Campaign Finance Report

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

Filer Identificati Number :	on 2015	0282			Repo		y :	CAND	IDAT	E	С	СОММ	MITTEE / LOBBYIST					
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		DAWI	ΚIN	S, JA	SON FF	IEND	S OF	=							
Street Address:	6333 GLENLC	CH STR	EET															
City:	PHILADELPHI	Α						State:	PA				Zip Cod	ie: 19	135			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		30 DA PRIMA		POST	- 3.	=		AMENDM REPORT		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pre	<u>-</u> 5.		30 DA		POST	- 6.			TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPORT	7.	Year 2016					NG METH CHECK (PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:	_					DATE	OF EL	ECT.	ION		District Number	Office Code	Par	ty Code	Coun	
	,							МО	DAY	1	YEAR	₹	179	STH	DEN	1	51	
REPRESENTATI	VE IN THE GENER	RAL ASS	EMBLY					1	1	8	20	016		(SEE INSTRUCTIONS FOR CODES)				1
Summary of	Receipts and	МО	DAY	YEAR	2			МО	DAY	′	YEAR	₹	FOR OFFICE USE ONLY					
Expenditures	from:		9 20	2	016	TC)	1	0	24	2	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				1,054	1.59						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule 1	()	\$				5,300	0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 6,354.59																		
D. Total Expen	ditures (From Sch	edule II	I)				\$				1,562	2.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$				4,792	.59						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)		\$				0.	.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$				4,816	5.24						
				AFF	'IDA	/IT	SE	CTION										
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.	If this	is	a Car	ndidate	report	, car	ndidat	te sig	n here.					
I swear (or affirm) correct and complete) that this report, inc ete.	uding the	attached scl	nedule	s filed	on p	aper	or by elec	tronic	medi	ium, ar	e to ti	he best o	f my kno	wledge	and beli	ef , tru	ıe
Sworn to and subs	cribed before me this	•	20								Signa	ature	of Perso	n Submit	ting Rep	ort		_
			<u> </u>			_							Prin	ted Name	e			-
My Commission Ex	Signatu opires	re											Ema	il				-
	мо	D	AY	YR			•			Area	Code			e Teleph	one Nu	mber		-
Part II- If this is	a report of a can	lidate's	authorized	Comn	nittee	, Ca	ndid	ate shal	l sign	here	e.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and beli	ef this	politic	al c	omm	ittee has	not vic	lated	d any pi	rovisi	ons of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subso	ribed before me this											Si	gnature o	of Candid	ate			- [
	day of		20															_
	<u> </u>												Printe	d Name				
My Commission Exp	Signature pires												Ema	il				-
	МО	D	AY	YR	1				Are	ea Co	de		Da	aytime T	elephor	ie Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
DAWKINS, JASON FRIENDS OF	From:	<u>9/20/201</u>	<u>6</u> То:	10/24/2016
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)			\$	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)			\$	5,300.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	5,300.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	5,300.00

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.

Name of Filing Committe	e or Candidate		Re	eporting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing	Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	5 4)					

PAGE TOTAL
0.00

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

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	Re	porting P	eriod			
	Fro	om:		To) :	
	'		DATE			AMOUNT
Full Name of Contributor		МО	DAY	YEAR		
Mailing Address					\$	0.00
City	Zip Code (Plus 4)					

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

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			
DAWKINS, JASON FRIENDS OF			From:	9/2	0/2016	То:	10/24/2016
				DA	TE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
AFSCME COUNCIL 13 POL & LEG ACCT							\$ 5,000.00
Mailing Address 4031 EXECUTIVE PARK DRIVE				10	6	2016	,
City HARRISBURG	State	Zip Code	e (Plus 4)			2010	
	PA	171111	507				
Full Name of Contributing Committee				мо	DAY	YEAR	
Steamfitters local union 449				MO	DAI	ILAK	\$ 300.00
Mailing Address 1517 Woodruff St				10	4	2016	
City Pittsburg	State	Zip Code	e (Plus 4)]	'	2010	

15220

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

PA

PAGE TOTAL\$ 5,300.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candida	te			Rep	orting Pe	eriod			
				Fror	n:		Т	o:	
					D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	ip Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal F	lace of Business		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on Sc	nedule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	or Candidate		Report	ing Peri	od			
			From:			To:		
		•		E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	<u> </u>	'			•			
Futor Curred Total of Bout	F an Cabadula I Datailad	I Comment Dama Co		4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	Summary Page, So	ection	4.			\$	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	i	
DAWKINS, JASON FRIENDS OF	From:	<u>9/20/2016</u> To:	<u>10/24/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

alling Address ty State Zip Code (Plus 4)			Reporting Period					
			From:			To	·	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
DAWKINS, JASON FRIENDS OF	From	9/20/2016	То:	10/24/2016	

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Moving Frankford Forward			140		ILAK		
Mailing Address 4922 Duffield	Street		10	3	2016	\$	12.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19124	Bank Fe	ee			
To Whom Paid			МО	DAY	YEAR		
42nd Ward Committee			1-10		ILAK		
Mailing Address P.O. Box 244	19		10	7	2016	\$	50.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19120	Gala tic	ket			
To Whom Paid			мо	DAY	YEAR		
42nd Ward Committee							
Mailing Address P.O. Box 24419			10	7	2016	\$	500.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19120	Educati	on Walk			
To Whom Paid			МО	DAY	YEAR		
Frankford CDC							
Mailing Address 4900 Griscom	1		10	24	2016	\$	500.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19124	Donatio	n			
To Whom Paid			мо	DAY	YEAR		
Olney Arts Festival			1-10		12/11		
Mailing Address 1049 Arbuta	Road		10	19	2016	\$	500.00
City Abington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19001	Donatio	n			
Enton Cuand Total of From 12	humas an Darra 1 Da	mant Caven Bass Its B					PAGE TOTAL
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item D	·.			\$	1,562.00
						1	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
DAWKINS, JASON FRIENDS OF			From:	<u>9/20/2016</u> To:			10/24/2016		
·				DATE				Outstanding Balance of Debt	
Name of Creditor Jason Dawkins				мо	DAY	YEAR			
Mailing Address 4612 Lesher Street				10	24	2016	\$	4,816.24	
City Philadelphia	Philadelphia State Zip Code (Plus 4) Description of Debt					t			
PA 19124 Camp					paign Expense				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL	
							\$	4,816.24	