#### **Campaign Finance Report**

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

| Filer Identificati<br>Number :            | on 2                        | 20001    | 89       |                        |         |        | port<br>ed B |                | CANDI               | DATE     |        | СОМ        | 1ITTEE             | <b>✓</b>       | LOBI     | BYIST     |                |
|-------------------------------------------|-----------------------------|----------|----------|------------------------|---------|--------|--------------|----------------|---------------------|----------|--------|------------|--------------------|----------------|----------|-----------|----------------|
| Name of Filing C                          | Committee, Ca               | ndidat   | te or Lo | bbyist:                |         | PHI    | LA F         | ED TE          | ACH (PF             | T) COI   | 4 SUI  | PT         |                    | •              |          |           |                |
| Street Address:                           | 1816 CHE                    | STNU     | IT ST    |                        |         |        |              |                |                     |          |        |            |                    |                |          |           |                |
| City:                                     | PHILADEL                    | PHIA     |          |                        |         |        |              |                | State:              | PA       |        |            | Zip Cod            | de: 19         | 9103     |           |                |
| TYPE OF<br>REPORT                         | 6TH TUESDAY<br>PRE-PRIMARY  | 1        |          | 2ND FRIDAY<br>PRIMARY  | Y PRE   | -      | 2.           | 30 DA<br>PRIMA |                     | POST-    | 3.     |            | AMENDM<br>REPORT?  |                | Yes      | No        | ~              |
| (place X to<br>the right of               | 6TH TUESDAY<br>PRE-ELECTION |          | ١.       | 2ND FRIDAY<br>ELECTION | y pre   | ≣-     | 5. <b>X</b>  | 30 DA          |                     | POST-    | 6.     |            | TERMINA<br>REPORT? |                | Yes      | No        | ~              |
| report type)                              | ANNUAL REP                  | ORT 7    | 7.       | <b>Year</b> 2003       |         |        |              |                | NG METHO<br>CHECK O |          |        |            | PAPER              |                | <b>\</b> | DISKE     | TTE            |
| Name of Office S                          | Sought by Can               | didate   | ·        |                        |         |        |              |                | DATE O              | F ELE    | CTIO   | N          | District<br>Number | Office<br>Code | Par      | ty Code   | County<br>Code |
|                                           | ,                           |          |          |                        |         |        |              |                | МО                  | DAY      | YE     | AR         | rumber             | Touc           |          |           | couc           |
|                                           |                             |          |          |                        |         |        |              |                | 11                  |          | 4      | 2003       |                    | (SEE IN        | STRUCTI  | ONS FOR ( | CODES)         |
| Summary of Expenditures                   |                             | d        | МО       | DAY                    | YEAR    | ł      |              | _              | МО                  | DAY      | YI     | AR         | FO                 | R OFFI         | CE USE   | ONLY      |                |
|                                           |                             |          |          | 1 1                    |         | 1      | Τ            | 0              | 10                  |          | 20     | 2003       |                    |                |          |           |                |
| A. Amount Bro                             | ught Forward                | From     | Last Re  | eport                  |         |        |              | \$             |                     |          | 279,1  | 110.04     |                    |                |          |           |                |
| B. Total Monet                            | ary Contributi              | ons Ar   | nd Rece  | eipts (From            | Sche    | dule   | eI)          | \$             |                     |          | 20,8   | 319.03     |                    |                |          |           |                |
| C. Total Funds                            | Available (Sui              | m Of L   | ines A   | and B)                 |         |        |              | \$             |                     |          | 299,9  | 929.07     |                    |                |          |           |                |
| D. Total Expen                            | ditures (From               | Sched    | lule III | <b>(</b> )             |         |        |              | \$             |                     |          | 53,0   | 00.00      |                    |                |          |           |                |
| E. Ending Cash                            | Balance (Sub                | tract I  | Line D I | From Line (            | C)      |        |              | \$             |                     | 2        | 246,9  | 29.07      |                    |                |          |           |                |
| F. Value Of In-                           | Kind Contribut              | tions I  | Receive  | ed (From So            | hedu    | le II  | [)           | \$             |                     |          |        | 0.00       |                    |                |          |           |                |
| G. Unpaid Debt                            | s And Obligat               | ions (   | From S   | chedule IV             | )       |        |              | \$             |                     |          |        | 0.00       |                    |                | 1        |           |                |
|                                           |                             |          |          |                        | AFF     | IDA    | ٩VI          | T SE           | CTION               |          |        |            |                    |                |          |           |                |
| PART I - If this is                       | s a Committee               | repor    | t, treas | surer sign l           | nere.   | If th  | is is        | a Car          | ndidate re          | port, c  | andi   | date sig   | ın here.           |                |          |           |                |
| I swear (or affirm)<br>correct and comple |                             | t, inclu | ding the | attached sch           | nedule  | s file | d on         | paper          | or by elect         | ronic m  | edium  | , are to t | he best o          | f my kno       | wledge   | and beli  | ef , true      |
| Sworn to and subs                         | cribed before me<br>day of  | e this   |          | 20                     |         |        |              |                |                     |          | S      | ignature   | of Perso           | n Submit       | ting Rep | ort       |                |
|                                           |                             | nature   |          |                        |         |        |              | -<br>-         |                     |          |        |            | Prin               | ted Nam        | e        |           |                |
| My Commission Ex                          | -                           | ,a.u. e  | •        |                        |         |        |              |                |                     |          |        |            | Ema                | il             |          |           |                |
|                                           | мо                          |          | DA       | Y                      | YR      |        |              | -              |                     | Are      | ea Cod | le         | Daytim             | e Telepi       | none Nu  | mber      |                |
| Part II- If this is                       | a report of a               | candi    | date's a | uthorized              | Comn    | nitte  | e, C         | andid          | ate shall           | sign he  | ere.   |            |                    |                |          |           |                |
| I swear (or affirm)<br>No 320) as amende  |                             | t of my  | knowle   | dge and belie          | ef this | poli   | tical        | comm           | ittee has n         | ot viola | ted an | y provisi  | ions of the        | e act of J     | une 3,1  | 937 (P.L  | . 1333,        |
| Sworn to and subsc                        | ribed before me             | this     |          |                        |         |        |              |                |                     |          |        | Si         | ignature o         | of Candid      | ate      |           |                |
|                                           | day of                      |          |          |                        |         |        |              | _              |                     |          |        |            | Drint-             | d Name         |          |           |                |
|                                           | Signat                      | ture     |          |                        |         |        |              | _              |                     |          |        |            | rinte              | u Haille       |          |           |                |
| My Commission Exp                         | _                           | uie      |          |                        |         |        |              |                |                     |          |        |            | Ema                | il             |          |           |                |
|                                           | мо                          | )        | DA       | ıY                     | YR      | 1      |              | -              |                     | Area     | Code   |            | Da                 | aytime 1       | elephor  | ie Numb   | er             |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate                                                                                                                          | Reporting Period |     |            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----|------------|
| PHILA FED TEACH (PFT) COM SUPT                                                                                                                                 | From:            | To: | 10/20/2003 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor                                                                                        |                  |     |            |
| TOTAL for the Reporting                                                                                                                                        | g Period (1)     | \$  | 20,602.00  |
| 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                                                                                                                                        | g Period (4)     | \$  | 217.03     |
| 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 |                  | \$  | 20,819.03  |

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

|                           | his Part to itemize onl<br>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 Cand | idate |                  | Rep | oorting P | eriod |      |    |      |
|----------------------------------|-------|------------------|-----|-----------|-------|------|----|------|
|                                  |       |                  | Fro | m:        |       | To   | ): |      |
|                                  |       |                  |     |           | DATE  |      | АМ | OUNT |
| 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.)

|                     |       |            | Rep       | orting Pe               | riod                                           |                                                    |                                                  |                                                                                                             |                                                                                 |
|---------------------|-------|------------|-----------|-------------------------|------------------------------------------------|----------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
|                     |       |            | Fror      | n:                      |                                                | 1                                                  | Го:                                              |                                                                                                             |                                                                                 |
|                     |       |            |           | D                       | ATE                                            |                                                    |                                                  | AMOUN                                                                                                       | IT                                                                              |
|                     |       |            |           | МО                      | DAY                                            | YEAR                                               | 2                                                |                                                                                                             |                                                                                 |
|                     |       |            |           |                         |                                                |                                                    |                                                  | \$                                                                                                          | 0.00                                                                            |
| State               | Zip ( | Code (Plus | 5 4)      |                         |                                                |                                                    |                                                  |                                                                                                             |                                                                                 |
|                     |       |            |           | Occupa                  | tion                                           |                                                    |                                                  |                                                                                                             |                                                                                 |
| e of                |       | City       |           |                         | State                                          |                                                    | Zip                                              | Code (Plu                                                                                                   | us 4)                                                                           |
| dule I, Detailed Su | umma  | ry Page,   | Section   | on 3.                   |                                                |                                                    | \$                                               | PAGE T                                                                                                      | 0.00                                                                            |
|                     | e of  | e of       | e of City | State Zip Code (Plus 4) | From:  MO  State Zip Code (Plus 4)  Occupation | State Zip Code (Plus 4)  Occupation  October State | State Zip Code (Plus 4)  Occupation  City  State | State Zip Code (Plus 4)  Occupation  Occupation  City State Zip  Odule I, Detailed Summary Page, Section 3. | State Zip Code (Plus 4)  Occupation  Occupation  Occupation  Occupation  PAGE 1 |

## 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   |      |           |           |
|---------------------------------------|----------------------|------------------|---------|-----------|-----|------|-----------|-----------|
| PHILA FED TEACH (PFT) COM SUPT        |                      |                  | From:   |           |     | To:  | 1         | 0/20/2003 |
|                                       |                      |                  |         | D.        | ATE |      | Α         | MOUNT     |
| Full Name  AMALGAMATED BANK OF NY     |                      |                  |         | МО        | DAY | YEAR |           |           |
| Mailing Address 11-15 UNION ST        |                      |                  |         | 0         | 20  | 2002 | <b>\$</b> | 217.03    |
| City NY                               | State<br>NY          | Zip Code (       | Plus 4) | 9         | 30  | 2003 |           |           |
| Receipt Description SEPT INT          |                      |                  |         |           |     |      |           |           |
| Enter Grand Total of Part E on Schedu | ıle I. Detailed Sumn | narv Page.       | Section | 4.        |     |      | P/        | AGE TOTAL |
|                                       | ,                    | <b>, . u</b> ge, |         |           |     |      | \$        | 217.03    |

#### **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 |           |            |
|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------|------------|
| PHILA FED TEACH (PFT) COM SUPT                                                                                                                     | From:            | То:       | 10/20/2003 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P                                                                          | ER CONTRIBUTOR   |           |            |
| TOTAL for the Reporting Pe                                                                                                                         | eriod (1)        | <b>\$</b> | 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)        | <b>\$</b> | 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                      |                    |                       |             |             |       | <b>\$</b> | 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 Candidat                          | e            |         |            |         | Re    | porting F | Period    |        |           |                    |
|---------------------------------------------------------------|--------------|---------|------------|---------|-------|-----------|-----------|--------|-----------|--------------------|
|                                                               |              |         |            |         | Fro   | om:       |           | To:    |           |                    |
|                                                               |              |         |            |         |       |           | DATE      |        |           | AMOUNT             |
| Full Name of Contributor                                      |              |         |            |         |       | мо        | DAY       | YEAR   |           |                    |
| Mailing Address                                               |              |         |            |         |       |           |           |        | <b>\$</b> | 0.00               |
| City                                                          | State        |         | Zip Code(F | Plus 4) |       |           |           |        |           |                    |
| Employer of Contributor                                       | •            |         | •          |         |       | Occupa    | tion      |        | •         |                    |
| Employer Mailing Address/Principal Pla<br>Business            | ace of       | City    |            | State   |       | Zip<br>4) | Code(Plus | Descri | ption     | of Contribution    |
| Enter Grand Total of Part G on Sc<br>Summary Page, Section 3. | hedule II, I | In-Kind | Contributi | ons De  | taile | ed        |           |        |           | PAGE TOTAL<br>0.00 |

### SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate         |       |                   | Reportir               | ng Period         |                |     |            |
|-----------------------------------------------|-------|-------------------|------------------------|-------------------|----------------|-----|------------|
| PHILA FED TEACH (PFT) COM SUPT                |       |                   | From                   |                   |                | То: | 10/20/2003 |
|                                               |       |                   |                        | DATE              |                |     | AMOUNT     |
| To Whom Paid LOUISE BISHOP                    |       |                   | мо                     | DAY               | YEAR           |     |            |
| Mailing Address                               |       |                   | 9                      | 16                | 2003           | \$  | 500.00     |
| City                                          | State | Zip Code (Plus 4) | <b>Descrip</b> CONT    | l<br>otion of Exp | l<br>penditure |     |            |
| To Whom Paid JUAN F RAMOS FOR CITY COUNCIL AT | LARGE |                   | мо                     | DAY               | YEAR           |     |            |
| Mailing Address                               |       |                   | 9                      | 18                | 2003           | \$  | 500.00     |
| City                                          | State | Zip Code (Plus 4) | <b>Descrip</b> CONT    | otion of Exp      | penditure      |     |            |
| To Whom Paid DEMOCRATIC CAMP COMM OF PHILA    |       |                   | МО                     | DAY               | YEAR           |     |            |
| Mailing Address                               |       |                   | 9                      | 26                | 2003           | \$  | 1,500.00   |
| City                                          | State | Zip Code (Plus 4) | <b>Descrip</b><br>CONT | otion of Exp      | penditure      |     |            |
| To Whom Paid RE-ELECT COUNCILMAN DAVID COHEN  |       |                   | МО                     | DAY               | YEAR           |     |            |
| Mailing Address                               |       |                   | 9                      | 26                | 2003           | \$  | 500.00     |
| City                                          | State | Zip Code (Plus 4) | Descrip                | tion of Exp       | penditure      |     |            |
| To Whom Paid COMM TO RE-ELECT ANGEL CRUZ      |       |                   | МО                     | DAY               | YEAR           |     |            |
| Mailing Address                               |       |                   | 9                      | 26                | 2003           | \$  | 300.00     |
| City                                          | State | Zip Code (Plus 4) | Descrip                | tion of Exp       | penditure      |     |            |

|                                                                                                                     |       |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |                                      |    | PAGE |        |
|---------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------------------------------|----|------|--------|
| To Whom Paid FRIENDS OF JESS STAIRS                                                                                 |       |                                      | мо                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DAY                        | YEAR                                 |    |      |        |
| Mailing Address                                                                                                     |       |                                      | 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 26                         | 2003                                 | \$ |      | 500.00 |
| City                                                                                                                | State | Zip Code (Plus 4)                    | <b>Descrip</b><br>CONT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | otion of Exp               | enditure                             |    |      |        |
| To Whom Paid<br>FRIENDS OF JIM RHODES                                                                               |       |                                      | МО                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DAY                        | YEAR                                 |    |      |        |
| Mailing Address                                                                                                     |       |                                      | 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 26                         | 2003                                 | \$ |      | 500.00 |
| City                                                                                                                | State | Zip Code (Plus 4)                    | <b>Descrip</b><br>CONT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | otion of Exp               | penditure                            |    |      |        |
| To Whom Paid COM TO RE-ELECT SEN MIKE STACK                                                                         |       |                                      | МО                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DAY                        | YEAR                                 |    |      |        |
| Mailing Address                                                                                                     |       |                                      | 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 26                         | 2003                                 | \$ |      | 500.00 |
| City                                                                                                                | State | Zip Code (Plus 4)                    | <b>Descrip</b><br>CONT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Description of Expenditure |                                      |    |      |        |
|                                                                                                                     |       |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |                                      |    |      |        |
| To Whom Paid FRIENDS OF GEO KENNEDY                                                                                 |       | -                                    | мо                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DAY                        | YEAR                                 |    |      |        |
|                                                                                                                     |       |                                      | <b>мо</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>DAY</b> 26              | <b>YEAR</b> 2003                     | \$ |      | 300.00 |
| FRIENDS OF GEO KENNEDY                                                                                              | State | Zip Code (Plus 4)                    | 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            | 2003                                 |    |      | 300.00 |
| FRIENDS OF GEO KENNEDY  Mailing Address                                                                             | State | Zip Code (Plus 4)                    | 9<br>Descrip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 26                         | 2003                                 |    |      | 300.00 |
| FRIENDS OF GEO KENNEDY  Mailing Address  City  To Whom Paid                                                         | State | Zip Code (Plus 4)                    | 9  Descrip CONT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 26<br>Otion of Exp         | 2003<br>penditure                    |    |      | 300.00 |
| FRIENDS OF GEO KENNEDY  Mailing Address  City  To Whom Paid KENNEY FOR COUNCIL                                      | State | Zip Code (Plus 4)  Zip Code (Plus 4) | 9  Descrip CONT  MO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 26 otion of Exp            | 2003  penditure  YEAR  2003          | \$ |      |        |
| FRIENDS OF GEO KENNEDY  Mailing Address  City  To Whom Paid KENNEY FOR COUNCIL  Mailing Address                     |       |                                      | 9  Description CONT  MO  9  Description De | DAY                        | 2003  penditure  YEAR  2003          | \$ |      |        |
| FRIENDS OF GEO KENNEDY  Mailing Address  City  To Whom Paid KENNEY FOR COUNCIL  Mailing Address  City  To Whom Paid |       |                                      | 9 Description MO 9 Description CONT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | DAY  26  ption of Exp      | 2003 Penditure  YEAR  2003 Penditure | \$ |      |        |

|                                                                          |                  |                                      |                                  |                       |                     | Р  |           |
|--------------------------------------------------------------------------|------------------|--------------------------------------|----------------------------------|-----------------------|---------------------|----|-----------|
| To Whom Paid FRIENDS OF DORIS PECHKUROW                                  |                  |                                      |                                  | DAY                   | YEAR                |    |           |
| Mailing Address                                                          |                  |                                      | 10                               | 1                     | 2003                | \$ | 500.00    |
| City                                                                     | State            | <b>Descrip</b> CONT                  | tion of Exp                      | oenditure             |                     |    |           |
| To Whom Paid THE FRIENDS OF MARIAN B TASCO                               |                  |                                      |                                  | DAY                   | YEAR                |    |           |
| Mailing Address                                                          |                  |                                      | 10                               | 16                    | 2003                | \$ | 500.00    |
| City                                                                     | State            | Zip Code (Plus 4)                    | Description of Expenditure CONT  |                       |                     |    |           |
| To Whom Paid FRIENDS OF JOHN STREET                                      |                  |                                      | МО                               | DAY                   | YEAR                |    |           |
| Mailing Address                                                          |                  |                                      | 10                               | 16                    | 2003                | \$ | 25,000.00 |
| City                                                                     | State            | Zip Code (Plus 4)                    | Description of Expenditure CONT  |                       |                     |    |           |
| To Whom Paid AFT COPE CSPE                                               |                  |                                      | МО                               | DAY                   | YEAR                |    |           |
| Mailing Address                                                          |                  |                                      |                                  |                       |                     |    |           |
| Mailing Address                                                          |                  |                                      | 10                               | 16                    | 2003                | \$ | 10,000.00 |
| Mailing Address City                                                     | State            | Zip Code (Plus 4)                    |                                  | 16<br>otion of Exp    |                     | \$ | 10,000.00 |
|                                                                          |                  | Zip Code (Plus 4)                    | Descrip                          |                       |                     | \$ | 10,000.00 |
| City To Whom Paid                                                        |                  | Zip Code (Plus 4)                    | <b>Descrip</b> CONT              | otion of Exp          | penditure           | \$ | 10,000.00 |
| To Whom Paid FRIENDS TO ELECT CHRISTIN                                   |                  | Zip Code (Plus 4)  Zip Code (Plus 4) | Descrip<br>CONT<br>MO            | DAY                   | YEAR 2003           |    |           |
| To Whom Paid FRIENDS TO ELECT CHRISTIN Mailing Address                   | NE M TARTAGLIONE |                                      | Descrip<br>CONT  MO  10  Descrip | DAY                   | YEAR 2003           |    |           |
| To Whom Paid FRIENDS TO ELECT CHRISTIN Mailing Address City To Whom Paid | NE M TARTAGLIONE |                                      | MO  10  Description  CONT        | DAY  17  otion of Exp | YEAR 2003 Denditure |    |           |

| To Whom Paid DEMOCRATIC CAMP COMM OF PHILA                                                         |       |                   |                                                                                                          | DAY                 | YEAR                                 |    |  |          |
|----------------------------------------------------------------------------------------------------|-------|-------------------|----------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------|----|--|----------|
| Mailing Address                                                                                    |       |                   |                                                                                                          | 20                  | 2003                                 | \$ |  | 1,000.00 |
| City                                                                                               | State | Zip Code (Plus 4) | Description of Expenditure CONT                                                                          |                     |                                      |    |  |          |
| To Whom Paid MONTGOMERY COUNTY DEMOC COMM                                                          |       |                   |                                                                                                          | DAY                 | YEAR                                 |    |  |          |
| Mailing Address                                                                                    |       |                   | 10                                                                                                       | 20                  | 2003                                 | \$ |  | 400.00   |
| City                                                                                               | State | Zip Code (Plus 4) | Description of Expenditure CONT                                                                          |                     |                                      |    |  |          |
| To Whom Paid CITIZENS FOR HUGHES                                                                   |       |                   | МО                                                                                                       | DAY                 | YEAR                                 |    |  |          |
| Mailing Address                                                                                    |       |                   |                                                                                                          | 20                  | 2003                                 | \$ |  | 5,000.00 |
| City                                                                                               | State | Zip Code (Plus 4) | Description of Expenditure CONT                                                                          |                     |                                      |    |  |          |
|                                                                                                    |       |                   |                                                                                                          |                     |                                      |    |  |          |
| To Whom Paid<br>KOSINSKI FOR MUNICIPAL COUR                                                        | RT    |                   | МО                                                                                                       | DAY                 | YEAR                                 |    |  |          |
|                                                                                                    | RT    |                   | <b>MO</b>                                                                                                | <b>DAY</b> 20       | <b>YEAR</b> 2003                     | \$ |  | 500.00   |
| KOSINSKI FOR MUNICIPAL COUR                                                                        | State | Zip Code (Plus 4) | 10                                                                                                       |                     | 2003                                 | \$ |  | 500.00   |
| KOSINSKI FOR MUNICIPAL COUR                                                                        |       | Zip Code (Plus 4) | 10  Descrip                                                                                              | 20                  | 2003                                 | \$ |  | 500.00   |
| KOSINSKI FOR MUNICIPAL COUR  Mailing Address  City  To Whom Paid                                   |       | Zip Code (Plus 4) | 10  Descrip CONT                                                                                         | 20                  | 2003<br>penditure                    | \$ |  | 500.00   |
| Mailing Address  City  To Whom Paid FRIENDS OF JOAN KRAJEWSKI                                      |       | Zip Code (Plus 4) | Description CONT  MO  10                                                                                 | 20 DAY              | 2003  penditure  YEAR  2003          |    |  |          |
| Mailing Address  City  To Whom Paid FRIENDS OF JOAN KRAJEWSKI  Mailing Address                     | State |                   | Description To To Description To To Description To To Description To | 20  DAY  20         | 2003  penditure  YEAR  2003          |    |  |          |
| Mailing Address  City  To Whom Paid FRIENDS OF JOAN KRAJEWSKI  Mailing Address  City  To Whom Paid | State |                   | Description 10  Description 10  Description CONT                                                         | DAY 20 btion of Exp | 2003 Penditure  YEAR  2003 Penditure |    |  |          |

| To Whom Paid COMM TO ELECT JOEL JOHNSON                                 |       |                   | мо                              | DAY | YEAR |    |            |
|-------------------------------------------------------------------------|-------|-------------------|---------------------------------|-----|------|----|------------|
| Mailing Address                                                         |       |                   | 10                              | 20  | 2003 | \$ | 500.00     |
| City                                                                    | State | Zip Code (Plus 4) | Description of Expenditure CONT |     |      |    |            |
| To Whom Paid COMM TO RETAIN JUDGE CRAIG M WASHINGTON                    |       |                   | мо                              | DAY | YEAR |    |            |
| Mailing Address                                                         |       |                   | 10                              | 20  | 2003 | \$ | 250.00     |
| City                                                                    | State | Zip Code (Plus 4) | Description of Expenditure CONT |     |      |    |            |
| Enter Count Tatal of Europe diturns on Bana 4. Beneat Count Bana Thomas |       |                   |                                 |     |      |    | PAGE TOTAL |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. |       |                   | i                               |     |      | \$ | 53,000.00  |