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 :		Report Filed By :		CANDI	DATE		СОМ	ITTEE	✓	LOB	BYIST						
Name of Filing C	Committee, Candid	date or L	obbyist:		Frie	nds	of Joa	anna McC	Clinton								
Street Address:	100 S. Broad	Street,	Ste 1216														
City:	Philadelphia							State:	PA			Zip Cod	ie: 19	9110			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- [2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣- !	5.	30 DA		POST-	6.		TERMINATION YEREPORT?			No		√
report type)	ANNUAL REPORT	7.	Year 2015					IG METHO				PAPER		V	DISKE	TTE	
Name of Office S	Sought by Candida	nte:	•					DATE 0	F ELE	CTIO	N	District Number	Office Code	Pai	ty Code	Coun	
	, canala							МО	DAY	YE	AR	Number	Code			Code	•
								8		11	2015		(SEE IN	STRUCTI	ONS FOR (ODES)
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		6 11	2	015	Т	0	7		27	2015						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$			12,5	51.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			12,5	51.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$			8,6	81.10						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$			3,8	69.90						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$			2,5	00.00			•			
				AFF	IDA	\VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here.	If thi	is is	a Can	ididate re	eport, o	candi	date sig	n here.					
I swear (or affirm) correct and comple) that this report, inc ete.	cluding the	e attached scl	nedule	s filed	d on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , tr	ue.
Sworn to and subs	cribed before me thi	is	20							S	ignature	of Perso	n Submit	ting Re	oort		_
	- Cianata						- -					Prin	ted Name	e			-
My Commission Ex	Signati opires	ıre										Ema	il				-
	мо	D	AY	YR			-		Are	ea Cod	e	Daytim	e Telepi	none Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of	my knowl	edge and beli	ef this	polit	ical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this	:									s	ignature o	of Candid	ate			-
	day of						_					Drint-	d Name				_
	Signature						-					Printe	d Name				
My Commission Exp	_											Ema	il				_
	мо	D	AY	YR	1		-		Area	Code		Da	aytime T	elephor	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	-			
Name of Filing Committee or Candidate	Reporting	Period		
Friends of Joanna McClinton	From:	6/11/201	<u>5</u> To:	<u>7/27/2015</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	1,625.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	500.00
All Other Contributions (Part B)			\$	2,126.00
TOTAL for the Reporting	Period	(2)	\$	2,626.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	6,500.00
All Other Contributions (Part D)			\$	1,800.00
TOTAL for the Reporting	Period	(3)	\$	8,300.00
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 antotals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1			\$	12,551.00

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 Candidate	Reporting	Period		
Friends of Joanna McClinton	From:	6/11/2015	То:	<u>7/27/2015</u>
		DATE		AMOUNT

				DATE		AMOUNT
Full Name of Contributing Committ 1776 PAC	ee		МО	DAY	YEAR	
Mailing Address 3031 A Walt	on Road., Suite 201		_			\$ 250.00
City Plymouth Meeting	State PA	Zip Code (Plus 4) 19462	7	24	2015	
Full Name of Contributing Committ Friends of Charelle Parker	ee		мо	DAY	YEAR	
Mailing Address 8509 Temple	e Road					\$ 250.00
City Philadelphia	State PA	Zip Code (Plus 4) 19150	7	22	2015	

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

PAGE TOTAL \$ 500.00

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 Candidate Rep				Reporting Period					
Friends of Joanna McClinton			Fro	m:	6/11/2	2015 T o) :	7/27/2015	
					DATE			AMOUNT	
Full Name of Contributor Mr. Micah Mahjoubian				МО	DAY	YEAR			
Mailing Address 1011 Cherry Street							\$	1.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19107		6	24	2015			
Full Name of Contributor Mr. Micah Mahjoubian				МО	DAY	YEAR			
Mailing Address 1011 Cherry Street							\$	100.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19107		6	30	2015			
Full Name of Contributor Mr. Louise Montoya				мо	DAY	YEAR			
Mailing Address 1942 Forrest Ave							\$	100.00	
City Morton	State PA	Zip Code (Plus 4) 19070		7	8	2015			
Full Name of Contributor Mr. Michael Conley				МО	DAY	YEAR			
Mailing Address 406 S. Narberth Av	e						\$	100.00	
City Narberth	State PA	Zip Code (Plus 4) 19072		7	8	2015			
Full Name of Contributor Ms. Noel Ann DeSantis				МО	DAY	YEAR			
Mailing Address 4010 Lauriston Stre	eet						\$	75.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19128		7	8	2015			

State Zip Code (Plus 4) The part of Contributor PA 19010 The part of Contributor The part of Contributor PA 19010 The part of Contributor T								
Mailing Address 13 N. Warner Avenue	Full Name of Contril	butor						
City Bryn Mawr State Zip Code (Pius 4) 19010 7 8 2015 100.00	Ms. Rosalind Sutch				МО	DAY	YEAR	
PA	Mailing Address	13 N. Warner Avenu	ne					\$ 100.00
Full Name of Contributor Ms. Toni Holness Mailing Address 1600 S. Eads Street City Arlington State VA 22202 Full Name of Contributor Ms. Tamitra Tann Mailing Address 125 Winterberry Way City Depford State ND 216 City Philadelphia State PA 19130 Full Name of Contributor Ms. Robert Vogel Mol DAY VEAR State Zip Code (Plus 4) 08096 Mol DAY VEAR State ND 216 City Philadelphia State PA 19130 Full Name of Contributor Ms. Robert Vogel Mol DAY VEAR State ND 216 City Philadelphia State ND 19147 Full Name of Contributor Mr. Robert Vogel Mol DAY VEAR State ND 216 City Philadelphia State ND 19147 Full Name of Contributor Mr. Robert Vogel Mol DAY VEAR State ND 216 City Philadelphia State ND 19130 Full Name of Contributor Mr. Day VEAR State ND 216 City Philadelphia State ND 19130 Full Name of Contributor Mr. Dariel Baylson Mol DAY VEAR State ND 216 City Philadelphia State ND 19130 Full Name of Contributor Mr. Dariel Baylson Mol DAY VEAR State ND 216 City Philadelphia State ND 19130 Full Name of Contributor Mr. Dariel Baylson Mol DAY VEAR State ND 216 City Philadelphia State ND 19130 Full Name of Contributor Mr. Dariel Baylson Mol DAY VEAR State ND 216 City Philadelphia State ND 216 City Philadelphia ND 216 Ci	City Bryn Mawr		State	Zip Code (Plus 4)	7	8	2015	
Mailing Address 1600 S. Eads Street 2ip Code (Plus 4) 7 15 2015 100.00	,		PA	19010				
Mailing Address 1600 S. Eads Street State Zip Code (Plus 4) 22202		butor			МО	DAY	YEAR	
State Zip Code (Plus 4) 7								
Full Name of Contributor Mo	Mailing Address	1600 S. Eads Stree	t					\$ 100.00
VA 22202	City Arlington		State	Zip Code (Plus 4)	7	15	2015	
Mailing Address 126 Winterberry Way State NJ 08096			VA	22202				
City Depford State NJ 08096 Plus 4) 6 27 2015 \$ 100.00 Full Name of Contributor Ms. Abigail Horn Mo DAY YEAR Mailing Address 436 Fitzwater St. City Philadelphia State PA 19147 PA 12015 \$ 100.00 Full Name of Contributor Mr. Robert Vogel Mailing Address 2021 Green St, Unit 1 City Philadelphia State PA 19130 PA 2015 \$ 100.00 Full Name of Contributor Mr. Daniel Baylson MO DAY YEAR PA 19130 PA 2015 \$ 100.00 State PA 219 Code (Plus 4) 19130 PA 2015 \$ 100.00 Full Name of Contributor Mr. Daniel Baylson MO DAY YEAR PA 19130 PA 2015 \$ 100.00	Full Name of Contrib	butor			мо	DAY	YEAR	
Full Name of Contributor Mailing Address	Mailing Address	126 Winterberry Wa	ау					\$ 100.00
Full Name of Contributor Ms. Abigail Horn Mailing Address 436 Fitzwater St. City Philadelphia State PA 19147 Full Name of Contributor Mr. Robert Vogel Mailing Address 2021 Green St, Unit 1 City Philadelphia State PA 19130 Full Name of Contributor Mr. Robert Vogel Mailing Address 3422 West Queen Lane City Philadelphia State Zip Code (Plus 4) 19130 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR \$ 100.00 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR \$ 100.00 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR \$ 100.00	City Denford		State	Zip Code (Plus 4)	6	27	2015	
Ms. Abigail Horn Mo DAY YEAR Mailing Address 436 Fitzwater St. City Philadelphia State PA 19147 Mo DAY YEAR * 100.00 * 1	Бергога		NJ	08096				
Full Name of Contributor Mr. Robert Vogel Mailing Address 2021 Green St, Unit 1 City Philadelphia State PA 19130 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR \$ 100.00								
Full Name of Contributor Mr. Robert Vogel Mailing Address 2021 Green St, Unit 1 City Philadelphia State PA 2ip Code (Plus 4) 19130 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR 2015 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR 2015 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR 2015 \$ 100.00	Full Name of Contrib Ms. Abigail Horn	butor			мо	DAY	YEAR	
Full Name of Contributor Mr. Robert Vogel Mailing Address 2021 Green St, Unit 1 City Philadelphia State PA 19130 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR 2015 ** 100.00 ** PA 2015					мо	DAY	YEAR	\$ 100.00
Mr. Robert Vogel Mailing Address 2021 Green St, Unit 1 City Philadelphia State PA 19130 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR \$ 100.00 Full Name of Contributor Mr. Daniel Baylson The part of Contributor Mr. Daniel Baylson State Zip Code (Plus 4) 7 8 2015 Full Name of Contributor Mr. Daniel Baylson	Ms. Abigail Horn Mailing Address	436 Fitzwater St.	State	Zip Code (Plus 4)				\$ 100.00
City Philadelphia State PA 19130 7 8 2015 \$ 100.00 Full Name of Contributor Mr. Daniel Baylson Mo DAY YEAR City Philadelphia State 2ip Code (Plus 4) 7 8 2015 \$ 100.00	Ms. Abigail Horn Mailing Address	436 Fitzwater St.						\$ 100.00
Full Name of Contributor Mr. Daniel Baylson Mailing Address 3422 West Queen Lane City Philadelphia State 19130 MO DAY YEAR \$ 100.00	Ms. Abigail Horn Mailing Address City Philadelphia	436 Fitzwater St.			7	1	2015	\$ 100.00
Full Name of Contributor Mr. Daniel Baylson Mailing Address 3422 West Queen Lane City Philadelphia PA 19130 Mo DAY YEAR 7 8 2015 \$ 100.00	Ms. Abigail Horn Mailing Address City Philadelphia Full Name of Contrib	436 Fitzwater St.	PA		7	1	2015	
Mr. Daniel Baylson Mo DAY YEAR Mailing Address 3422 West Queen Lane City Philadelphia State Zip Code (Plus 4) 7 8 2015	Ms. Abigail Horn Mailing Address City Philadelphia Full Name of Contrib Mr. Robert Vogel Mailing Address	436 Fitzwater St. butor 2021 Green St, Uni	PA	19147	7	DAY	2015 YEAR	
State	Ms. Abigail Horn Mailing Address City Philadelphia Full Name of Contrib Mr. Robert Vogel Mailing Address	436 Fitzwater St. butor 2021 Green St, Uni	PA t 1 State	19147 Zip Code (Plus 4)	7	DAY	2015 YEAR	
Philadelphia State Pig Code (Fids 4)	Ms. Abigail Horn Mailing Address City Philadelphia Full Name of Contrib Mr. Robert Vogel Mailing Address City Philadelphia	436 Fitzwater St. butor 2021 Green St, Uni	PA t 1 State	19147 Zip Code (Plus 4)	MO	1 DAY 8	2015 YEAR 2015	
1 madelphia	Ms. Abigail Horn Mailing Address City Philadelphia Full Name of Contrib Mr. Robert Vogel Mailing Address City Philadelphia	436 Fitzwater St. butor 2021 Green St, Uni	PA t 1 State PA	19147 Zip Code (Plus 4)	MO	1 DAY 8	2015 YEAR 2015	\$ 100.00
	Ms. Abigail Horn Mailing Address City Philadelphia Full Name of Contrib Mr. Robert Vogel Mailing Address City Philadelphia Full Name of Contrib Mr. Daniel Baylson Mailing Address	436 Fitzwater St. butor 2021 Green St, Uni butor 3422 West Queen L	PA t 1 State PA ane	19147 Zip Code (Plus 4) 19130	7 MO 7	1 DAY 8	2015 YEAR 2015	\$ 100.00

				PAGE	
Full Name of Contributor Ms. Elena DiGiovanna	МО	DAY	YEAR		
Mailing Address 2950 Van Ness St NW Apt 514				\$	100.00
City Washington State DC Zip Code (Plus 4) 20008	7	13	2015		
Full Name of Contributor Ms. Jessica Cockrell	МО	DAY	YEAR		
Mailing Address 233 Douglas St, NE				\$	100.00
City Washington State DC Zip Code (Plus 4) 20002	7	15	2015		
Full Name of Contributor MR Mathew Gkazer	мо	DAY	YEAR		
Mailing Address 503A South 12th Street				\$	75.00
City Philadelphia State Zip Code (Plus 4) PA 19147	7	16	2015		
Full Name of Contributor MS Mani Golzari	МО	DAY	YEAR		
	МО			\$	100.00
MS Mani Golzari	MO	DAY 20	YEAR 2015	\$	100.00
MS Mani Golzari Mailing Address 10029 Pratt Place City Silver Spring State Zip Code (Plus 4)		20		\$	100.00
MS Mani Golzari Mailing Address 10029 Pratt Place City Silver Spring State MD Zip Code (Plus 4) 20910 Full Name of Contributor	- 7 MO	20 DAY	2015 YEAR	\$	100.00
MS Mani Golzari Mailing Address 10029 Pratt Place City Silver Spring State MD 20910 Full Name of Contributor MS Susan Lin	7	20	2015		
Mailing Address 10029 Pratt Place City Silver Spring State MD 20910 Full Name of Contributor MS Susan Lin Mailing Address 633 Wilder Street City Philadelphia State Zip Code (Plus 4) 20910	- 7 MO	20 DAY	2015 YEAR		
Mailing Address 10029 Pratt Place City Silver Spring State MD 20910 Full Name of Contributor MS Susan Lin Mailing Address 633 Wilder Street City Philadelphia State PA 19147 Full Name of Contributor MS Susan Contributor MS State PA 19147	MO	20 DAY	2015 YEAR 2015		

Full Name of Contributor Ms. Simone Brewster	Ms. Simone Brewster				YEAR	
Mailing Address 113 Amethyst	Court					\$ 100.00
City Roosevelt	State CA	Zip Code (Plus 4) 95678	7	21	2015	
Full Name of Contributor Ms. Victoria Sanita			МО	DAY	YEAR	
Mailing Address 8306 Shawnee	Street					\$ 250.00
City Philadelphia	State PA	Zip Code (Plus 4) 19118	7	22	2015	
Full Name of Contributor Mr. Charles Gibbs			МО	DAY	YEAR	
Mailing Address PO Box 22511						\$ 100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19110	7	25	2015	
Full Name of Contributor Ms. Marie Russell			МО	DAY	YEAR	
Mailing Address 5 Orchard Lane	e					\$ 75.00
City Rose Valley	State PA	Zip Code (Plus 4) 19086	7	25	2015	
						DACE TOTAL

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

PAGE TOTAL 2,126.00

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 Candida	ite		Reporting	g Period				
Friends of Joanna McClinton			From:	<u>6/1</u>	1/2015	То:	7	<u>7/27/2015</u>
				DA	TE		Α	MOUNT
Full Name of Contributing Committe House Democratic Campaign Comm				мо	DAY	YEAR		
Mailing Address 205 State Street							\$	5,000.00
City Harrisburg	State PA	Zip Code 17101	e (Plus 4)	7	24	2015		
Full Name of Contributing Committee Williams For Senate	e			мо	DAY	YEAR		
Mailing Address 5939 Cobbs Cree	k Parkway						\$	1,500.00
City Philadelphia	State PA	Zip Code 19143	e (Plus 4)	7	24	2015		
								PAGE TOTAL
Enter Grand Total of Part C on So	hedule I, Detai	led Summary Pa	ige, Sectio	n 3.			_	

6,500.00

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 Candidat	e			Rep	orting Pe	riod			
Friends of Joanna McClinton				Fror	m:	6/11/2	015 To	o:	7/27/2015
					DA	ATE		АМ	IOUNT
Full Name of Contributor Mr. Reginald Browne					мо	DAY	YEAR		
Mailing 9 Larkspur Lane								\$	1,000.00
City Philadelphia	State	Zi	p Code (Plus	34)	6	27	2015	5	
·	PA	18	3940						
Employer Name Self-Employed	•	•			Occupat	tion	Cardiolo	gist	
Employer Mailing Address/Principal Pl Business	ace of		City			State		Zip Code	e (Plus 4)
9 Larkspur Lane			Philadelp	hia		PA		18940	
Full Name of Contributor Mr. Alpha Tonger					МО	DAY	YEAR		
Mailing 4855 Dorchester St Address								\$	300.00
City Groveport	State	Zi	p Code (Plus	34)	7	12	2015	5	
·	ОН	43	3125						
Employer Name Business Executive	•	•			Occupat	tion	Swift Fir	nancial Pa	rtners
Employer Mailing Address/Principal Pl Business	ace of		City		1	State		Zip Code	e (Plus 4)
3242 East Main Street.			Columbu	S		ОН		43213	
Full Name of Contributor									
MR Frederick Cooper					МО	DAY	YEAR		
Mailing 5349 Chester Avenuaddress	ıe							\$	500.00
City Philadelphia	State	Zi	p Code (Plus	i 4)	7	24	2015	5	
·	PA	19	9143						
Employer Name Fred's Water Ice				Occupat	t ion	Business	o Owner		
Employer Mailing Address/Principal Pl Business	ace of		City		•	State		Zip Code	e (Plus 4)
5349 Chester Avenue			Philadelp	hia		PA		19143	

PAGE 10

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

PAGE TOTAL

1,800.00

\$

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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	d	
Friends of Joanna McClinton	From:	<u>6/11/2015</u> To:	<u>7/27/2015</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 Candidate				Reporting Period						
			From:			To:				
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL			
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL			
						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	Reporting Period					
					Fro	om:		То	:		
					•		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•					Occupa	ation				
Employer Mailing Address/Principal Place of Business				State		Zip Code(Plus 4)			Description of Contribution		
Enter Grand Total of Part G on Sci Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed					PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ındidate		Reporti	ng Period						
Friends of Joanna McClinton			From	<u>6/1:</u>	7/27/2015					
				DATE			AMOUNT			
To Whom Paid DA Jones & DA Jones			МО	DAY	YEAR					
Mailing Address 30 Twig Lan	ie		7	15	2015	\$	3,000.00			
City Willingboro	State	Zip Code (Plus 4)	Description of Expenditure							
	NJ	08046		g - Mailing						
To Whom Paid DA Jones & DA Jone	•	·	мо	DAY	YEAR					
Mailing Address 30 Twig Lan	ie		7	25	2015	\$	3,000.00			
City Willingboro	State	Zip Code (Plus 4)	Descrip	ption of Exp						
3	NJ 08046				Printing - Mailing					
To Whom Paid Mr. Donald Cave			мо	DAY	YEAR					
Mailing Address 1113 Angora	a Street		7	26	2015	\$	200.00			
City Yeadon	State	Zip Code (Plus 4)	Descrip	ption of Exp	penditure)				
	PA	19050	Consult	ment						
To Whom Paid Mr. Omar Sabir	•	,	МО	DAY	YEAR					
Mailing Address 7300 City Li	ine Ave, Suite 360		7	15	2015	\$	400.00			
City Philadelphia	State	Zip Code (Plus 4)	Descrip	ption of Exp	penditure	:				
		10151	Printing							
	PA	19151								
To Whom Paid Mr. Rasheen Crews	PA	19151	МО	DAY	YEAR					
	<u> </u>	19151		DAY 15	YEAR 2015	\$	298.00			
Mr. Rasheen Crews	<u> </u>	Zip Code (Plus 4)	MO 7		2015		298.00			

19143

Postage - reimbursement

PA

To Whom Paid Mr. Rasheen Crews Mailing Address 1412 S. 51st Street 7 25 2015 \$ City Philadelphia State Zip Code (Plus 4) Prescription of Expanditure	
State Zin Code (Blue 4)	
State Zin Code (Plus 4)	125.00
City Philadelphia State Zip Code (Plus 4) Description of Expenditure PA 19143 Consulting Fees - reimbursement	
To Whom Paid Ms. Melisa Edmond MO DAY YEAR	
Mailing Address 241 Widner Street 7 26 2015 \$	200.00
City Widner State Zip Code (Plus 4) Description of Expenditure PA 19143 Consulting Fees - event reimbursme	nt
To Whom Paid Ms. Rashea Edmond MO DAY YEAR	
Mailing Address 6646 N. Smedley Street 7 15 2015 \$	300.00
City Philadelphia State Zip Code (Plus 4) Description of Expenditure	
PA 19126 Consulting Fees - stipend	
To Whom Paid Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond	
To Whom Paid MO DAY YEAR	300.00
To Whom Paid Ms. Rashea Edmond Mo DAY YEAR Mailing Address	300.00
To Whom Paid Ms. Rashea Edmond Mailing Address 6646 N. Smedley Street City Philadelphia State Zip Code (Plus 4) Description of Expenditure	300.00
To Whom Paid Ms. Rashea Edmond Mo DAY YEAR Mo DAY YEAR To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond Ms. Rashea Edmond To Whom Paid Ms. Rashea Edmond To Whom	300.00
To Whom Paid Ms. Rashea Edmond Mailing Address 6646 N. Smedley Street To Whom Paid Philadelphia State PA To Whom Paid Ms. Rashea Edmond Mo Day YEAR 7 20 2015 \$ City Philadelphia PA To Whom Paid Ms. Rashea Edmond Mo Day YEAR PA To Whom Paid Ms. Rashea Edmond	
To Whom Paid Ms. Rashea Edmond Mailing Address 6646 N. Smedley Street To Whom Paid Philadelphia State PA Zip Code (Plus 4) 19126 Description of Expenditure Consulting Fees - stipend To Whom Paid Ms. Rashea Edmond Mo DAY YEAR To Whom Paid Ms. Rashea Edmond Mo DAY YEAR To Whom Paid Ms. Rashea Edmond Mo DAY YEAR To Whom Paid Ms. Rashea Edmond Mo Day YEAR To Whom Paid Ms. Rashea Edmond Mo Day YEAR To Whom Paid Ms. Rashea Edmond Mo Day YEAR To Whom Paid Ms. Rashea Edmond Mo Day YEAR To Whom Paid Ms. Rashea Edmond Mo Day YEAR To Whom Paid Ms. Rashea Edmond Mo Day YEAR To Whom Paid Ms. Rashea Edmond Mo Day YEAR Description of Expenditure City Philadelphia	
To Whom Paid Ms. Rashea Edmond Mo DAY VEAR Mailing Address 6646 N. Smedley Street To Whom Paid Ms. Rashea Edmond State PA To Whom Paid Ms. Rashea Edmond Mo DAY VEAR Pa Description of Expenditure Consulting Fees - stipend Mo DAY VEAR Pa To Whom Paid Ms. Rashea Edmond Mo DAY VEAR Pa State PA Zip Code (Plus 4) 19126 To Whom Paid Ms. Rashea Edmond Pa To Whom Paid Ms. Rashea Edmond Mo DAY VEAR Pa To Whom Paid Mo DAY VEAR Pa To Whom Paid Mo DAY VEAR Pa To Whom Paid Mo DAY VEAR VEAR VEAR To Whom Paid	

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To Whom Paid Ms. Roxanne Wilson	мо	DAY	YEAR				
Mailing Address 2532 S Edge	ewood Street		7	20	2015	\$	100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19151	1	otion of Exp ting Fees -			
To Whom Paid Ms. Roxanne Wilson			МО	DAY	YEAR		
Mailing Address 2532 S Edge	ewood Street		7	25	2015	\$	100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19151		otion of Exp			
To Whom Paid Paypal			МО	DAY	YEAR		
Mailing Address			7	27	2015	\$	132.35
City	State	Zip Code (Plus 4)		otion of Exp ees - Payp		6/24 - 7/27	7
To Whom Paid TD Bank			МО	DAY	YEAR		
Mailing Address 121 S Broad	l Street		7	10	2015	\$	25.75
City Philadelphia	State PA	Zip Code (Plus 4) 19107		otion of Exp ees - New			
Enter Grand Total of Expend				\$	AGE TOTAL 8,681.10		

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									
Friends of Joanna McClinton			From:	<u>6</u>	5/11/2015	То:	<u>7/27/2015</u>		
					DATE				anding ce of Debt
Name of Creditor				мо	DAY	YEAR			
Mr. Zac Shaffer				МО	DAT	TEAR			
Mailing Address				7	15	2015	5 ,	\$	1,500.00
City Philadelphia State Zip Code (Plus 4)				Descrip	tion of Del	bt			
PA 19111									
					DATE				anding ce of Debt
Name of Creditor Mr. Micah Mahjoubian				мо	DAY	YEAR			
Mailing Address 1011 Cherry Stree	t			7	15	2015	5 .	\$	1,000.00
City Philadelphia	State	Zip Code (Pl	us 4)	Description of Debt					
·	PA	19107							
	1			1					
				<u> </u>				PA	GE TOTAL
Enter Grand Total of Unpaid Deb	ts on Page 1, Repo	ort Cover Pa	ge, Item	G.			\$	PA	GE TOTAL 2,500.00