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 201 | 30202 | | | Rep File | | | CANDI | DATE | V | | | | | | | |
|--|-------------------------------|-------------|------------------------|--------|-------------|-------|----------------|-------------|----------|--------|----------|--------------------|----------------|--------------|-----------|---------------|----|
| Name of Filing C | ommittee, Candi | date or L | obbyist: | : | Solo | mor | n, Jar | ed Friend | ls of | - | | | | | | | |
| Street Address: | 6601 Rutlan | d St | | | | | | | | | | | | | | | |
| City: | Philadelphia | | | | | | | State: | PA | | | Zip Cod | ie: 19 | 149 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | PRE- | - 2 | 2. | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT | | Yes | No | • | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE | - 5 | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | • | |
| report type) | ANNUAL REPOR | 7. X | Year 2016 | | | | | IG METHO | | | | PAPER | | \checkmark | DISKE | TTE | |
| Name of Office S | - Sought by Candid | ate: | | | | | | DATE 0 | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Count Code | у |
| REDRESENIT∆TI | VE IN THE GENE | -ρΔΙ Δςς | EMRI V | | | | | МО | DAY | YE | AR | 202 | STH | DEM | 1 | 51 | |
| NEI RESERVATI | VE IIV THE GENE | | EMBET | | | | | 11 | | 8 | 2016 | | (SEE INS | STRUCTIO | ONS FOR C | ODES) | |
| Summary of Expenditures | Receipts and | МО | | YEAR | | _ | _ | МО | DAY | | AR | FO | R OFFIC | E USE | ONLY | | |
| | | | 11 29 | 20 | 016 | Т | 1 | 12 | | 31 | 2016 | | | | | | |
| | ught Forward Fro | | • | | | | \$ | | | • | 98.43) | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From S | Sche | dule | 1) | \$ | | | 2,0 | 146.29 | | | | | | |
| C. Total Funds | Available (Sum (|)f Lines A | and B) | | | | \$ | | | (7,15 | 52.14) | | | | | | |
| D. Total Expend | ditures (From Sc | hedule II | I) | | | | \$ | | | 7 | 01.71 | | | | | | |
| E. Ending Cash | Balance (Subtra | ct Line D | From Line C |) | | | \$ | | | (7,85 | 3.85) | | | | | | |
| F. Value Of In- | Kind Contribution | ıs Receiv | ed (From Sch | hedul | le II) |) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligation | s (From S | Schedule IV) | | | | \$ | | | 20,3 | 00.00 | | | ' | | | |
| | | | | AFF: | IDA | ١٧٧ | T SE | CTION | | | | | | | | | |
| PART I - If this is | a Committee re | port, trea | surer sign he | ere. I | f thi | is is | a Can | ndidate re | eport, o | andio | late sig | ın here. | | | | | |
| I swear (or affirm) correct and comple | | cluding the | e attached sche | edules | filed | d on | paper (| or by elect | ronic m | edium, | are to t | he best o | f my knov | wledge a | and belie | ef , tru | e. |
| Sworn to and subs | cribed before me th day of | is | 20 | | | | | | | s | ignature | of Perso | n Submitt | ting Rep | ort | | |
| | Signat | ure | | | | | - | | | | | Prin | ted Name |) | | | - |
| My Commission Ex | rpires | | | | | | _ | | | | | Ema | il | | | | - |
| | МО | D | AY | YR | | | | | Arc | ea Cod | e | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a ca | ndidate's | authorized C | Comm | itte | e, C | andida | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | my knowl | edge and belief | f this | politi | ical | commi | ittee has n | ot viola | ted an | y provis | ions of th | e act of Ju | une 3,19 | 937 (P.L. | 1333 | , |
| Sworn to and subsc | | S | | | | | | | | | S | ignature o | of Candida | ate | | | - |
| | day of | | | | | | - | | | | | Printe | d Name | | | | - |
| | Signature | : | | | | | - | | | | | Ema | il | | | | - |
| My Commission Exp | ires | | | | | | | | | | | Ema | | | | | |
| | МО | D | AY | YR | | | - | | Area | Code | | Da | aytime To | elephon | e Numbe | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | Period | | |
|--|-----------|-----------|---------------|------------|
| Solomon, Jared Friends of | From: | 11/29/201 | <u>.6</u> To: | 12/31/2016 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 95.00 |
| 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) | | | \$ | 404.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 404.00 |
| 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) | | | \$ | 1,547.29 |
| TOTAL for the Reporting | Period | (3) | \$ | 1,547.29 |
| 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 | | | \$ | 2,046.29 |

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 | | Reportin | ng P | eriod | | | |
|------------------------------|--------------|-------------------|----------|------|-------|------|----------|--------|
| | | | From: | | | To | ! | |
| | | • | | | DATE | | | AMOUNT |
| Full Name of Contributing Co | ommittee | | МО | | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 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 | | Report | ting Pe | eriod | | | |
|--------------------------------------|-----------|-------------------|----------------|---------|---------|-----------------|----|------------|
| Solomon, Jared Friends of | | | From: | | 11/29/2 | 2 <u>016</u> To |): | 12/31/2016 |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | M | чо | DAY | YEAR | | |
| Keith Mecca | | | | | | | | |
| Mailing Address 709 Yarmo | outh Dr | | | | | | \$ | 150.00 |
| City West Chester | State | Zip Code (Plus 4) |) | 12 | 30 | 2016 | | |
| | PA | 193806492 | | | | | | |
| Full Name of Contributor David Hyman | | | M | мо | DAY | YEAR | | |
| Mailing Address 413 W Me | rmaid I n | | | | | | \$ | 54.00 |
| City Philadelphia | State | Zip Code (Plus 4) | , | 12 | 29 | 2016 | Ċ | 3 1100 |
| ,, | PA | 191184203 | | | | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | |
| Larry Holman | | | | | | | | |
| Mailing Address 6746 Sout | der St | | | | | | \$ | 100.00 |
| City Philadelphia | State | Zip Code (Plus 4) |) | 12 | 29 | 2016 | | |
| | PA | 191492208 | | | | | | |
| Full Name of Contributor | | | N | мо | DAY | YEAR | | |
| Donna McDonough | | | | | | | | |
| Mailing Address 512 Atwood | od Ct | | | | | | \$ | 100.00 |
| City Newtown | State | Zip Code (Plus 4) |) | 12 | 28 | 2016 | | |
| | PA | 189401755 | | | | | | |
| | | | | | | | | PAGE TOTAL |

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

PAGE TOTAL \$ 404.00

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 | | P | AMOUNT | |
| Full Name of Contributing Committee | | | | МО | DAY | YEAR | | 0 | 00 |
| Mailing Address | | | | | | | + | 0. | 00 |
| City | State | Zip Code | e (Plus 4) | | | | | | |
| | | | | | | | | PAGE TOTAL | |
| Enter Grand Total of Part C on Scheo | dule I, Detailed Sun | nmary Pa | age, Sectio | n 3. | | | \$ | 0.0 | 0 |

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 | | | Re | Reporting Period | | | | | | |
|--|---------------------|----------|------------|------------------|---------|---------------|-----------|------------|--|--|
| Solomon, Jared Friends of | | | Fr | om: | 11/29/2 | <u>016</u> To | :] | 12/31/2016 | | |
| | | | • | DA | ATE | | АМ | OUNT | | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | 200.00 | | |
| Jared G Solomon | | | | PIO | DAI | ILAK | \$ | 200.00 | | |
| Mailing Address 6616 Large St | | | | 12 | 8 | 2016 | 1 | | | |
| City Philadelphia | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 191492 | 122 | | | | 1 | | | |
| Employer Name Spector Gadon & Spector & Spector Gadon & Spector & Sp | Rosen, P.C. | | | Occupat | ion | Attorne | / | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code | (Plus 4) | | |
| 1635 Market St | | Phili | adelphia | | PA | | 19103 | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | | | |
| Jared G Solomon | | | | PIO | DAT | ILAK | \$ | 100.00 | | |
| Mailing Address 6616 Large St | | | | 12 | 27 | 2016 | | | | |
| City Philadelphia | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 191492 | 122 | | | | l | | | |
| Employer Name Spector Gadon & Spector & Sp | Rosen, P.C. | | | Occupat | ion | Attorne | / | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code | (Plus 4) | | |
| 1635 Market St | | Phila | adelphia | | PA | | 19103 | | | |
| Full Name of Contributor | | | | | | | | | | |
| Lewis Schifreen | | | | МО | DAY | YEAR | \$ | 500.00 | | |
| Mailing Address 9244 Old Newtown | Rd | | | 12 | 29 | 2016 | 7 | | | |
| City Philadelphia | State | Zip Code | (Plus 4) | | 29 | 2010 | 1 | | | |
| | PA | 191154 | 932 | | | | | | | |
| Employer Name Self-Employed | | | | Occupat | ion , | Account | ant | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code | (Plus 4) | | |
| 9244 Old Newtown Rd | | Phila | adelphia | | PA | | 19115 | | | |
| Full Name of Contributor | | | | | | | | | | |
| Jared G Solomon | | | | МО | DAY | YEAR | \$ | 747.29 | | |
| Mailing Address 6616 Large St | | | | 12 | 31 | 2016 | 7 | | | |
| City Philadelphia | State | Zip Code | (Plus 4) | 12 | 31 | 2010 | 1 | | | |
| | PA | 191492 | 122 | | | | | | | |
| Employer Name Spector Gadon & Spector & Specto | Rosen, P.C. | | | Occupat | ion | Attorne | / | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code | (Plus 4) | | |
| 1635 Market St | | Phila | adelphia | | PA | | 19103 | | | |
| Enter Grand Total of Part C on School | tule T. Detailed Su | ımmərv | Dage Sec | tion ? | | | PA | GE TOTAL | | |

1,547.29

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: | | |
| | | | | D | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | 7 | |
| City | State | Zip Code (Pl | us 4) | | | | | |
| Receipt Description | <u>'</u> | <u>'</u> | | | 1 | | · | |
| Futor Curred Total of Doub | Fan Cabadula I. Datailad | I Communication of the Communi | | 4 | | | F | PAGE TOTAL |
| Enter Grand Total of Part | E ON Schedule 1, Detalled | i Summary Page, S | 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 Per | iod | |
|--|---------------|------------------------------|-------------------|
| Solomon, Jared Friends of | From: | <u>11/29/2016</u> To: | <u>12/31/2016</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTO | R | |
| 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, | | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candi | idate | | Reportin | g 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 on | Schedule II, In-Ki | nd Contributions Detai | led Sum | mary Pag | 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 | | | AMOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | \$ | | 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 Zij | p Code(Plus 4) | Descr | iptio | n of Contribution | on |
| Enter Grand Total of Part G on Sch | edule II. In-K | ind | Contributions D | etaile | ed | | | | PAGE TOT | ΓAL |
| Summary Page, Section 3. | | | | | - | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting F | Period | | |
|---------------------------------------|-------------|------------|-----|------------|
| Solomon, Jared Friends of | From | 11/29/2016 | То: | 12/31/2016 |

| | | | DATE | | | AMOUNT |
|--------------------|---|---|------------------|--------------------|--|--------|
| | | MO | DAY | YEAR | | |
| | | | | | | |
| | | 11 | 30 | 2016 | \$ | 20.82 |
| State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| PA | 191022819 | Food | | | | |
| | | MO | DAY | VEAD | | |
| | | MO | DAT | TEAR | | |
| | | 11 | 30 | 2016 | \$ | 6.45 |
| State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| PA | 191492756 | Postage | ! | | | |
| | | | DAY | VEAD | | |
| | | МО | DAY | YEAR | | |
| | | 12 1 2016 \$ | | | | 100.00 |
| State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| PA | 191290077 | Donatio | n | | | |
| • | • | | l | | | |
| | | МО | DAY | YEAR | | |
| ' Ste 500 | | 12 | 2 | 2016 | \$ | 320.00 |
| State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| DC | 200055006 | Softwar | e | | | |
| • | · | | | | | |
| | | МО | DAY | YEAR | | |
| | | | | 2016 | \$ | 36.00 |
| | | 12 | 2 | 2016 | | |
| State | Zip Code (Plus 4) | | 2 tion of Exp | | · | |
| State PA | Zip Code (Plus 4) 152222707 | | l tion of Exp | | · | |
| | | Descript Bank Fe | tion of Exp | enditure | · · · | |
| | | Descript | l tion of Exp | | • | |
| | | Descript Bank Fe | tion of Exp | enditure | \$ | |
| | | Descript Bank Fe | tion of Exp | YEAR 2016 | | 10.80 |
| | State PA State PA State State State State State State State | State Zip Code (Plus 4) 191492756 State Zip Code (Plus 4) 191290077 State State Zip Code (Plus 4) 191290077 State Zip Code (Plus 4) | State | MO DAY 11 30 | MO DAY YEAR 11 30 2016 State 2ip Code (Plus 4) PA 191022819 Food | MO |

| To Whom Paid PNC Mailing Address 249 5th Ave 12 City Pittsburgh State 2ip Code (Plus 4) Descript PA 152222707 Bank Fe To Whom Paid PNC Mailing Address 249 5th Ave 12 City Pittsburgh State 2ip Code (Plus 4) Descript PA 152222707 Bank Fe To Whom Paid PA 152222707 Bank Fe To Whom Paid Adobe Systems Inc. Mailing Address 321 Park Ave 12 City San Jose State 2ip Code (Plus 4) Descript PA 951102704 Website To Whom Paid Wawa Mo Mailing Address 6460 Bustleton Ave 12 City Philadelphia State 2ip Code (Plus 4) Descript PA 191492904 Food To Whom Paid Wawa 12 City Philadelphia State 2ip Code (Plus 4) Descript PA 191492904 Food To Whom Paid USPS 6382 Castor Ave 12 City Philadelphia State 2ip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State 2ip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Walgreens Mo | | | | | | | |
|---|---|-----------|-----------|-------|--|--|--|
| Mailing Address 249 5th Ave 12 City Pittsburgh PA 152222707 Bank Fe To Whom Paid PNC Mailing Address 249 5th Ave 12 City Pittsburgh PA 152222707 Bank Fe To Whom Paid PNC Mailing Address 249 5th Ave 12 City Pittsburgh State Zip Code (Plus 4) Descript Bank Fe To Whom Paid PNC Mailing Address 249 5th Ave 12 City Pittsburgh State Zip Code (Plus 4) Descript Bank Fe To Whom Paid Addbe Systems Inc. Mo Mo Adobe Systems Inc. Mailing Address 321 Park Ave 12 City San Jose State Zip Code (Plus 4) Descript PA 152222707 Bank Fe CA 951102704 Website To Whom Paid Wawa Mailing Address 6460 Bustleton Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Walgreens Mo Mailing Address 7201 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Walgreens Mo Mailing Address 7201 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Walgreens Mo Mailing Address 7201 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage | DAY | YEAR | | | | | |
| City Pittsburgh State PA Zip Code (Plus 4) Eank Fe Bank | | | | | | | |
| PA | 5 | \$ | 43.00 | | | | |
| No | 4) Description of Expenditure | | | | | | |
| Mo Mailing Address 249 5th Ave 12 2 2 2 2 2 2 2 2 | Bank Fee | | | | | | |
| PNC | DAY | YEAR | | | | | |
| City Pittsburgh State PA Zip Code (Plus 4) 152222707 Descript Bank Fe To Whom Paid PNC Molining Address 249 5th Ave 12 City Pittsburgh State PA Zip Code (Plus 4) 152222707 Descript Bank Fe To Whom Paid Wawa MO < | | | 1 | | | | |
| To Whom Paid PNC Mailing Address 249 5th Ave 12 City Pittsburgh State Zip Code (Plus 4) 152222707 Bank Fe To Whom Paid Adobe Systems Inc. Mailing Address 321 Park Ave 12 City San Jose State Zip Code (Plus 4) PA 152222707 Bank Fe CA 25102704 Website To Whom Paid Wawa Mo Mo Mo To Whom Paid USPS Mailing Address 6460 Bustleton Ave 12 City Philadelphia State Zip Code (Plus 4) PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) PA 191492756 Postage To Whom Paid Walgreens Mo Mo To Whom Paid Walgreens Mo To Whom Paid PA 191491107 Food To Whom Paid | 6 | 2016 | \$ | 43.00 | | | |
| No | Description of Expenditure | | | | | | |
| PNC Mailing Address 249 5th Ave 12 12 152222707 1522222707 1522222707 1522222707 1522222707 1522222707 1522222707 1522222707 15222222707 1522222707 1522222707 1522222707 1 | Bank Fee | | | | | | |
| PNC | DAY | YEAR | | | | | |
| City Pittsburgh State Zip Code (Plus 4) Descript Bank Fe To Whom Paid Adobe Systems Inc. Mailing Address 321 Park Ave 12 City San Jose State Zip Code (Plus 4) P51102704 Website To Whom Paid Wawa Mo Mailing Address 6460 Bustleton Ave 12 City Philadelphia State Zip Code (Plus 4) PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) PA 191492756 Postage To Whom Paid Usprs Mo Mo To Whom Paid Walgreens Mo Mo To Whom Paid Yelphia State Zip Code (Plus 4) 191492756 Postage To Whom Paid Yelphia State Zip Code (Plus 4) 191492756 Postage To Whom Paid Walgreens Mo Mo To Whom Paid Yelphia State Zip Code (Plus 4) 191492756 Postage To Whom Paid Yelphia State Zip Code (Plus 4) 191492756 Postage To Whom Paid Yelphia PA 191491107 Food To Whom Paid Yelphia State Zip Code (Plus 4) 191491107 Food | | | | | | | |
| PA 152222707 Bank Fe | 7 | 2016 | \$ | 7.00 | | | |
| To Whom Paid Adobe Systems Inc. Mailing Address 321 Park Ave 12 City San Jose State Zip Code (Plus 4) Descript CA 951102704 Website To Whom Paid Wawa Mailing Address 6460 Bustleton Ave 12 City Philadelphia State Zip Code (Plus 4) PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) PA 191492756 Postage To Whom Paid USPS Mailing Address 7201 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) PA 191492756 Postage To Whom Paid Walgreens Mo Mo To Whom Paid Yellow Philadelphia State Zip Code (Plus 4) Poscript PA 191491107 Food To Whom Paid Walgreens PA 191491107 Food | Description of Expenditure | | | | | | |
| Adobe Systems Inc. Mailing Address 321 Park Ave 12 City San Jose State Zip Code (Plus 4) 951102704 Website To Whom Paid Wawa Mailing Address 6460 Bustleton Ave 12 City Philadelphia State Zip Code (Plus 4) 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) 191492756 Postage To Whom Paid Walgreens Mo To Whom Paid USPS 212 City Philadelphia State Zip Code (Plus 4) 191492756 Postage To Whom Paid Walgreens Mo Mo To Whom Paid Yell Castor Ave 12 City Philadelphia State Zip Code (Plus 4) 191492756 Postage To Whom Paid Yell Castor Ave 12 City Philadelphia State Zip Code (Plus 4) 191491107 Food To Whom Paid Yell Castor Ave 12 City Philadelphia State Zip Code (Plus 4) 191491107 Food | Bank Fee | | | | | | |
| Adobe Systems Inc. Mailing Address 321 Park Ave Zip Code (Plus 4) Descript Website To Whom Paid Wawa Mo Mailing Address 6460 Bustleton Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA To Whom Paid Walgreens State Zip Code (Plus 4) Descript PA To Whom Paid Walgreens Mo To Whom Paid Walgreens Mailing Address 7201 Castor Ave City Philadelphia State Zip Code (Plus 4) Descript PA Mailing Address 7201 Castor Ave City Philadelphia State Zip Code (Plus 4) Descript PA To Whom Paid | DAY | YEAR | | | | | |
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| To Whom Paid Wawa Mailing Address 6460 Bustleton Ave City Philadelphia State PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave City Philadelphia State PA 191492756 Postage To Whom Paid Walgreens Mo To Whom Paid Walgreens Food To Whom Paid Walgreens Mo To Whom Paid PA 191491107 Food | Description of Expenditure | | | | | | |
| Mailing Address 6460 Bustleton Ave 12 City Philadelphia State PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Usprens PA 191492756 Postage To Whom Paid PA 191492756 Postage To Whom Paid PA 191491107 Food To Whom Paid PA 191491107 Food | Website | | | | | | |
| Mailing Address 6460 Bustleton Ave City Philadelphia State PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State PA 191492756 Postage To Whom Paid PA 191491107 Food To Whom Paid PA 191491107 Food | DAY | YEAR | | | | | |
| City Philadelphia State PA 191492904 Food To Whom Paid USPS Mailing Address 6382 Castor Ave 12 City Philadelphia State PA 191492756 Postage To Whom Paid Walgreens Mo City Philadelphia State PA 191492756 Postage To Whom Paid Walgreens Mo To Whom Paid Walgreens Mo To Whom Paid Philadelphia State PA 191491107 Food To Whom Paid PA 191491107 Food | | | | | | | |
| To Whom Paid USPS Mailing Address 6382 Castor Ave City Philadelphia To Whom Paid Walgreens Mo To Whom Paid Walgreens Mo To Whom Paid Walgreens To Whom Paid Walgreens To Whom Paid To Whom Paid Walgreens To Whom Paid Walgreens To Whom Paid To Whom Paid Walgreens To Whom Paid | 13 | 2016 | \$ | 14.69 | | | |
| To Whom Paid USPS Mailing Address 6382 Castor Ave City Philadelphia State Zip Code (Plus 4) PA 191492756 Postage To Whom Paid Walgreens Mailing Address 7201 Castor Ave City Philadelphia State Zip Code (Plus 4) PA 191491107 Food To Whom Paid | Description of Expenditure | | | | | | |
| Mailing Address 6382 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Walgreens 12 City Philadelphia State Zip Code (Plus 4) PA 191491107 Food To Whom Paid Yalgreens 12 To Whom Paid Yalgreens PA 191491107 Food | Food | | | | | | |
| Mailing Address 6382 Castor Ave City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Walgreens Mailing Address 7201 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191491107 Food | DAY | YEAR | | | | | |
| City Philadelphia State Zip Code (Plus 4) Descript PA 191492756 Postage To Whom Paid Walgreens Mailing Address 7201 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191491107 Food | | | | | | | |
| To Whom Paid Walgreens Mailing Address 7201 Castor Ave City Philadelphia State PA 191492756 Postage MO 12 2ip Code (Plus 4) PA 191491107 Food To Whom Paid | 15 | 2016 | \$ | 6.45 | | | |
| To Whom Paid Walgreens Mailing Address 7201 Castor Ave City Philadelphia State PA 191491107 Food To Whom Paid | Description of Expenditure Postage | | | | | | |
| Walgreens Mailing Address 7201 Castor Ave City Philadelphia State PA 191491107 Food To Whom Paid | | | | | | | |
| Mailing Address 7201 Castor Ave 12 City Philadelphia State Zip Code (Plus 4) Descript PA 191491107 Food To Whom Paid | DAY | YEAR | | | | | |
| City Philadelphia State Zip Code (Plus 4) Descript PA 191491107 Food To Whom Paid | | | | | | | |
| PA 191491107 Food To Whom Paid | 19 | 2016 | \$ | 4.87 | | | |
| To Whom Paid | Description of Expenditure | | | | | | |
| | | | | | | | |
| | DAY | YEAR | | | | | |
| AMPCO Parking | | | | | | | |
| Mailing Address1701 Callowhill St12 | 20 | 2016 | \$ | 29.00 | | | |
| City Philadelphia State Zip Code (Plus 4) Descript | tion of Exp | enditure | | | | | |
| PA 191304114 Transpo | Transportation | | | | | | |
| AMPCO Parking | | | | 20.00 | | | |

| To Whom Paid | | | МО | DAY | YEAR | | |
|---|-------|-------------------|----------------------------|-----|----------|------------|-------|
| Dilworth Cafe | | | МО | | ILAK | | |
| Mailing Address 1 South 15th St | | | 12 | 20 | 2016 | \$ | 11.42 |
| City Philadelphia | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | PA | 19107 | Food | | | | |
| To Whom Paid | | | | DAY | YEAR | | |
| PNC | | | 1-10 | | 1 L/ III | | |
| Mailing Address 249 5th Ave | | | 12 | 21 | 2016 | \$ | 36.00 |
| City Pittsburgh | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | PA | 152222707 | Bank Fe | ee | | | |
| | | | | | | PAGE TOTAL | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | \$ | 701.71 | |

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 Reportin | | | ng Period | | | | | |
|---|--------------------|------------------------------|-------------|-------------------------------------|-----------|-----------|----------|--------------------------------|
| Solomon, Jared Friends of | | | From: | <u>11</u> | ./29/2016 | To: | | 12/31/2016 |
| | | | | | DATE | | | Outstanding Balance of Debt |
| Name of Creditor Joseph Zuritsky | | | | мо | DAY | YEAR | | |
| Mailing Address 1706 Rittenhouse Sq | | | | 4 | 7 | 2016 | 5 \$ | 6,000.00 |
| City Philadelphia | State PA | Zip Code (P 191036181 | tion of Deb | t | • | | | |
| Name of Creditor John Ciccone | | | | мо | DAY | YEAR | | |
| Mailing Address 2006 Sansom St Ste 2 | | | 4 | 8 | 2016 | 5 4 | 5,000.00 | |
| City Philadelphia | State PA | Zip Code (P 191034415 | - | Description of Debt Mail | | | | |
| Name of Creditor The Philadelphia Protestant Home | | | | мо | DAY | YEAR | | |
| Mailing Address 6401 Martins Mill Rd | | | 7 | 9 | 2016 | 5 4 | 1,800.00 | |
| City Philadelphia | State PA | Zip Code (P | - | Description of Debt Thank You Event | | | | |
| Name of Creditor Kevin Greenberg | | | | мо | DAY | YEAR | | |
| Mailing Address 1600 John F Kennedy Blvd Ste 200 | | | 8 | 31 | 2016 | 5 4 | 7,500.00 | |
| City Philadelphia | State | Zip Code (P | - | Description of Debt | | | | |
| PA 191032813 Retainer for Legal Service | | | | es | | | | |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | \$ | 20,300.00 | | |