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 2	20150	0415				Repo			CANE	ID	ATE	√	CC	TTIMM	EE	Ш	LOBI	BYIS	ST	
Name of Filing C	ommittee, Ca	ndida	te or Lo	obbyi	st:	E	3ULL	.OC	K,DO	NNA											
Street Address:																					
City:	_									State:					Zip Co	de	: 19	121			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND PRIM	FRIDAY ARY	PRE-	2.		30 DA PRIMA		РО	ST-	3.		AMEND! REPORT		NT	Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.		FRIDAY TION	PRE-	- 5.		30 DA		РО	ST-	6.		TERMIN REPORT		ION	Yes		No	\
report type)	ANNUAL REP	ORT	7.	Year	2015					IG METI CHECK					PAPER			>	DIS	SKETT	E
Name of Office S	- Sought by Can	didate	e:	-			-			DATE	OF	ELEC	CTI	ON	District Number		Office Code	Par	ty C	ode Co Co	
REPRESENTATI	VE IN THE GI	ENER/	AL ASS	EMBL	.Y					МО	D	DAY	Y	/EAR	195		STH	DEN	1	51	
				_							8	1	.1	2015			(SEE INS	TRUCTI	ONS	FOR COD	ES)
Summary of Expenditures		ıd	МО	DA		YEAR	1.5	T	^	МО		DAY		/EAR		OR	OFFIC	E USE	ON	ILY	
-			Last D	7	28	20)15		1		8		21	2015							
A. Amount Bro						Sched	lule 1	Γ)	\$			(.	11,	371.34) 0.00	1						
B. Total Monetary Contributions And Receipts (From Schedule I) C. Total Funds Available (Sum Of Lines A and B)							\$			(11 '										
D. Total Expend									\$ \$			(.		371.34) ,877.51	1						
E. Ending Cash					Line C	3)			\$			(1		248.85)	-						
F. Value Of In-	•						e II)		\$			(-		0.00	1						
G. Unpaid Debt	s And Obligat	tions (From S	ched	ule IV))			\$					0.00							
						AFFI	[DA	VI	ΓSE	CTION	J										
PART I - If this is	a Committee	e repo	rt, trea	surer	sign h	ere. I	f this	s is	a Car	didate	rep	ort, c	and	lidate si	gn here.	,					
I swear (or affirm) correct and comple		t, inclu	ding the	attac	hed sch	edules	filed	on	paper	or by ele	ctro	nic me	ediur	m, are to	the best	of n	ny know	ledge	and	belief ,	true
Sworn to and subs	cribed before m day of	e this		20							_			Signature	e of Perso	on S	Submitti	ng Rep	ort		
	Sig	gnature	e						-		_				Pri	nte	d Name				_
My Commission Ex	rpires								_		_				Ema	ail					
	МО		D/	ΑY		YR						Are	a Co	ode	Daytir	ne	Telepho	ne Nu	mbe	er	
Part II- If this is	a report of a	candi	date's	autho	orized (Comm	ittee	, Ca	andid	ate shal	l si	gn he	re.								
I swear (or affirm) No 320) as amende		st of my	y knowle	edge a	nd belie	f this	politic	cal	comm	ittee has	not	violat	ed a	ny provis	ions of th	ne a	act of Ju	ne 3,1	937	(P.L. 13	333,
Sworn to and subsc	ribed before me	this		20							-			s	ignature	of	Candida	te			_
									-		-				Print	ed	Name				_
My Commission Exp	Signa	ture							-		_				Ema	ail					_
rry Commission Exp											_										
	М	0	DA	ΑY		YR						Area (Code	•		Day	time Te	lephon	e Nı	umber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		_
BULLOCK,DONNA	From:	<u>7/28/20:</u>	<u>15</u> To:	8/21/2015
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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) Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	with an aggregate valu	\$2	eived from political committees 250.00 in the reporting period.							
Name of Fining Committee of Canadate			From:			То	:			
		L			DATE			AMOUNT		
Full Name of Contribut	ing Committee			МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4))							
	!	I	!		<u> </u>			DAGE TOTAL		

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

PAGE TOTAL \$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 Fining Committee of Candidate			Re _l Fro					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	on 3.			\$	PAGE TOTAL 0.00

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	od			
			From:			To:		
				D	ATE			AMOUNT
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			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. y 1 dgc,	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 Perio	d	
BULLOCK,DONNA	From:	7/28/2015 To:	<u>8/21/2015</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 Candidat	:e		Reporting	g 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 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 Candida	te				Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		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 P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period					
BULLOCK,DONNA			From	<u>7/28</u>	<u>8/2015</u>	То:	8/21/2015		
				DATE A					
To Whom Paid Uber			МО	DAY	YEAR				
Mailing Address 1456 Marke	t St		8	12	2015	\$	42.00		
City San Fransisco	State	Zip Code (Plus 4)	Description of Expenditure						
	CA	94103	Loan to campaign - Transportation						
To Whom Paid Uber				DAY	YEAR				
Mailing Address 1456 Market St				12	2015	\$	33.00		
City San Fransisco	State CA	Zip Code (Plus 4) 94103		otion of Exp					
To Whom Paid ACME Grocery Store			мо	DAY	YEAR				
Mailing Address 75 Valley St	ream Pkwy		8	11	2015	\$	193.40		
City Malvern	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure	1			
	PA	19355				for volunte	eers		
To Whom Paid Mailchimp			мо	DAY	YEAR				
Mailing Address 675 Ponce of	de Leon Ave NE Suite 500	00	8	10	2015	\$	50.00		
City Atlanta	State GA	Zip Code (Plus 4) 30308		otion of Exp		Blast Webs	site		
To Whom Paid Sunoco			МО	DAY	YEAR				
Mailing Address 2634-44 N E	Broad St		8	10	2015	\$	44.25		

Zip Code (Plus 4)

19132

Description of Expenditure

Loan to campaign - gas

State

PΑ

City

Philadelphia

						17	GE 12		
To Whom Paid Target			мо	DAY	YEAR				
Mailing Address 1000 Nicoll	et Mall		8	9	2015	\$	36.48		
City Minneanolic	State	Zip Code (Plus 4)	D						
City Minneapolis	MN	55403				os/Supplies	s For		
To Whom Paid Stassheim Graphic			мо	DAY	YEAR				
Mailing Address 333 N 15th	St		8	7	2015	\$	1,101.60		
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure						
· i illiadelpilia		campaigr							
To Whom Paid Uber			МО	DAY	YEAR				
Mailing Address 1456 Marke	ailing Address 1456 Market St					\$	33.00		
City San Fransisco	State CA	Zip Code (Plus 4) 94103	Description of Expenditure Loan to campaign - Transportation						
To Whom Paid Minuteman Press	·		МО	DAY	YEAR				
Mailing Address 1717 S Bro	ad St		8	5	2015	\$	405.00		
City Philadelphia	State	Zip Code (Plus 4)	Descrir	tion of Exp	enditure				
Timadeipina	PA	19148		campaigr					
To Whom Paid USPS			МО	DAY	YEAR				
Mailing Address 475 L'Enfar	nt Plaza SW		7	31	2015	\$	98.00		
City Washington	State DC	Zip Code (Plus 4) 20590		otion of Exp					
To Whom Paid Kennedy Printing Company			МО	DAY	YEAR				
Mailing Address 5534 Baltimore Ave			8	5	2015	\$	1,370.52		
CityPhiladelphiaStateZip Code (Plus 4)PA19143				otion of Exp campaigr					
	ı								

To Whom Paid Sunoco			мо	DAY	YEAR		
Mailing Address 2634-44 N Broad St			8	2	2015	\$	43.50
City Philadelphia	State PA	Zip Code (Plus 4) 19132	Description of Expenditure Gas				
To Whom Paid NGP VAN			МО	DAY	YEAR		
Mailing Address 1101 15th st, NW ste 1500			8	1	2015	\$	150.00
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure Loan to campaign - software, database management				
To Whom Paid Nationbuilder			МО	DAY	YEAR		
Mailing Address 520 S. Grand Ave., 2nd Floor			8	4	2015	\$	29.00
City Los Angeles	State CA	Zip Code (Plus 4) 90071	Description of Expenditure Loan to campaign - software				
To Whom Paid Budget		·	мо	DAY	YEAR		
Mailing Address 6 Sylvan Way			8	19	2015	\$	247.76
City Parsippany	State NJ	Zip Code (Plus 4) 07054	Description of Expenditure Loan to campaign - Travel				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	PAGE TOTAL 3,877.51