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 201	50069				port ed B		CAND	IDATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist:		PHI	[LLY	SET G	GO									
Street Address: 1414 S PENN SQ UNIT 17E																	
City:	PHILADELPH	IA						State: PA					ie: 19	9102			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	-	2. X	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	≣-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	•	\
report type)	ANNUAL REPOR	T 7.	Year 2016					IG METH CHECK O						$\overline{}$	DISKE	TTE	
Name of Office S	ought by Candid	ate:	-					DATE ()F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR						
								11	-	8	2016		(SEE IN	STRUCTI	ONS FOR C	ODES))
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		3 8	2	016	T	0	4	1	11	2016						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			10,8	315.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$	\$ 1,935.00									
C. Total Funds Available (Sum Of Lines A and B)							\$			12,7	'50.00						
D. Total Expenditures (From Schedule III)							\$			5,0	00.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C	:)			\$			7,7	50.00						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sc	hedu	le I	I)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00			•			
				AFF	ID	AVI	T SE	CTION									
PART I - If this is	a Committee re	port, trea	surer sign h	nere.	If th	nis is	a Car	ndidate r	eport, e	candio	late sig	ın here.					
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attached sch	edules	s file	ed on	paper	or by elec	tronic m	edium	are to t	he best o	f my kno	wledge	and belie	ef , tru	ue
Sworn to and subs	cribed before me th day of	is	20							s	ignature	of Perso	n Submit	ting Rep	ort		_
	Signat	ure					-					Prin	ted Name	e			_
My Commission Ex	pires											Ema	il				_
	мо	D	AY	YR					Ar	ea Cod	е	Daytim	e Telepl	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	ee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and belie	ef this	poli	itical	comm	ittee has ı	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc		s									S	ignature o	of Candid	ate			-
	day of		_ 20				-					Printe	d Name				-
	Signature	<u> </u>					-										_
My Commission Exp	ires											Ema	"				
	МО	D	AY	YR	1		•		Area	Code		Da	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
PHILLY SET GO	PHILLY SET GO From: 3/8/							
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting) Period	(1)	\$	260.00				
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)	\$	250.00						
TOTAL for the Reporting	\$	250.00						
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)			\$	1,425.00				
TOTAL for the Reporting	Period	(3)	\$	1,425.00				
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			\$	1,935.00				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Committee or Candidate			Reporting Period					
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Filing Committee or Candidate	Reporting Perio	od	d				
PHILLY SET GO	From:	3/8/2016	То:	4/11/2016			

DATE AMOUNT

Full Name of Contributor Christina Wong	МО	DAY	YEAR			
Mailing Address 563 Martin Street						\$ 250.0
City Philadelphia	State	Zip Code (Plus 4)	4	4	2016	
·	PA	19128				

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

PAGE TOTAL \$ 250.00

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 Rep			Reporting Period							
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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	porting Period						
PHILLY SET GO				Fror	m:	<u>3/8/2</u>	016 T o	o:	4/11/2016		
					D/	ATE		AI	MOUNT		
Full Name of Contributor					МО	DAY	YEAR				
Nicholas Gaspari											
Mailing 105 S. 12th Street, A	pt. 503							\$	500.00		
City Philadelphia	State	Zip	Code (Plus	34)	3	21	2016	5			
	PA	19	107								
Employer Name Self Employed					Occupat	tion	elf Em	ployed			
Employer Mailing Address/Principal Place of City						State		Zip Cod	e (Plus 4)		
626 Carpenter Street Philadelphia				hia		PA		19147			
Full Name of Contributor					Мо	DAY	VEAD				
Sean Edwards					МО	DAT	YEAR				
Mailing Address 626 Carpenter Street								\$	500.00		
City Philadelphia	State	Zip	p Code (Plus	i 4)	3	20	2016	5			
·	PA	19	147								
Employer Name Self Employed					Occupation Self Employed						
Employer Mailing Address/Principal Plac Business	e of		City		State Zip Code (Plus			e (Plus 4)			
626 Carpenter Street			Philadelp	hia		PA		19147	,		
Full Name of Contributor											
Brian Lipstein					МО	DAY	YEAR				
Mailing 1701 Spruce Street								\$	425.00		
City Philadelphia	State	Zip	Code (Plus	i 4)	4	10	2016)			
	PA	19	103								
Employer Name self-employed				Occupat	tion	elf-em	ployed				
Employer Mailing Address/Principal Plac Business	e of		City		-	State		Zip Cod	e (Plus 4)		
1701 Spruce Street			Philadelp	hia		PA	19103				

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

PAGE TOTAL

1,425.00

\$

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	GE 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 Period									
PHILLY SET GO	From:	3/8/2016 To:	<u>4/11/2016</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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 Candidate R			Reporting 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 Candidate				Re	Reporting Period						
					Fro	om:		To:			
							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 Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00	

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
PHILLY SET GO			From	<u>3/8</u>	8/2016	То:	4/11/2016
			DATE				AMOUNT
To Whom Paid WaxPac			мо	DAY	YEAR		
Mailing Address PO Box 2112			4	11	2016	\$	1,500.00
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure campaign contribution				
To Whom Paid Jared Solomon			МО	DAY	YEAR		
Mailing Address 6601 Rutland Street			4	11	2016	\$	1,500.00
City Philadelphia	State PA	Zip Code (Plus 4) 19149	Description of Expenditure campaign contribution				
To Whom Paid Sean Sullivan for PA			МО	DAY	YEAR		
Mailing Address 530 S. 2nd Street			4	11	2016	\$	1,000.00
City Philadelphia	State PA	Zip Code (Plus 4) 19147	Description of Expenditure campagin contribution				
To Whom Paid Friends of Morgan Cephas			МО	DAY	YEAR		
Mailing Address PO Box 28105			4	11	2016	\$	1,000.00
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure				

19131

campaign contribution

PΑ

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

5,000.00