Campaign Finance Report

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

| Filer Identificati Number : | on 9900 | 251 | | | Rep File | | | CAND | IDATE | | СОМ | 4ITTEE | ✓ | LOBE | YIST | | |
|--|----------------------------------|-----------|------------------------|---------|-------------|------|--------|--------------------|-----------|-------------|------------|----------------------|-----------------------------|----------|----------|---------|----------|
| Name of Filing C | Committee, Candid | ate or Lo | obbyist: | | WAF | RD 1 | l6 DE | M EXEC | СОМ | | | | | | | | |
| Street Address: | 2315 W CUME | BERLANI | O ST | | | | | | | | | | | | | | |
| City: | PHILADELPHI/ | 4 | | | | | | State: | PA | PA | | | Zip Code: 19132-0000 | | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | Y PRE | - 2 | 2. | 30 DA | | POST- | 3. X | | AMENDMENT REPORT? | | Yes | No | | \ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA' ELECTION | y pre | <u>-</u> | 5. | 30 DA | | POST- | 6. | | TERMINA REPORT | | Yes | No | | \ |
| report type) | ANNUAL REPORT | 7. | Year 2015 | | | | | NG METH CHECK C | | | | PAPER | | | DISKE | TTE | |
| Name of Office S | - Sought by Candida | te: | - | | _ | | | DATE (|)F ELE | CTIC | N | District Number | Office Code | Par | ty Code | Coun | |
| | | | | | | | | МО | DAY | YI | EAR | Number | legac | DEM | l | 51 | |
| | | | | | | | | 11 | | 3 | 2015 | | (SEE IN | STRUCTIO | NS FOR (| CODES |) |
| | Receipts and | МО | DAY | YEAR | 2 | | | МО | DAY | Y | EAR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | from: | | 5 5 | 2 | 015 | Т | 0 | 6 | 5 | 8 | 2015 | | | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | | \$ | | | 2, | 093.91 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Sche | | | | | | | \$ | | | 19, | 170.00 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) \$ 21,26 | | | | | | | | 263.91 | | | | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | | \$ | | | 7,0 | 94.80 | | | | | | |
| E. Ending Cash | Balance (Subtract | Line D | From Line (| C) | | | \$ | | | 14,1 | 69.11 | | | | | | |
| F. Value Of In- | Kind Contributions | Receive | ed (From So | chedu | le II |) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV |) | | | \$ | | | | 0.00 | | | | | | |
| | | | | AFF | IDA | ١٧٧ | T SE | CTION | | | | | | | | | |
| | s a Committee rep | | _ | | | | | | | | | | | | | | |
| I swear (or affirm) correct and complete |) that this report, incl ete. | uding the | attached sch | nedule | s filed | d on | paper | or by elec | tronic m | edium | , are to t | he best o | f my kno | wledge a | and beli | ef , tr | ue |
| Sworn to and subs | cribed before me this day of | ; | 20 | | | | | | | 5 | Signature | of Perso | n Submit | ting Rep | ort | | - |
| | - | | _ | | | | - - | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | Signatu kpires | re | | | | | | | | | | Ema | il | | | | - |
| | МО | DA | AY | YR | | | _ | | Ar | ea Co | le | Daytim | e Teleph | none Nui | nber | | _ |
| Part II- If this is | a report of a cand | lidate's | authorized | Comn | nitte | e, C | andid | ate shall | sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of n | ny knowle | edge and beli | ef this | polit | ical | comm | ittee has ı | not viola | ted ar | y provis | ions of th | e act of J | une 3,19 | 937 (P.L | . 133 | 3, |
| Sworn to and subsc | ribed before me this | | | | | | | | | | s | ignature o | of Candid | ate | | | - |
| | day of | | | | | | _ | | | | | Printa | d Name | | | | - |
| | Signature | | | | | | - | | | _ | | | | | | | _ |
| My Commission Exp | _ | | | | | | | | | | | Ema | il | | | | _ |
| | МО | D/ | AY | YR | l | | - | | Area | Code | | Da | aytime T | elephon | e Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| , - | | | | |
|--|-----------|----------------|--------------|-----------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| WARD 16 DEM EXEC COM | From: | <u>5/5/201</u> | <u>5</u> To: | 6/8/2015 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 170.00 |
| 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 | Period | (2) | \$ | 0.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 18,000.00 |
| All Other Contributions (Part D) | | | \$ | 1,000.00 |
| TOTAL for the Reporting |) Period | (3) | \$ | 19,000.00 |
| 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 | | | \$ | 19,170.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | his Part to itemize onl with an aggregate val | - | | | - | | | |
|---------------------------|--|-------------------|-----|---------|--------|------|----|------------|
| Name of Filing Comm | ittee or Candidate | | Re | porting | Period | | | |
| | | | Fre | om: | | То | : | |
| | | 1 | | | DATE | | | AMOUNT |
| Full Name of Contribution | ng 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

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 Candid | ate | | Rep Fro | | | | | |
|------------------------------------|-------|-------------------|------------|----|------|------|----------|-------|
| | | | | | DATE | | AN | 4OUNT |
| Full Name of Contributor | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ \$ | 0.00 |
| City | State | Zip Code (Plus 4) | 1 | | | | | |

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

PAGE TOTAL \$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 | | | | |
|---|----------------------|----------------------------|-----------------|-----------|----------------|------|-----------|------------|
| WARD 16 DEM EXEC COM | | | From: | <u>5/</u> | <u>/5/2015</u> | То: | | 6/8/2015 |
| | | | | DA | TE | | | AMOUNT |
| Full Name of Contributing Committee Allan Doomb for City Council | | | | МО | DAY | YEAR | | |
| Mailing Address 1845 Walnut St Ste | 2200 | | | | | | \$ | 3,000.00 |
| City Philadelphia | State PA | Zip Code 19103 | e (Plus 4) | 5 | 18 | 2015 | 5 | |
| Full Name of Contributing Committee GENESIS IV | | | | мо | DAY | YEAR | | |
| Mailing Address 236 N 59 ST | | | | _ | | | \$ | 11,500.00 |
| City PHILADELPHIA | State PA | Zip Code 19139-0 | (Plus 4) | 5 | 11 | 2015 | | |
| Full Name of Contributing Committee Citizens for Jewell Williams | | | | МО | DAY | YEAR | | |
| Mailing Address 2343 N Smedley St | | | | _ | | | \$ | 3,500.00 |
| City Philadelphia | State PA | Zip Code 19132 | e (Plus 4) | 5 | 17 | 2015 | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Sche | dule I, Detailed Sun | nmary Pa | ige, Sectio | n 3. | | | \$ | 18,000.00 |

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 | | | |
|--|---------------|-----------|--------------|---------|-----------|--------------|---------------|----------|----------|
| WARD 16 DEM EXEC COM | | | | Froi | m: | <u>5/5/2</u> | <u>015</u> To | : | 6/8/2015 |
| | | | | | D/ | ATE | | АМО | DUNT |
| Full Name of Contributor Frank Dicicco | | | | | мо | DAY | YEAR | | |
| Mailing 1207 S 11th St | | | | | _ | | 2015 | \$ | 1,000.00 |
| City Philadelphia | State | Zi | p Code (Plus | 4) | 5 | 17 | 2015 | | |
| | PA | 19 | 9147 | | | | | | |
| Employer Name City of Phila | - | • | | | Occupat | cion (| City of P | hila | |
| Employer Mailing Address/Principal Pla Business | ce of | | City | | • | State | | Zip Code | (Plus 4) |
| City of Phila | | | City of Ph | nila | | PA | | 00000 | |
| Enter Grand Total of Part C on Sch | edule I, Deta | iled Sumn | mary Page, | Section | on 3. | | | | 1,000.00 |

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 Co | andidate | | Report | ting Perio | bd | | | |
|--------------------------------|-----------------------|------------------|---------|------------|-----|------|----|----------|
| | | | From: | | | То: | | |
| | | | | D | ATE | | AN | 10UNT |
| Full Name | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | • | | | | | | |
| Enter Grand Total of Part E or | Schedule T Detaile | d Summary Page | Section | 4 | | | PA | GE TOTAL |
| Lines Grana Fotal of Fair 2 of | r benedule 1/ betanet | z Sammary r age, | Section | •• | | | \$ | 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 | | |
|--|------------------|----------------------------|----------|
| WARD 16 DEM EXEC COM | From: | <u>5/5/2015</u> To: | 6/8/2015 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | PER 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 Candidat | :e | | Reporting | g Period | | | |
|--------------------------------------|--|-----------------------|-------------|-------------|-------|-----------|------------|
| | Il Name of Contributor ailing Address by State Zip Code (Plus 4) | | | From: | | | |
| | | | | 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 Sch | andula II. In-Kir | nd Contributions Data | ilad Sum | mary Pag | | | DACE TOTAL |
| Section 2. | iedule II, III-KII | ia contributions Deta | iiieu Suiii | iliai y Pag | , je, | | PAGE TOTAL |
| | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | | Re | porting l | Period | | | |
|--|-------------|---------|------------|---------|--------|-----------|-----------|-------|--------|------------------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | • | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(I | Plus 4) | | | | | | |
| Employer of Contributor | | | | | | Occupa | ition | | • | |
| Employer Mailing Address/Principal Plac Business | ce of | City | | State | | Zip 4) | Code(Plus | Descr | iption | of Contribution |
| Enter Grand Total of Part G on Sch Summary Page, Section 3. | edule II, I | in-Kind | Contributi | ons De | etaile | ed | | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Period | | | | |
|---------------------------------------|------------------|-----------------|-----|-----------------|--|
| WARD 16 DEM EXEC COM | From | <u>5/5/2015</u> | То: | <u>6/8/2015</u> | |

| | | | DATE | | | AMOUNT |
|--|-----------------------------------|---|---|---|--|---|
| | | мо | DAY | YEAR | | |
| | | 5 | 20 | 2015 | \$ | 200.00 |
| PA | Zip Code (Plus 4) 19132 | | | | | |
| | | МО | DAY | YEAR | | |
| e | | 5 | 20 | 2015 | \$ | 1,288.00 |
| City Philadelphia State Zip Code (Plus 4) PA 19140 | | | | | | |
| To Whom Paid Citizens Bank | | | | YEAR | | |
| | | 5 | 29 | 2015 | \$ | 25.00 |
| PA | Zip Code (Plus 4) 19121 | Description of Expenditure Monmthly Bank Fee | | | | |
| | | МО | DAY | YEAR | | |
| | | 5 | 8 | 2015 | \$ | 150.00 |
| PA | Zip Code (Plus 4) 19132 | | | enditure | | |
| | | МО | DAY | YEAR | | |
| Mailing Address 747 W Allegheny bAve | | | 5 | 2015 | \$ | 431.80 |
| PA | Zip Code (Plus 4) 00000 | 1 | | | | |
| | e tate PA tate PA | PA 19132 Code (Plus 4) | tate Zip Code (Plus 4) Descrip Election | tate Zip Code (Plus 4) Description of Exp Election Day Work MO | Tate PA Sip Code (Plus 4) Description of Expenditure Election Day Work MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Election Day Food MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Election Day Food MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Monmthly Bank Fee MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Monmthly Bank Fee MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Accounting Fees MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Accounting Fees MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Accounting Fees MO DAY YEAR Sign Code (Plus 4) Description of Expenditure Accounting Fees Sign Code (Plus 4) Description of Expenditure Sign Code (Plus 4) Description Sign Code (Plus 4) Description Sign Code (Plus 4) Sign Code (Plus 4) | tate PA 19132 Description of Expenditure Election Day Work MO DAY YEAR |

| To Whom Paid Andrew Smith | YEAR | | |
|---|----------------------------|----------|------------|
| | | | |
| Mailing Address 2252 N Woodstockm St 5 15 | 2015 | \$ | 5,000.00 |
| City Philadelphia State Zip Code (Plus 4) Description of Expe | Description of Expenditure | | |
| | Election Dayn Operation | | |
| | | | PAGE TOTAL |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | \$ | 7,094.80 |
| | | <u> </u> | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |