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 2(0150069			Repor Filed I		CANDI	DATE		СОМ	1ITTEE	✓	LOBI	BYIST	
Name of Filing	Committee, Can	didate or l	Lobbyist:	 F	PHILLY	SET (GO								
Street Address:	1414 S PE	NN SQ UN	IT 17E												
City:	PHILADELF	PHIA					State:	PA			Zip Co	de: 19	102		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE-	30 D/ PRIM				AMENDMENT REPORT?		Yes	No	\checkmark		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		30 D/ ELEC		POST-	6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL REPO	RT 7. X	Year 201	6			NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Cand	idate:					DATE O	FELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR					
							11		8	2016	·	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 2	9 20	016 1	0	1		2	2017					
A. Amount Bro	ught Forward F	rom Last I	Report			\$			10,2	275.00					
B. Total Monet	ary Contributio	ns And Re	ceipts (Fro	m Sched	dule I)	\$;		1	.85.00					
C. Total Funds Available (Sum Of Lines A and B)							;		10,4	160.00					
D. Total Expen	ditures (From S	Schedule I	II)			\$;		6	50.00					
E. Ending Cash	Balance (Subt	ract Line D	From Line	e C)		\$			9,8	10.00					
F. Value Of In-	Kind Contributi	ons Receiv	ved (From	Schedul	e II)	\$	5			0.00	-				
G. Unpaid Deb	ts And Obligatio	ons (From	Schedule I	(V)		\$;			0.00		·			
				AFFI	IDAVI	T SE	CTION								
PART I - If this i		• •	-					• •		-					
I swear (or affirm correct and compl		including th	e attached s	chedules	filed on	paper	or by elect	ronic me	edium	, are to f	the best o	f my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me day of	this	20						s	ignature	e of Perso	n Submitt	ing Rep	oort	
	Siar	ature				_					Prin	ted Name			
My Commission E	xpires					_					Ema	il			
	МО	[DAY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a c	andidate's	authorize	d Comm	ittee, C	Candid	late shall	sign he	ere.						
I swear (or affirm) No 320) as amend	ed.		ledge and be	elief this	political	comm	nittee has n	ot violat	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subse	cribed before me t day of	his	20							s	ignature (of Candida	ite		
						_					Printe	ed Name			
My Commission Ex	Signatu Dires	ire				_					Ema	il			
	мо		DAY	YR		-		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** PHILLY SET GO From: <u>11/29/2016</u> **To:** <u>1/2/2017</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 85.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 100.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 100.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 185.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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.

From				Reporting Period						
	n:		То	:						
		DATE			AMOUNT					
	мо	DAY	YEAR							
				\$	0.00					
4)										
				Г	PAGE TOTAL					
	1)		MO DAY	MO DAY YEAR	MO 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 Candidate Reporting Period										
PHILLY SET GO Fro				Fro	m:	<u>11/29/2</u>):	<u>1/2/2017</u>		
						DATE			AMOUNT	
Full Name of Contributor Ashley Hopkins					мо	DAY	YEAR			
Mailing Address 1901 Callowhill St								\$	100.00	
City Philadelphia	State		Zip Code (Plus 4)		12	20	2016			
····	PA		19130							
									PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I	, Detaile	ed Summary Pag	e, Se	ection 2			\$	100.00	

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						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Comm	nittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C or	n Schedule I, Detaile	ed 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		АМС	DUNT
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 Place of City Business				State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on	Schedule I, Detai	iled Sumr	narv Page, Secti	on 3.		Γ	PAG	GE TOTAL
	,		,	-			\$	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			Reporting Period							
Fr				From: To				:		
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$		0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	•						-			
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL	
		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	
PHILLY SET GO	From:	<u>11/29/2016</u> то:	<u>1/2/2017</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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					
						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 Detai Section 2.			iled Sum	mary Pag	je,	PAGE	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						
					Fro	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 Place of City Stat Business			State		Zip Code(Plus 4) Descri			otion 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	2		Reporting Period					
PHILLY SET GO			From	<u>11/2</u>	<u>9/2016</u>	То:	<u>1/2/2017</u>	
				AMOUNT				
To Whom Paid Nationbuilder			мо	DAY	YEAR			
Mailing Address 520 S. Grand Aven	ue		12	12	2016	\$	500.00	
City Los Angeles	State	Zip Code (Plus 4)	Descri	tion of Ex	penditure			
	CA	90071	for eve	nt space				
To Whom Paid Nationbuilder			мо	DAY	YEAR			
Mailing Address 520 S. Grand Aven	ue		12	28	2016	\$	150.00	
City Los Angeles	State	Zip Code (Plus 4)	Descri	otion of Exp	penditure			
	CA	90071	website	e maintena	ince			
							PAGE TOTAL	
Enter Grand Total of Expenditures	on Page 1, R	leport Cover Page, Item I) .			\$	650.00	

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