# **Campaign Finance Report**

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

| Filer Identificati<br>Number :                               | <b>ion</b> 9200                  | 339         |                       |          | Repo<br>Filed |        | CANI               | DIDA   | TE       | СОМ         | MITTEE             | ✓                      | LOBI         | BYIST    |                |
|--|----------------------------------|-------------|-----------------------|----------|---------------|--------|--------------------|--------|----------|-------------|--------------------|------------------------|--------------|----------|----------------|
| Name of Filing C   | Committee, Candid                | ate or Lo   | obbyist:              |          | HUGHE         | ES, V  | INCENT (           | CITIZ  | ZENS I   | FOR         |                    |                        |              |          | -              |
| Street Address:  | 4601 MARKET                      | Г ST. 1S    | T FLR                 |          |               |        |                    |        |          |             |                    |                        |              |          |                |
| City:  | PHILADELPHI                      | A           |                       |          |               |        | State:             | P      | Ą        |             | Zip Co             | <b>Zip Code:</b> 19139 |              |          |                |
| TYPE OF<br>REPORT  | 6TH TUESDAY<br>PRE-PRIMARY       | 1.          | 2ND FRIDA<br>PRIMARY  | Y PRE-   | - 2.          |        | DAY<br>MARY        | POS    | POST- 3. |             |                    | AMENDMENT<br>REPORT?   |              | No       | ° <b>∀</b>     |
| (place X to<br>the right of                                  | 6TH TUESDAY<br>PRE-ELECTION      | 4.          | 2ND FRIDA<br>ELECTION | AY PRE   | - 5.          | 30 ELE | DAY<br>CTION       | POS    | 6T- 6.   |             | TERMIN<br>REPORT   |                        | Yes          | No       | · 🗸            |
| report type)   | ANNUAL REPORT                    | 7. <b>X</b> | <b>Year</b> 2001      |          |               |        | ING MET<br>) CHECK |        |          |             | PAPER              |                        | $\checkmark$ | DISKE    | TTE            |
| Name of Office S   | ⊥<br>Sought by Candida           | te:         |                       |          |               |        | DATE               | OF     | ELECT    | ION         | District<br>Number | Office<br>Code         | Par          | ty Code  | County<br>Code |
| CENATOD IN T   |                                  |             |                       |          |               |        | мо                 | D      | AY       | YEAR        |                    | STS                    | DEN          | 1        | 51             |
| SENATOR IN T   | HE GENERAL ASS                   | EMBLI       |                       |          |               |        | 1                  | .1     | 6        | 2001        | ·                  | (SEE INS               | STRUCTI      | ONS FOR  | CODES)         |
|  | Receipts and                     | мо          | DAY                   | YEAR     | 2             |        | мо                 | D      | AY       | YEAR        | FC                 | OR OFFIC               | E USE        | ONLY     |                |
| Expenditures   | s from:                          |             | 1 1                   |          | 1             | го     | 1                  | .2     | 31       | 2001        |                    |                        |              |          |                |
| A. Amount Bro  | ught Forward From                | n Last Ro   | eport                 |          |               |        | \$                 |        | 4        | 7,183.98    | 3                  |                        |              |          |                |
| B. Total Monet   | ary Contributions                | And Reco    | eipts (Fron           | n Sche   | dule I)       |        | \$ 16,645.13       |        |          |             |                    |                        |              |          |                |
| C. Total Funds Available (Sum Of Lines A and B) \$ 63,829.11 |                                  |             |                       |          |               |        |                    |        |          |             |                    |                        |              |          |                |
| D. Total Expen   | ditures (From Sch                | edule II    | [)                    |          |               |        | \$                 |        |          | 7,233.10    |                    |                        |              |          |                |
| E. Ending Cash   | Balance (Subtrac                 | t Line D    | From Line             | C)       |               |        | \$                 |        | 5        | 6,596.01    |                    |                        |              |          |                |
| F. Value Of In-  | Kind Contribution                | s Receive   | ed (From S            | chedu    | le II)        |        | \$                 |        |          | 0.00        |                    |                        |              |          |                |
| G. Unpaid Deb  | ts And Obligations               | (From S     | chedule I\            | /)       |               |        | \$                 |        |          | 0.00        |                    |                        |              |          |                |
|  |                                  |             |                       | AFF      | IDAV          | IT S   | ECTIO              | N      |          |             |                    |                        |              |          |                |
|  | s a Committee rep                | •           | -                     |          |               |        |                    |        | •        |             | -                  |                        |              |          |                |
| I swear (or affirm<br>correct and compl                      | ) that this report, inc<br>ete.  | luding the  | attached so           | hedules  | s filed or    | 1 pape | er or by ele       | ctron  | ic medi  | um, are to  | the best o         | of my knov             | vledge       | and beli | ef , true      |
| Sworn to and subs  | scribed before me this<br>day of | 5           | 20                    |          |               |        |                    |        |          | Signatur    | e of Perso         | n Submitt              | ing Rep      | oort     |                |
|  | Signatu                          | re          |                       |          |               | _      |                    | _      |          |             | Prir               | ted Name               |              |          |                |
| My Commission E  | xpires                           |             |                       |          |               |        |                    | _      |          |             | Ema                | il                     |              |          |                |
|  | мо                               | DA          | Y                     | YR       |               |        |                    |        | Area     | Code        | Daytin             | ne Teleph              | one Nu       | mber     |                |
| Part II- If this is  | a report of a can                | didate's a  | authorized            | Comn     | nittee,       | Candi  | idate sha          | ll sig | ın here  | e.          |                    |                        |              |          |                |
| I swear (or affirm)<br>No 320) as amende                     | ) that to the best of r<br>ed.   | ny knowle   | dge and bel           | ief this | politica      | l com  | mittee has         | not    | violated | l any provi | sions of th        | e act of Ju            | ine 3,1      | 937 (P.I | . 1333,        |
| Sworn to and subso   | cribed before me this<br>day of  |             | 20                    |          |               |        |                    | _      |          | 5           | Signature          | of Candida             | ite          |          |                |
|  |                                  |             |                       |          |               |        |                    | _      |          |             | Printe             | ed Name                |              |          |                |
|  | Signature                        |             |                       |          |               | _      |                    |        |          |             |                    |                        |              |          |                |
| My Commission Exp  | pires                            |             |                       |          |               |        |                    |        |          |             | Ema                |                        |              |          |                |
|  | мо                               | DA          | NY                    | YR       |               | _      |                    | 7      | Area Co  | de          | D                  | aytime Te              | elephon      | e Numb   | er             |

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** HUGHES, VINCENT CITIZENS FOR From: To: 12/31/2001 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 3,145.13 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 250.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 250.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 5,750.00 7,500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 13,250.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 16,645.13 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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.

| Name of Filing Committee or Ca                             | ndidate                         |                                   | Reporting | Period |      |    |                   |
|--|---------------------------------|-----------------------------------|-----------|--------|------|----|-------------------|
| HUGHES, VINCENT CITIZENS F                                 | HUGHES, VINCENT CITIZENS FOR Fr |                                   |           |        | То   | •  | <u>12/31/2001</u> |
|  |                                 | -                                 |           | DATE   |      |    | AMOUNT            |
| Full Name of Contributing Commit<br>BOILERMAKERS LOCAL #13 | мо                              | DAY                               | YEAR      |        |      |    |                   |
| Mailing Address 2300 NEW                                   | FALLS ROAD                      |                                   |           |        |      | \$ | 250.00            |
| City NEWPORTVILLE  | State<br>PA                     | <b>Zip Code (Plus 4)</b><br>19056 | 12        | 10     | 2001 |    |                   |
|  |                                 |                                   |           |        |      | Г  | PAGE TOTAL        |

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

250.00

\$

| PART B<br>ALL OTHER CONTRIBUTIONS<br>\$50.01 TO \$250.00<br>Use this Part to itemize all other contributions with an aggregate value from<br>\$50.01 to \$250.00 in the reporting period.<br>(Exclude contributions from political committees reported in Part A) |           |  |  |    |      |      |    |        |
|---|-----------|--|--|----|------|------|----|--------|
| Name of Filing Committee or Candidate Reporting Period  |           |  |  |    |      |      |    |        |
|   | From: To: |  |  |    |      |      |    |        |
|   |           |  |  |    | DATE |      |    | AMOUNT |
| Full Name of Contributor  |           |  |  | мо | DAY  | YEAR |    |        |
| Mailing Address   |           |  |  |    |      |      | \$ | 0.00   |
| City State Zip Code (Plus 4)  |           |  |  |    |      |      |    |        |
| PAGE TOTAL  |           |  |  |    |      |      |    |        |
| Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00  |           |  |  |    |      |      |    |        |

# 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 |     |                  |                   |
|---|-------------------------------|---------------------------|--------------------------|--------|-----|------------------|-------------------|
| HUGHES, VINCENT CITIZENS FOR  |                               |                           | From:                    |        |     | То:              | <u>12/31/2001</u> |
|   |                               |                           |                          | DA     | TE  |                  | AMOUNT            |
| Full Name of Contributing Committee<br>PA SOCIETY OF PHYSICIAN ASSISTANT  | 'S PAC                        |                           |                          | мо     | DAY | YEAR             |                   |
| Mailing Address 200 N. 3RD STREET   | SUITE 1500                    |                           |                          |        |     |                  | <b>\$</b> 500.00  |
| City HARRISBURG   | <b>State</b><br>PA            | <b>Zip Code</b><br>17101  | e (Plus 4)               | 11     | 27  | 2001             |                   |
| Full Name of Contributing Committee PENNSYLVANIA EMERGENCY PHYSICIANS PAC |                               |                           |                          |        | DAY | YEAR             |                   |
| Mailing Address 200 N. 3RD STREET,  | 200 N. 3RD STREET, SUITE 1500 |                           |                          | 11     | 27  | <b>\$</b> 500.00 |                   |
| Full Name of Contributing Committee EYE PAC                               |                               |                           |                          |        | DAY | YEAR             |                   |
| Mailing Address 200 N. 3RD STREET-  | STE. 1500<br>State<br>PA      | <b>Zip Code</b><br>171051 | <b>e (Plus 4)</b><br>501 | 11     | 27  | 2001             | \$ 1,000.00       |
| Full Name of Contributing Committee PENNSYLVANIA ANESTHESIOLOGISTS        | PAC                           | •                         |                          | мо     | DAY | YEAR             |                   |
| Mailing Address 133 NORTH HEIDE L   | ANE<br>State<br>PA            | <b>Zip Code</b><br>15317  | e (Plus 4)               | 11     | 27  | 2001             | \$ 1,000.00       |
| Full Name of Contributing Committee BLUE PAC                              |                               |                           |                          |        | DAY | YEAR             |                   |
| Mailing Address P.O. BOX 10512 City HARRISBURG                            | <b>State</b><br>PA            | <b>Zip Code</b><br>191050 | <b>e (Plus 4)</b><br>512 | 11     | 29  | 2001             | <b>\$</b> 500.00  |
|   |                               |                           |                          |        |     |                  |                   |

| Full Name of Contributing Commi<br>PENNSYLVANIA PHYSICAL THER                |                           |                                   | мо   | DAY            | YEAR |                                  |
|--|---------------------------|-----------------------------------|------|----------------|------|----------------------------------|
| Mailing Address 201 B ERIE ST  | TREET                     |                                   |      |                |      | \$<br>250.00                     |
| City GROVE CITY  | <b>State</b><br>PA        | <b>Zip Code (Plus 4)</b><br>16127 | 12   | 14             | 2001 |                                  |
| Full Name of Contributing Commi<br>PENNSYLVANIA REALTORS PAC                 | ttee                      |                                   | мо   | DAY            | YEAR |                                  |
| Mailing Address 4501 CHAMBE  | 12                        | 29                                | 2001 | \$<br>1,000.00 |      |                                  |
| Full Name of Contributing Commi<br>DUBLIN ASSOCIATES                         | мо                        | DAY                               | YEAR |                |      |                                  |
| Mailing Address 212 N. 3RD S<br>City HARRISBURG                              | TREET, SUITE 203 State PA | <b>Zip Code (Plus 4)</b><br>17101 | 12   | 10             | 2001 | \$<br>500.00                     |
| Full Name of Contributing Commi  |                           |                                   | мо   | DAY            | YEAR |                                  |
| Mailing Address 3820 STATE S   | STREET State CA           | <b>Zip Code (Plus 4)</b><br>93105 | 12   | 10             | 2001 | \$<br>500.00                     |
| Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. |                           |                                   |      |                |      | \$<br><b>PAGE TOTAL</b> 5,750.00 |

# 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                    | ame of Filing Committee or Candidate |     |            |      | Reporting Period |       |      |                             |  |  |
|--|--------------------------------------|-----|------------|------|------------------|-------|------|-----------------------------|--|--|
| HUGHES, VINCENT CITIZENS FOR                             |                                      |     |            | Fron | n:               |       | То   | <b>::</b> <u>12/31/2001</u> |  |  |
|  |                                      |     |            |      | DA               | TE    |      | AMOUNT                      |  |  |
| Full Name of Contributor<br>HENRY HULSE                  |                                      |     |            |      | мо               | DAY   | YEAR |                             |  |  |
| Mailing 103 LAKEVIEW DRIVE                               |                                      |     |            |      |                  |       |      | <b>\$</b> 500.00            |  |  |
| City SCRANTON  | State                                | Zip | Code (Plus | 4)   | 12               | 13    | 2001 |                             |  |  |
|  | PA                                   | 185 | 18505      |      |                  |       |      |                             |  |  |
|  |                                      |     |            |      | Occupat          | ion   |      |                             |  |  |
| Employer Mailing Address/Principal Plac<br>Business      | e of                                 |     | City       |      |                  | State |      | Zip Code (Plus 4)           |  |  |
|  |                                      |     |            |      |                  |       |      |                             |  |  |
| Full Name of Contributor<br>LOUIS DENAPLES               |                                      |     |            |      | мо               | DAY   | YEAR |                             |  |  |
| Mailing 400 MILL STREET                                  |                                      |     |            |      |                  |       |      | <b>\$</b> 5,000.00          |  |  |
| City DUNMORE   | State                                | Zip | Code (Plus | 4)   | 12               | 14    | 2001 |                             |  |  |
|  | PA                                   | 185 | 512        |      |                  |       |      |                             |  |  |
| Employer Name  |                                      | 1   |            |      | Occupation       |       |      |                             |  |  |
| Employer Mailing Address/Principal Plac<br>Business      | e of                                 |     | City       |      |                  | State |      | Zip Code (Plus 4)           |  |  |
| Full Name of Contributor<br>JOSEPH J. AND LORRAINE DOLCE |                                      |     |            |      | мо               | DAY   | YEAR |                             |  |  |
| Mailing 331 SUNNYBROOK RC<br>Address                     | DAD                                  |     |            |      |                  |       |      | <b>\$</b> 2,000.00          |  |  |
| City BARRINGTON  | State                                | Zip | Code (Plus | 4)   | 12               | 10    | 2001 |                             |  |  |
| NJ 08007   |                                      |     | 07         |      |                  |       |      |                             |  |  |
| Employer Name  |                                      |     |            |      | Occupation       |       |      |                             |  |  |
| Employer Mailing Address/Principal Place of<br>Business  |                                      |     | City       |      | State            |       |      | Zip Code (Plus 4)           |  |  |
|  |                                      |     |            |      |                  | I     |      |                             |  |  |

\$

### PART E **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 | d   |      |    |          |      |
|---------------------------------------|---------------------|------------|---------|-----------|-----|------|----|----------|------|
|                                       |                     |            | From:   |           |     | То:  | D: |          |      |
|                                       |                     |            |         | D         | ATE |      |    | AMOUNT   |      |
| Full Name                             |                     |            |         | мо        | DAY | YEAR |    |          |      |
| Mailing Address                       |                     |            |         |           |     |      | \$ |          | 0.00 |
| City                                  | State               | Zip Code ( | Plus 4) |           |     |      |    |          |      |
| Receipt Description                   | Receipt Description |            |         |           |     |      |    |          |      |
| Enter Grand Total of Part E on Sched  | le T. Detailed Sum  | mary Page  | Section | 4         |     |      |    | PAGE TOT | AL   |
|                                       |                     | , i uge,   | 2221011 |           |     |      | \$ |          | 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   | <b>Reporting Period</b> |     |                   |
|---|-------------------------|-----|-------------------|
| HUGHES, VINCENT CITIZENS FOR  | From:                   | To: | <u>12/31/2001</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  | riod (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 (<br>amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1 |                         | \$  | 0.00              |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

### VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candidate                                   |       |                   | Reporting | Period   |      |     |         |
|---|-------|-------------------|-----------|----------|------|-----|---------|
|   |       |                   | From:     |          |      | То: |         |
|   |       |                   |           | DATE     |      | АМС | DUNT    |
| Full Name of Contributor  |       |                   | мо        | DAY      | YEAR |     |         |
| Mailing Address   |       |                   |           |          |      | \$  | 0.00    |
| City  | State | Zip Code (Plus 4) | )         |          |      |     |         |
| Description of Contribution:  |       |                   |           |          |      | -   |         |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detai |       |                   | iled Sum  | mary Pag | je,  | PAG | E TOTAL |
| Section 2.  |       |                   |           |          | 4    | ;   | 0.00    |

### PAGE 12

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

| Name of Filing Committee or Candidate                              | e     |  |            |           | Rej       | porting P | eriod    |                |    |        |
|--|-------|--|------------|-----------|-----------|-----------|----------|----------------|----|--------|
|  |       |  |            |           | From: To: |           |          |                |    |        |
|  |       |  |            |           |           |           | DATE     |                |    | AMOUNT |
| Full Name of Contributor   |       |  |            |           |           | мо        | DAY      | YEAR           |    |        |
| Mailing Address  |       |  |            |           |           |           |          |                | \$ | 0.00   |
| City   | State |  | Zip Code(F | Plus 4)   |           |           |          |                |    |        |
| Employer of Contributor  |       |  |            |           |           | Occupat   | tion     |                | •  |        |
| Employer Mailing Address/Principal Place of City State<br>Business |       |  |            | Zip<br>4) | Code(Plus | Descri    | ption of | f Contribution |    |        |

|   |                    |              | I          |
|---|--------------------|--------------|------------|
| Enter Grand Total of Part G on Schedule II, J | In-Kind Contributi | ons Detailed | PAGE TOTAL |
| Summary Page, Section 3.                      |                    |              | 0.00       |
|   |                    |              |            |

# SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate           |                                     |                                   | Reporti   | ng Period                        |      |          |                   |
|---|-------------------------------------|-----------------------------------|---|----------------------------------|------|----------|-------------------|
| HUGHES, VINCENT CITIZENS FOR                    |                                     |                                   | From  |                                  |      | То:      | <u>12/31/2001</u> |
|   |                                     |                                   |   | DATE                             |      |          | AMOUNT            |
| <b>To Whom Paid</b><br>J SALTER CONSULTING, LLC |                                     |                                   | мо  | DAY                              | YEAR |          |                   |
| Mailing Address 7478 RHOADS STRE                | EET, SUITE A                        |                                   | 11  | 30                               | 2001 | \$       | 200.00            |
| City PHILADELPHIA                               | <b>State</b><br>PA                  | <b>Zip Code (Plus 4)</b><br>19151 |   | <b>ition of Exp</b><br>SSIONAL F |      | 1        |                   |
| <b>To Whom Paid</b><br>VERIZON                  |                                     |                                   | мо  | DAY                              | YEAR |          |                   |
| Mailing Address PO BOX 8585                     |                                     |                                   | 12  | 4                                | 2001 | \$       | 117.10            |
| City PHILADELPHIA                               | Description of Expenditure<br>PHONE |                                   |   |                                  |      |          |                   |
| To Whom Paid<br>VINCENT HUGHES                  |                                     |                                   |   | DAY                              | YEAR |          |                   |
| Mailing Address 4601 MARKET STRE                | ET                                  |                                   | 12  | 4                                | 2001 | \$       | 94.00             |
| City PHILADELPHIA                               | State<br>PA                         | <b>Zip Code (Plus 4)</b><br>19104 | Description of Expenditure<br>TRAVEL & BUSINESS REIMBURSEMENT |                                  |      |          |                   |
| To Whom Paid<br>ROYBN BASS                      | <u>.</u>                            | ·                                 | мо  | DAY                              | YEAR |          |                   |
| Mailing Address 5038 RACE STREET                |                                     |                                   | 12  | 4                                | 2001 | \$       | 58.00             |
| City PHILADELPHIA                               | <b>State</b><br>PA                  | <b>Zip Code (Plus 4)</b><br>19139 |   | tion of Exp<br>& PARKIN          |      | BURSEMEN | Т                 |
| To Whom Paid<br>VICTORIA JOHNSON                |                                     |                                   | мо  | DAY                              | YEAR |          |                   |
| Mailing Address                                 | lailing Address                     |                                   |   | 4                                | 2001 | \$       | 14.00             |
| City  | State                               | Zip Code (Plus 4)                 |   | tion of Exp                      |      | BURSEMEN | Т                 |

| To Whom Paid<br>MABEL L WILSON   |             |                                   | мо  | DAY  | YEAR   |    |  |          |
|--|-------------|-----------------------------------|---|--|--|----|--|----------|
| Mailing Address 6020 LANSDOWNE AVENUE  |             |                                   | 12  | 6  | 2001   | \$ |  | 6.00     |
| City     PHILADELPHIA     State     Zip Code (Plus 4)       PA     19151   |             |                                   |   | tion of Exp<br>Y SEALS   | penditure                                      | 1  |  |          |
| To Whom Paid<br>CHARLOTTE'S CLASSIC CATERING   |             |                                   | мо  | DAY  | YEAR   |    |  |          |
| Mailing Address  |             |                                   | 12  | 17   | 2001   | \$ |  | 1,617.00 |
| City   | State       | Zip Code (Plus 4)                 |   | Description of Expenditure<br>CATERING EXPENSE                             |  |    |  |          |
| To Whom Paid<br>VINCENT HUGHES   |             |                                   | мо  | DAY  | YEAR   |    |  |          |
| Mailing Address 4601 MARKET STREET   |             |                                   | 12  | 19   | 2001   | \$ |  | 139.50   |
| City PHILADELPHIA  | State<br>PA | <b>Zip Code (Plus 4)</b><br>19104 | Description of Expenditure<br>TRAVEL & BUSINESS REIMBURSEMENT |  |  |    |  |          |
| To Whom Paid<br>TASTYCAKE GIFT DEPT  |             |                                   |   |  |  |    |  |          |
|  |             | 1                                 | мо  | DAY  | YEAR   |    |  |          |
|  | <u>.</u>    | 1                                 | <b>мо</b><br>12   | <b>DAY</b> 20  | <b>YEAR</b> 2001                               | \$ |  | 2,582.50 |
| TASTYCAKE GIFT DEPT  | State       | Zip Code (Plus 4)                 | 12<br>Descrip   |  | 2001   |    |  | 2,582.50 |
| TASTYCAKE GIFT DEPT Mailing Address  | State       | Zip Code (Plus 4)                 | 12<br>Descrip   | 20<br>otion of Exp   | 2001   |    |  | 2,582.50 |
| TASTYCAKE GIFT DEPT Mailing Address City To Whom Paid  | State       | Zip Code (Plus 4)                 | 12<br>Descrip<br>HOLIDA                                       | 20<br>Dition of Exp<br>AY GIFTS  | 2001<br>penditure                              |    |  | 2,582.50 |
| TASTYCAKE GIFT DEPT Mailing Address City To Whom Paid PAT WELLS  | State       | Zip Code (Plus 4)                 | 12<br>Descrip<br>HOLIDA<br>MO<br>12<br>Descrip                | 20<br>btion of Exp<br>AY GIFTS<br>DAY                                      | 2001<br>penditure<br>YEAR<br>2001<br>penditure | \$ |  |          |
| TASTYCAKE GIFT DEPT Mailing Address City To Whom Paid PAT WELLS Mailing Address  |             |                                   | 12<br>Descrip<br>HOLIDA<br>MO<br>12<br>Descrip                | 20<br>ption of Exp<br>AY GIFTS<br>DAY<br>20<br>ption of Exp                | 2001<br>penditure<br>YEAR<br>2001<br>penditure | \$ |  |          |
| TASTYCAKE GIFT DEPT<br>Mailing Address<br>City<br>To Whom Paid<br>PAT WELLS<br>Mailing Address<br>City<br>To Whom Paid | State       |                                   | 12<br>Descrip<br>HOLIDA<br>MO<br>12<br>Descrip<br>CONSU       | 20<br>bition of Exp<br>AY GIFTS<br>DAY<br>20<br>bition of Exp<br>LTANT FEE | 2001<br>penditure<br>YEAR<br>2001<br>penditure | \$ |  |          |

| To Whom Paid<br>THE BLACK UNITED FUND OF PENNSYLVANIA |                        |                                   | мо  | DAY                             | YEAR |    |            |
|---|------------------------|-----------------------------------|-----|---------------------------------|------|----|------------|
| Mailing Address 2227 N BROAD STREET                   |                        |                                   | 12  | 21                              | 2001 | \$ | 1,000.00   |
| City PHILADELPHIA                                     | State<br>PA            | <b>Zip Code (Plus 4)</b><br>19132 | · · | <b>ition of Exp</b><br>IBUTIONS |      | 1  |            |
|   |                        |                                   |     |                                 |      |    | PAGE TOTAL |
| Enter Grand Total of Expend                           | litures on Page 1, Rej | port Cover Page, Item D           | -   |                                 |      | \$ | 7,233.10   |
|   |                        |                                   |     |                                 |      |    |            |
|   |                        |                                   |     |                                 |      |    |            |
|   |                        |                                   |     |                                 |      |    |            |
|   |                        |                                   |     |                                 |      |    |            |