

### **Campaign Finance Report**

329677

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

Filer Identification 20180335 Number :					_	port ed B		CAND	DATE		СОМ	MITTEE	<b>✓</b>	LOB	BYIST	
Name of Filing C	ommittee, Candid	late or L	obbyist:		WAI	RD 1	LEXE	CUTIVE (	COMMI	TTE	 E					
Street Address:	611 MIFFLIN	ST														
City:	PHILADELPHI	Α						State:	PA			Zip Co	<b>de:</b> 1	9148		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE-	-	2.		30 DAY P PRIMARY		T- 3. <b>X</b>		AMENDMENT REPORT?		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	Y PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2020					IG METH				PAPER / DISK			DISKE	TTE
Name of Office S	ought by Candida	ite:	-					DATE C	F ELE	CTI	ON	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	Y	/EAR			•		
						11				3	2020		(SEE II	NSTRUCTI	ONS FOR C	CODES)
Summary of		МО	DAY	YEAR			'	МО	DAY	Y	/EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		5 19	20	020	Т	0	$\epsilon$	5	22	2020					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			14,	,849.62					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			1,	,515.00					
C. Total Funds Available (Sum Of Lines A and B)							\$			16,	,364.62					
D. Total Expenditures (From Schedule III)							\$			4,	251.20	]				
E. Ending Cash	Balance (Subtrac	t Line D	From Line (	C)			\$			12,	113.42					
F. Value Of In-	Kind Contribution	s Receiv	ed (From So	chedul	le II	I)	\$				0.00	_				
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00					
				AFF	IDA	AVI	T SE	CTION								
PART I - If this is	•	•							• •		_					
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sch	nedules	file	d on	paper o	or by elect	ronic m	ediur	n, are to t	the best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me thi day of	s	20								Signature	e of Perso	n Submi	tting Re <sub>l</sub>	oort	
	Signati	ıre					-					Prin	ted Nam	e		
My Commission Ex	•											Ema	il			
	МО	D	AY	YR			_		Ar	ea Co	ode	Daytim	e Telep	hone Nu	mber	•
Part II- If this is	a report of a can	didate's	authorized	Comm	itte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of e	ny knowle	edge and belie	ef this	polit	tical	commi	ittee has r	not viola	ted a	ny provis	ions of th	e act of :	June 3,1	937 (P.L	. 1333,
Sworn to and subsc											s	ignature (	of Candid	late		<del></del>
	day of ————————————————————————————————————						_					Drinto	d Name			<u> </u>
	Signature						-					FIIICE	u Hame			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			-		Area	Code	<b>.</b>	D	aytime '	Гelephor	ne Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
WARD 1 EXECUTIVE COMMITTEE	From:	<u>5/19/202</u>	<u>0</u> To:	6/22/2020
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)			\$	115.00
TOTAL for the Reporting	Period	(2)	\$	115.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,400.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	) Period	(3)	\$	1,400.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,515.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	Part to itemize on an aggregate val				•			
Name of Filing Committee	or Candidate		Re	porting	Period			
		From: To:					:	
					DATE			AMOUNT
Full Name of Contributing Co	mmittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
							$\overline{\Box}$	PAGE TOTAL

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

0.00

## 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)

Name of Filing Committee or Cand	lidate		Reporting P	eriod		
WARD 1 EXECUTIVE COMMITTEE			From:	<u>5/19/</u>	2020 <b>T</b> o	6/22/2020
		l		DATE		AMOUNT
Full Name of Contributor Natasha Cahill			МО	DAY	YEAR	
Mailing Address 1438 South 9th	Street					<b>\$</b> 25.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	5	20	2020	
Full Name of Contributor Natasha Cahill			МО	DAY	YEAR	
Mailing Address 1438 South 9th  City Philadelphia	6	18	2020	<b>\$</b> 25.00		
Full Name of Contributor Peter Rook				DAY	YEAR	
Mailing Address 2442 20th St. N	NW Unit B					<b>\$</b> 25.00
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20009	5	25	2020	
Full Name of Contributor Stephon Petro			МО	DAY	YEAR	
Mailing Address 920 Wharton State City Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19147	6	11	2020	\$ 10.00
<b>Full Name of Contributor</b> Leigh Goldenberg			МО	DAY	YEAR	
Mailing Address 1411 S. Frankli  City Philadelphia	n Street State	Zip Code (Plus 4)	6	18	2020	\$ 5.00
<b>City</b> Philadelphia	PA	19147				

Full Name of Contributor Adams Rackes	adams Rackes				YEAR	
Mailing Address 1612 S Lawrence St						<b>\$</b> 25.00
City Philadelphia	State	Zip Code (Plus 4)	6	18	2020	
	PA	19147				

**PAGE TOTAL \$** 115.00

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

#### **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				
WARD 1 EXECUTIVE COMMITTEE			From:	<u>5/1</u>	9/2020	То:	<u>6</u>	/22/2020
				DA	TE		A	MOUNT
Full Name of Contributing Committee FRIENDS OF NIKIL SAVAL				МО	DAY	YEAR		
Mailing Address 525 QUEEN STREET				_	20	2020	\$	1,000.00
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code</b> 19147	(Plus 4)	5	20	2020		
Full Name of Contributing Committee AHMAD, NINA FOR PA				МО	DAY	YEAR		
Mailing Address 405 EAST GOWEN A	VENUE			_			\$	400.00
City PHILADELPHIA	State PA	<b>Zip Code</b> 19119	(Plus 4)	5	20	2020		
		·		·				PAGE TOTAL

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

PAGE TOTAL 1,400.00

## 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	•			Rep	orting Pe	riod			
				Fror	n:		To	<b>)</b> :	
					D	ATE		A	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zip Cod	e (Plus	s <b>4</b> )					
Employer Name	•				Occupa	tion	•	•	
Employer Mailing Address/Principal Pla Business	ce of	Cit	ТУ			State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P \$	<b>AGE TOTAL</b> 0.00

## 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.

Name of Filing Committee or	Candidate		Report	ing Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	·					•	
Enter Grand Total of Part E	on Schedule I. Detailed	d Summary Page	Section	4			ı	PAGE TOTAL
	Journal 1, Betailet	a cannual y 1 age,	2000011	••			\$	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

Name of Filing Committee or Candidate	Reporting Perio	od	
WARD 1 EXECUTIVE COMMITTEE	From:	<u>5/19/2020</u> <b>To:</b>	<u>6/22/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	late		Reportin	g Period			
		DATE  MO DAY YEAR  e Zip Code (Plus 4)  In-Kind Contributions Detailed Summary Page,			To:		
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	Schedule II. In-Kir	nd Contributions Deta	iled Sum	mary Pag	ae. F		PAGE TOTAL
Section 2.				,;	,-,	\$	
1						Ψ	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period			
WARD 1 EXECUTIVE COMMITTE	E		From	<u>5/19</u>	9/2020	То:	6/22/2020
				DATE			AMOUNT
o <b>Whom Paid</b> Northern Liberty Press			МО	DAY	YEAR		
Mailing Address 1223 N. Maso	her St		5	26	2020	\$	2,281.45
<b>City</b> Philadelphia	PA 19122				penditure rinting ar	nd Postage	e
<b>To Whom Paid</b> Kathleen Melville			МО	DAY	YEAR		
Mailing Address 920 Wharton St			5	27	2020	\$	288.90
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147		otion of Exp ursement fo			supplies
<b>To Whom Paid</b> Committee people	•	·	мо	DAY	YEAR		
Mailing Address 611 Mifflin St			6	12	2020	\$	525.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19148		otion of Exp			
o <b>Whom Paid</b> Staples			МО	DAY	YEAR		
ailing Address 1300 S Christopher Columbus Blvd			5	23	2020	\$	70.95

Staples							
Mailing Address 1300 S Christopher Columbus Blvd			5	23	2020	\$	70.95
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	Description of Expenditure Primary Posters				
To Whom Paid Staples			мо	DAY	YEAR		
Mailing Address 1300 S Christopher Columbus Blvd			5	24	2020	\$	129.56
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	Description of Expenditure Supplies for Primary				

						PAC	GE 13
To Whom Paid Vantiv E Commerce				DAY	YEAR		
Mailing Address 8500 Governor's Hill Drive			6	9	2020	\$	9.07
<b>City</b> Symmes Township	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	Description of Expenditure Online contribution processing fees				
To Whom Paid Act Blue				DAY	YEAR		
Mailing Address PO Box 441146			6	3	2020	\$	3.62
<b>City</b> Somerville	State MA	<b>Zip Code (Plus 4)</b> 02144	Description of Expenditure Act Blue Fees				
<b>To Whom Paid</b> Cosmi's Deli				DAY	YEAR		
Mailing Address 1501 S. 8th St			6	3	2020	\$	137.65
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	Description of Expenditure Primary Day Food for volunteers				
To Whom Paid Stephon Petro			мо	DAY	YEAR		
Mailing Address 920 Wharton St			5	19	2020	\$	700.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	Description of Expenditure Reimbursement for postcard stamps				
To Whom Paid Stephon Petro				DAY	YEAR		
Mailing Address 920 Wharton St			6	9	2020	\$	105.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	Description of Expenditure Reimbursement for additional postcard stamps				
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item D				P. \$	<b>AGE TOTAL</b> 4,251.20