Campaign Finance Report

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

											<i>(</i>)			
Filer Identificat Number :	ion 2002	041			Repor Filed E		CANDI	DATE	СОМІ	MITTEE	✓	LOBI	BYIST	
Name of Filing O	Committee, Candid	ate or Lo	obbyist:		STREET	, SH/	ARIF FRIE	NDS OF						
Street Address:	1600 JOHN F	KENNE	DY BLVD S	TE 200)		_							
City:	PHILADELPHI/	4					State: PA Zip Code: 1910					103		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM		POST- 3	3.	AMENDMENT REPORT?		Yes	V No	D
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		POST- 6	ö.	TERMINA REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7. X	Year 2013				NG METHO			PAPER		\checkmark	DISK	TTE
Name of Office S	Sought by Candidat	te:			-	-	DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEAR			DEM	1	51
							11	5	5 2013		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FO	R OFFIC	e use	ONLY	
Expenditures	s from:		1 1	20	013 T	0	12	31	1 2013					
A. Amount Bro	ught Forward Fron	n Last R	eport			\$			0.00					
B. Total Monet	dule I)	\$	\$ 550.00											
C. Total Funds Available (Sum Of Lines A and B)									550.00					
D. Total Expenditures (From Schedule III)									6.00					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			544.00					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$			0.00	_				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		\$			4,500.00					
				AFF	IDAVI	T SE	CTION							
	s a Committee rep		-					• •		-				
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedules	s filed on	paper	or by elect	ronic med	lium, are to	the best o	f my know	ledge	and bel	lef , true
Sworn to and subs	scribed before me this day of	5	20						Signatur	e of Perso	n Submitti	ing Rep	oort	
	Signatu	re				-				Prin	ted Name			
My Commission E	-									Ema	il			
	мо	D/	AY	YR				Area	Code	Daytim	e Telepho	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee, C	andid	ate shall	sign her	е.					
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ief this	political	comm	iittee has n	ot violate	d any provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 1333,
Sworn to and subso	cribed before me this								S	ignature o	of Candida	te		
	day of 					_				Printe	d Name			
	Signature					_								
My Commission Exp	pires									Ema	il			
	мо	D	۹Y	YR		-		Area Co	ode	Da	aytime Te	elephor	ne Numb	ber

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** STREET, SHARIF FRIENDS OF From: <u>1/1/2013</u> **To:** <u>12/31/2013</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 50.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 50.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 500.00 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 \$ 550.00 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 Candidate			Reporting Period					
				From: To:				
		·			DATE			AMOUNT
Full Name of Contributing Committee				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 B 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 Candida	te		Rep	orting Pe	eriod					
STREET, SHARIF FRIENDS OF				m:	<u>1/1</u>	/2013 T o	o: <u>12/31/2013</u>			
					DATE			AMOUNT		
Full Name of Contributor Kevin Greenberg				мо	DAY	YEAR				
Mailing Address 1600 John F. Kenn	edy Blvd., Suite 200						\$	50.00		
City Philadelphia	State	Zip Code (Plus 4)	10	1	2013				
	PA	19103								
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								50.00		

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					
						То:		
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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					
STREET, SHARIF FRIENDS OF			From:		<u>1/1/2</u>	<u>013</u> To) :	<u>12/31/2013</u>	
				DA	TE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	500.00	
Linebarger Blair Goggan & Sampson LLI	P						Ť	500100	
Mailing Address 1600 John F. Kenne	dy Blvd., Suite 900			10	26	2013			
City Philadelphia	State	Zip Code (Plus	; 4)						
	PA	19103							
Employer Name Linebarger Blair Gogg	an & Sampson LLP			Occupat	ion	Law Fir	m		
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	ode (Plus 4)	
1600 John F. Kennedy Blvd., Suite 900		Philadelph	ia		PA		1910	3	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary Page,	Sectio	on 3.			\$	PAGE TOTAL 500.00	

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 Peric	d				
			From: To:						
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		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 Period		
STREET, SHARIF FRIENDS OF	From:	<u>1/1/2013</u> то:	<u>12/31/2013</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
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	riod (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, I		\$	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			AMOUNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,	F	PAGE TOTAL	
						\$	0.00	

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

Name of Filing Committee or Candidate				porting F	Period		
						То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti				
STREET, SHARIF FRIENDS OF			From	<u>12/31/2013</u>			
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Wells Fargo			-				
Mailing Address 1700 Market	Street		11	30	2013	\$	6.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19103	Bank Fe	ee			
	_						PAGE TOTAL
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item I).			\$	6.00

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

Name of Filing Committee or Candidate				Reporting Period						
STREET, SHARIF FRIENDS OF From					<u>1/1/2013</u>	То:	<u>1</u>	2/31/2013		
					DATE			tstanding ance of Debt		
Name of Creditor Kevin Greenberg				мо	DAY	YEAR				
Mailing Address 1600 John F. Kenne	dy Blvd., Suite 200			4	12	2010	, \$	4,500.00		
City Philadelphia	State	Zip Code (P	Plus 4)	Descript	tion of Del	ot				
	PA	19103		Loan						
								PAGE TOTAL		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	4,500.00		