Campaign Finance Report

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

Filer Identificat Number :	ion	2015	0211			Repo Filed			CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing (Committe	e, Candida	ate or Lo	obbvist:			-		UNCIL 3	3 POLI	TICA		RIBUTI	ONS SSF	:			
Street Address:	300	1 WALNUT				_					-		-					
City:	PHIL	ADELPHIA	4						State:	PA			Zip Co	de: 19	104			
TYPE OF REPORT	6TH TUE PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2.) da Rima		POST- 3.			AMENDN REPORT		Yes	✓ N	0	
(place X to the right of	6TH TUE PRE-ELE		4.) da _ect	Y F 'ION	POST- 6.			TERMIN REPORT	Yes	N	0	\checkmark	
report type)	ANNUAL	. REPORT	7.	Year 2016					IG METHO CHECK OI				PAPER		\checkmark	DISK	ETTE	
Name of Office	L Sought by	y Candidat	te:						DATE O	F ELE	CTIC	ON	District Number	Office Code	Pa	ty Code	Cou Cod	
			TEC						мо	DAY	Y	EAR	170	USP	REF)	51	
PRESIDENT OF		IIED SIA	IES						11		8	2016		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of		s and	мо	DAY	YEAR	2			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:			9 20	2	016	то		10	ź	24	2016						
A. Amount Bro	ught For	ward Fron	n Last Ro	eport				\$				0.00						
B. Total Monet	ary Cont	ributions A	And Rece	eipts (From	n Sche	dule I)		\$			3,	000.00						
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$			3,	000.00						
D. Total Expen	ditures (From Sche	edule III	[)			\$ 3,000.00											
E. Ending Cash	Balance	(Subtract	t Line D	From Line	C)			\$		0.00								
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le II)		\$				0.00	4					
G. Unpaid Deb	ts And Ol	oligations	(From S	chedule IV	')			\$				0.00		,				
					AFF	IDAV	IT	SE	CTION									
PART I - If this i		•		-						• •			-					
I swear (or affirm correct and compl		report, incl	uding the	attached sc	hedule	s filed oi	n pa	per o	or by elect	ronic me	edium	, are to	the best o	f my knov	vledge	and be	ief, ti	rue
Sworn to and sub	scribed bei day of	ore me this	;	20							9	Signaturo	e of Perso	n Submitt	ing Re	oort		-
	_	Signatu	re				_						Prin	ted Name				-
My Commission E	xpires		-										Ema	il				_
		мо	DA	Y	YR					Are	ea Co	de	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report	t of a cand	lidate's a	authorized	Comn	nittee,	Can	dida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend		ne best of m	ıy knowle	dge and beli	ef this	politica	l co	mmi	ittee has n	ot viola	ed ar	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subse	cribed befo day of	ore me this		20								s	ignature	of Candida	ite			-
													Printe	ed Name				-
My Commission Ex		Signature					_						Ema	il				-
	-	мо	DA	١Y	YR	1	_			Area	Code		D	aytime Te	elephor	ie Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DISTRICT COUNCIL 33 POLITICAL CONTRIBUTIONS SSF	From:	<u>9/20/20</u>	<u>16</u> То:	<u>10/24/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	3,000.00
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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
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			\$	3,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

em:	DATE	То	:	
	DATE			
				AMOUNT
мо	DAY	YEAR		
			\$	0.00
			Г	PAGE TOTAL
M	10	10 DAY	10 DAY YEAR	

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

\$

0.00

PART B 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 Candidat	e		Rep Froi	oorting P m:	eriod	тс):			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)								
								PAGE TOTAL		
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00		

PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate Re				Reporting Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committe	ee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C on S	chedule I, Detail	led Summary Pa	age, Sectio	n 3.			\$	0.00	

PART D 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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

PART E **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 Reportin				rting Period					
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description		1				1			
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ΓAL
		iiai y i uge,	Section				\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
DISTRICT COUNCIL 33 POLITICAL CONTRIBUTIONS SSF	From:	<u>9/20/2016</u> то:	<u>10/24/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	ł	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period						
	From:			То:			
				DATE		АМС	DUNT
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 Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							TOTAL
					4	5	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate						Reporting Period					
							From: To:				
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State	Zip Code(Plus 4)									
Employer of Contributor						Occupation					
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption of	f Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
DISTRICT COUNCIL 33 POLITICAL CONTRIBUTIONS SSF			From	From <u>9/20/2016</u> To:			<u>10/24/2016</u>
			DATE				AMOUNT
To Whom Paid MARTINA WHITE			мо	DAY	YEAR		
Mailing Address 10752 BUSTLETON AVE, SUITE C			10	3	2016	\$	3,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19116	Description of Expenditure DONATION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	3,000.00