
PRINTED NAME

908 _____
AREA CODE

380-4325
DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal
 JOAN SPOTT - Notary Public
 Lackawanna County Department of State
 My Commission Expires Oct 20, 2022
 218 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280
 Commission Number 1258621