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 20120	0111			Repor Filed I		CA	NDI	DATE		COM	AITTEE	Y	LUBI	51151	
Name of Filing C	ommittee, Candida	ate or L	obbyist:	Ì	NEILSC	N FO	R THE	NO	RTHEA	ST			•			
Street Address:	PO BOX 6054															
City:	PHILADELPHIA	A.					State	e:	PA			Zip Co	de: 19	114		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		P	POST- 6.			TERMINATION REPORT?		Yes	No	\
report type)	ANNUAL REPORT	7. X	Year 2012				NG ME					PAPER		$ \!\! \!\!\! \!\!\! \!$	DISKE	TTE
Name of Office S	ought by Candidat	e:			-		DAT	ΈO	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							МО		DAY	YE	AR			DEN	1	
								11		6	2012		(SEE IN	STRUCTI	ONS FOR C	CODES)
Summary of Expenditures	Receipts and from:	МО	DAY	YEAR		-0	МО		DAY		EAR	FC	OR OFFIC	CE USE	ONLY	
-			11 27	20)12 T	ГО		12	3	31	2012					
	ught Forward From					\$					513.18					
	ary Contributions A			n Sched	dule 1)	\$				4,0	008.12					
	Available (Sum Of					\$					521.30					
D. Total Expend	ditures (From Sche	dule II	I) ————			\$				7,1	.43.12					
	Balance (Subtract					\$				14,3	78.18					
	Kind Contributions				e II)	\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$				10,0	00.00					
					IDAVI											
	that this report, includes		_						-		_		f my knov	wledge	and belie	ef , true
•	cribed before me this										ianature	of Perso	n Submitt	ina Rei	ort	
	day of		_ 20			_					J					
	Signatur	·e				_						Prin	ted Name	•		
My Commission Ex	·			\/D		_				- 6	•_	Ema				
Doub II If this is	MO		AY	YR	:	d: d		h = 11		a Cod	ie	Daytin	ne Teleph	one Nu	mper	
	a report of a cand				•				_		y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
,	ribed before me this										•	ignature (of Candida	ate		
	day of		_ 20			_										
	Cianatura					_						Printe	ed Name			
My Commission Exp	Signature ires							,				Ema	il			
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
NEILSON FOR THE NORTHEAST	From:	11/27/201	<u>2</u> To:	12/31/2012
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)			\$	4,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	4,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	8.12
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	4,008.12

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee		Reporting	Period				
		From:		То	:		
		I		DATE			AMOUNT
Full Name of Contributing C	ommittee		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

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 Filling Committee of Candidate			Reporting Period From: To:					
			Fro	m:		10):	
					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 Candidate Report				Period				
NEILSON FOR THE NORTHEAST			From:	11/2	7/2012	То:	12/31/	2012
				DA	TE		AMOU	NT
Full Name of Contributing Committee				мо	DAY	YEAR		
ILA LOCAL 1291 PAC								
Mailing Address 3460 N DELAWARE A	AVE STE 101						\$	500.00
City PHILADELPHIA	State	Zip Code	e (Plus 4)	12	14	2012	!	
	PA	191346	311					
Full Name of Contributing Committee				мо	DAY	YEAR		
PECOPAC								
Mailing Address 2301 MARKET ST # 1	S15-1						\$	500.00
City PHILADELPHIA	State	Zip Code	e (Plus 4)	11	29	2012	!	
	PA	191031	338					
Full Name of Contributing Committee				мо	DAY	YEAR		
IBEW PAC VOLUNTARY FUND								
Mailing Address 900 7TH ST NW							\$	3,000.00
City WASHINGTON	State	Zip Code	e (Plus 4)	12	31	2012	!	
	DC	200013	886					
							PA	GE TOTAL

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

4,000.00

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			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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	ing Perio	d			
NEILSON FOR THE NORTHEAST			From:		11/27/201	<u>2</u> To:	12/31/2012	<u>2</u>
				D	ATE		AMOUNT	
Full Name					DAY	YEAR		
BENEFICIAL BANK				МО	DAY	YEAK		
Mailing Address 3202 RED LION RD							\$	2.70
City PHILADELPHIA	State	Zip Code (Plus 4)	12	31	2012		
	PA	1911411	09					
Receipt Description INTEREST		•					•	
Full Name					DAY	YEAR		
BENEFICIAL BANK				МО	DAY	YEAK		
Mailing Address 3202 RED LION RD					20	2012	\$	5.42
City PHILADELPHIA	State	Zip Code (Plus 4)	11	30	2012		
	PA	1911411	09					
Receipt Description INTEREST	•	•					<u> </u>	

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$8.12

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 Per	iod	
NEILSON FOR THE NORTHEAST	From:	<u>11/27/2012</u> To:	12/31/2012
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candid	ate		Reporting	g 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	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		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 Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

500.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reportir	ng Period			
NEILSON FOR THE NORTHEAS	From	12/31/2012					
		DATE			AMOUNT		
To Whom Paid EDWARD J NEILSON	мо	DAY	YEAR				
Mailing Address 3812 CHALF	ONT DR		12	24	2012	\$	350.00
City PHILADELPHIA State Zip Code (Plus 4) PA 191543442				otion of Exp			
To Whom Paid 298 INC.				DAY	YEAR		

	PA	191487393	DONATION - TOYS & TURKEYS FUNDRAISER					
To Whom Paid STRASSHEIM GRAPHIC DESIGN			МО	DAY	YEAR			
Mailing Address 333 N 15TH ST			12	30	2012	\$	106.92	
City PHILADELPHIA	State PA	Description of Expenditure						
To Whom Paid JENNIFER M. SLAVIC			мо	DAY	YEAR			

Zip Code (Plus 4)

11

Description of Expenditure

2012

Mailing Address

PHILADELPHIA

PO BOX 37393

State

JENNIFER M. SLAVIC								
Mailing Address 152 MERCY ST			11	29	2012	\$	1,800.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip				
		l PA	191482614	CONSU	LTING FEE			

		ı					
To Whom Paid CHASE CARD SERVICES VISA			мо	DAY	YEAR		
Mailing Address PO BOX 15153				30	2012	\$	3,047.70
City WILMINGTON	State	Zip Code (Plus 4)) Description of Expenditure				

City	WILMINGTON	State	Zip Code (Plus 4)	Description of Expenditure
		DE	198865153	MISC CAMPAIGN EXPENSES

To Whom Paid PENNSYLVANIA LEGISLATIVE SERVICES			мо	DAY	YEAR			
Mailing Address 240 N 3RD ST FL 11			12	30	2012	\$	238.50	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
PA 171011521				PRINTING				
To Whom Paid EDWARD J NEILSON			МО	DAY	YEAR			
Mailing Address 3812 CHALFONT DR		12	14	2012	\$	1,100.00		
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure					
PA 191543442				REIMBURSEMENT OF EXPENSES				
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	7,143.12		

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					
NEILSON FOR THE NORTHEAST				11/27/2012 To :			12/31/2012		
					DATE			Outstanding Balance of Debt	
Name of Creditor EDWARD J NEILSON MO						YEAR			
Mailing Address 3812 CHALFONT DR				4	11	2012	\$	10,000.00	
City PHILADELPHIA	State	Zip Code (Pl	us 4)	Descrip	tion of Del	bt			
	PA	191543442				TTEE			
								PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	10,000.00		
						_			