Campaign Finance Report

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

									-						
Filer Identificat Number :	ion 8100)155			Report Filed B		CANDI	DATE		COM	1ITTEE	✓	LOBE	BYIST	
Name of Filing O	Committee, Candid	late or Lo	bbyist:		DISTRIC	ст со	UNCIL 4	7							
Street Address:	PO BOX 2856	56													
City:	PHILADELPHI	A					State:	PA			Zip Co	de: 19	149		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE		30 DA PRIMA		POST-	3.		AMENDN REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pre		30 DA ELECT		POST-	6.		TERMIN REPORT		Yes	No	 Image: A start of the start of
report type)	ANNUAL REPORT	7. X	Year 2014				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	- Sought by Candida	nte:					DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
		EMDLY					мо	DAY	YE	AR	2	STS	DEN	1	51
SENATOR IN T	HE GENERAL ASS	EMBLI					11		4	2014		(SEE INS	TRUCTIO	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YE.	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:	1	.1 25	2	014 T	0	12	3	31	2014					
A. Amount Bro	ught Forward Fro	m Last Re	eport			\$			6,1	84.22					
B. Total Monet	ary Contributions	And Rece	eipts (From	1 Sche	dule I)	\$			9	25.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			7,1	09.22					
D. Total Expen	ditures (From Sch	edule III	:)			\$				0.00					
E. Ending Cash	Balance (Subtrac	t Line D l	From Line	C)		\$			7,1(09.22					
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	s (From S	chedule IV	')		\$				0.00					
				AFF	IDAVI	Γ SE	CTION								
PART I - If this i	s a Committee rep	ort, treas	surer sign	here.	If this is	a Car	ndidate re	eport, c	andid	ate sig	jn here.				
I swear (or affirm correct and compl) that this report, inc ete.	luding the	attached sc	hedule	s filed on j	paper	or by elect	ronic me	dium,	are to t	he best o	f my know	ledge	and beli	ef , true
Sworn to and subs	scribed before me thi day of	s	20						Si	gnature	e of Perso	n Submitt	ing Rep	ort	
						-					Prin	ted Name			
My Commission E	Signatı xpires	ıre									Ema	il			
-	мо	DA	Y	YR		-		Are	a Code	9		ne Telepho	one Nu	mber	
Part II- If this is	a report of a can	didate's a	authorized	Comn	nittee, Ca	andid	ate shall	sian he	ere.						
I swear (or affirm) No 320) as amend) that to the best of ed.	my knowle	dge and beli	ef this	political	comm	ittee has n	ot violat	ed any	/ provis	ions of th	e act of Ju	ne 3,1	937 (P.L	1333,
Sworn to and subso	cribed before me this									c	ionature	of Candida	te		
	day of		20			_				5					
						-					Printe	ed Name			
My Commission Exp	Signature pires										Ema	il			
	мо	DA	Y	YR	1			Area (Code		D	aytime Te	lephon	e Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period			
DISTRICT COUNCIL 47	From:	<u>11/25/20</u>	14 To:	b: 12/31/2014	
				<u>12/01/2011</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			•		
TOTAL for the Reporting	J 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	\$	0.00			
3. Contributions Received Over \$250.00 (From Part C and Part D)					
Contributions Received From Political Committees (Part C)			\$	925.00	
All Other Contributions (Part D)			\$	0.00	
TOTAL for the Reporting	J Period	(3)	\$	925.00	
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)					
TOTAL for the Reporting	J 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			\$	925.00	

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.

Name of Filing Committee or Candida	Reporting Period						
			From:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4	+)				
						Γ	PAGE TOTAL

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

\$

0.00

Use this Part to ite	emize all other 0.01 to \$250.	1 TO \$250.00 r contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			ʻom
Name of Filing Committee or Candidat	e		Rep	orting P	eriod			
			Fror	m:		Тс):	
					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 S	Schedule I, Detail	ed Summary Pag	e, Se	ection 2	2.		\$	0.00

PAGE 5

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 Report				rting Period						
DISTRICT COUNCIL 47 From:					<u>11/25/2014</u> To: <u>12/31/2014</u>					
				DA	TE		Α	MOUNT		
Full Name of Contributing Committee AFSCME DC47 PAC FUND	ee			мо	DAY	YEAR				
Mailing Address 1606 WALNUT S	STREET						\$	925.00		
City PHILADELPHIA	State PA	Zip Cod 19103	e (Plus 4)	11	20	2014				
						ſ		PAGE TOTAL		
Enter Grand Total of Part C on S	chedule I, Detai	iled Summary Pa	age, Sectio	n 3.			\$	925.00		

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	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

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	Name of Filing Committee or Candidate Repor			rting Period					
			From:			То:			
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	Section				\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
DISTRICT COUNCIL 47	From:	<u>11/25/2014</u> то:	<u>12/31/2014</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 PAR	TF)		
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Reporting Period					
	From:			То:					
				DATE		АМО	UNT		
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	je,	PAGE	TOTAL		
					4	6	0.00		

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Place of Business City State						Zip Code(Plus 4) Descrip			ption o	f Contribution

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
			From			То:	
			DATE				AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	0.00