

Campaign Finance Report

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

Filer Identification Number : 20120004		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: CITIZENS FOR JORDAN HARRIS											
Street Address: 615 CHESTNUT ST., P.O BOX 39717											
City: PHILADELPHIA				State: PA		Zip Code: 19105					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2016	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	DEM			
					11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	25	2016		11	28	2016			
A. Amount Brought Forward From Last Report					\$ (1,063.31)						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 11,700.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 10,636.69						
D. Total Expenditures (From Schedule III)					\$ 6,284.69						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 4,352.00						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR JORDAN HARRIS	From: <u>10/25/2016</u> To: <u>11/28/2016</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 500.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 500.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 8,700.00
All Other Contributions (Part D)	\$ 2,500.00
TOTAL for the Reporting Period (3)	\$ 11,200.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 11,700.00
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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.**

Name of Filing Committee or Candidate CITIZENS FOR JORDAN HARRIS	Reporting Period From: <u>10/25/2016</u> To: <u>11/28/2016</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee HEALTH PARTNERS OF PHILADELPHIA			MO	DAY	YEAR	\$ 250.00
Mailing Address 901 MARKET ST STE 100			11	7	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191073111				

Full Name of Contributing Committee PENNSYLVANIANS FOR TOMORROW PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 409 N 2ND ST			10	28	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011357				

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

PAGE TOTAL
\$ 500.00

<div>PART B</div> <div>ALL OTHER CONTRIBUTIONS</div> <div>\$50.01 TO \$250.00</div> <div>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)</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
						\$ 0.00

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

PAGE TOTAL

\$ 0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR JORDAN HARRIS	From: <u>10/25/2016</u> To: <u>11/28/2016</u>

				DATE		AMOUNT	
Full Name of Contributing Committee APSCUF/CAP-PA				MO	DAY	YEAR	\$ 300.00
Mailing Address 319 N FRONT ST				10	28	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011203					
Full Name of Contributing Committee CUPAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 4309 N FRONT ST				10	28	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 171101618					
Full Name of Contributing Committee ENERGY TRANSFER PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 430 W. 18TH ST				10	28	2016	
City AUSTIN	State TX	Zip Code (Plus 4) 787011211					
Full Name of Contributing Committee HIGHMARK PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 1800 CENTER ST				11	1	2016	
City CAMP HILL	State PA	Zip Code (Plus 4) 170111702					
Full Name of Contributing Committee LAW PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 212 N 3RD ST STE 203				11	1	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011505					

Full Name of Contributing Committee MALADY & WOOTEN PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 604 N 3RD ST			11	1	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011120				
Full Name of Contributing Committee PENNSYLVANIA DEMOCRATIC PARTY			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 205 STATE ST			11	7	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011130				
Full Name of Contributing Committee PSEA PACE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 400 NORTH BROAD ST			10	28	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						PAGE TOTAL \$ 8,700.00

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 CITIZENS FOR JORDAN HARRIS	Reporting Period From: <u>10/25/2016</u> To: <u>11/28/2016</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
CHRISTOPHER RAHN							
Mailing Address INFORMATION REQUESTED				11	1	2016	\$ 2,500.00
City	State	Zip Code (Plus 4)					
Employer Name INFORMATION REQUESTED				Occupation INFORMATION REQUESTED			
Employer Mailing Address/Principal Place of Business INFORMATION REQUESTED			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 2,500.00

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	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
CITIZENS FOR JORDAN HARRIS		From: <u>10/25/2016</u> To: <u>11/28/2016</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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.						PAGE TOTAL \$ 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				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR JORDAN HARRIS	From <u>10/25/2016</u> To: <u>11/28/2016</u>

DATE				AMOUNT
To Whom Paid CAPITAL ONE	MO	DAY	YEAR	
Mailing Address 1680 CAPITAL ONE DR	11	3	2016	\$ 716.41
City MCLEAN	State VA	Zip Code (Plus 4) 221023407	Description of Expenditure CREDIT CARD PAYMENT	
To Whom Paid CAPITAL ONE	MO	DAY	YEAR	
Mailing Address 1680 CAPITAL ONE DR	11	7	2016	\$ 281.02
City MCLEAN	State VA	Zip Code (Plus 4) 221023407	Description of Expenditure CREDIT CARD PAYMENT	
To Whom Paid CAPITAL ONE	MO	DAY	YEAR	
Mailing Address 1680 CAPITAL ONE DR	11	14	2016	\$ 259.67
City MCLEAN	State VA	Zip Code (Plus 4) 221023407	Description of Expenditure CREDIT CARD PAYMENT	
To Whom Paid CHILI'S BAR & GRILL	MO	DAY	YEAR	
Mailing Address 2320 W OREGON AVE QUARTERMASTER PLAZA	11	25	2016	\$ 99.83
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191454122	Description of Expenditure MEAL	
To Whom Paid GAMBLE COMPANIES	MO	DAY	YEAR	
Mailing Address 1639 CHRISTIAN ST	11	14	2016	\$ 350.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191462009	Description of Expenditure CONSULTING SERVICES	

To Whom Paid JORDAN A. HARRIS			MO	DAY	YEAR	\$ 1,400.00
Mailing Address 1353 S 31ST ST			11	18	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191463505	Description of Expenditure REIMBURSEMENT			
To Whom Paid ZYMIRRA HERRIN			MO	DAY	YEAR	\$ 80.00
Mailing Address 1517 MONTROSE ST			11	18	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191462114	Description of Expenditure SERVICES RENDERED			
To Whom Paid IHOP			MO	DAY	YEAR	\$ 35.44
Mailing Address 10740 ROOSEVELT BLVD			11	22	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191163938	Description of Expenditure MEAL			
To Whom Paid JERALD JOHNS			MO	DAY	YEAR	\$ 500.00
Mailing Address INFORMATION REQUESTED			11	18	2016	
City	State	Zip Code (Plus 4)	Description of Expenditure GOTV			
To Whom Paid MEN'S WAREHOUSE			MO	DAY	YEAR	\$ 959.98
Mailing Address 1624 CHESTNUT ST			11	28	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191035119	Description of Expenditure CLOTHES			
To Whom Paid MEN'S WAREHOUSE			MO	DAY	YEAR	\$ 130.00
Mailing Address 1624 CHESTNUT ST			11	28	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191035119	Description of Expenditure CLOTHES			

To Whom Paid SAM'S CLUB			MO	DAY	YEAR	\$ 1,173.54
Mailing Address 1000 FRANKLIN MILLS CIR			11	22	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191543115	Description of Expenditure EVENT SUPPLIES			

To Whom Paid SAM'S CLUB			MO	DAY	YEAR	\$ 45.00
Mailing Address 1000 FRANKLIN MILLS CIR			11	22	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191543115	Description of Expenditure EVENT SUPPLIES			

To Whom Paid SUNOCO INC			MO	DAY	YEAR	\$ 9.95
Mailing Address 1735 MARKET ST			11	25	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191037501	Description of Expenditure FUEL			

To Whom Paid U-HAUL			MO	DAY	YEAR	\$ 75.31
Mailing Address 2601 SNYDER AVE			11	25	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191452518	Description of Expenditure RENTAL			

To Whom Paid U-HAUL			MO	DAY	YEAR	\$ 38.21
Mailing Address 2601 SNYDER AVE			11	25	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191452518	Description of Expenditure RENTAL			

To Whom Paid UBER			MO	DAY	YEAR	\$ 25.56
Mailing Address 1455 MARKET ST STE 400			11	7	2016	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 941031355	Description of Expenditure TRAVEL			

To Whom Paid UBER			MO	DAY	YEAR	
Mailing Address 1455 MARKET ST STE 400			11	8	2016	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 941031355	Description of Expenditure TRAVEL			

To Whom Paid UBER			MO	DAY	YEAR	
Mailing Address 1455 MARKET ST STE 400			11	9	2016	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 941031355	Description of Expenditure TRAVEL			

To Whom Paid VICTIM/WITNESS SERVICES OF SOUTH PHILADELPHIA, INC			MO	DAY	YEAR	
Mailing Address 1426 S 12TH ST			11	18	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191474935	Description of Expenditure DONATION			

To Whom Paid WALGREENS			MO	DAY	YEAR	
Mailing Address 1 S BROAD ST LBBY 2			11	28	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191073426	Description of Expenditure EVENT SUPPLIES			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 6,284.69

