Campaign Finance Report

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

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Filer Identificati Number :	ion	20150	0130			Repo Filed		CANDI		COM	IMITTEE	\checkmark	LOBI	BYIST	
Name of Filing C	Committee, C	andida	ite or L	obbyist:		MAJO	r, ran	IA FRIEN	DS OF						
Street Address:	1806 KA	TER S	Т												
City:	PHILADE	LPHIA	L.					State:	PA		Zip Co	de: 19	9146		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1. X	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D PRIM		POST- 3	3.	AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND FRIDA	ay pri	E- 5.	30 D ELEC	AY I TION	POST- 6	6.	TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REI	PORT	7.	Year 2017	7			NG METH			PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Ca	ndidat	e:	-		-		DATE O	OF ELEC	TION	District Number		Par	ty Code	County Code
JUDGE OF THE	COURT OF C	СОММ	ON PLF	AS - PHILA	ADFI P	ΗΙΑ		мо	DAY	YEAR	1	CPJP	DEN	1	51
								11		7 201	7	(SEE IN	STRUCTI	ONS FOR	CODES)
Summary of Expenditures		nd	мо	DAY	YEAF			мо	DAY	YEAR	F	OR OFFI	CE USE	ONLY	
Expenditures	s from:			1 1	1 2	017	то	3	2	7 201	7				
A. Amount Bro	ught Forward	d From	Last R	eport			\$			7,864.09	Ð				
B. Total Monet	ary Contribut	tions A	nd Rec	eipts (From	n Sche	edule I) 🛊	5		3,700.00)				
C. Total Funds	Available (Su	um Of	Lines A	and B)			\$	5		11,564.09	Ð				
D. Total Expen	ditures (Fron	n Sche	dule II	I)			\$	5		6,882.56	5				
E. Ending Cash	Balance (Su	btract	Line D	From Line	C)		\$	5		4,681.53	;				
F. Value Of In-	Kind Contrib	utions	Receiv	ed (From S	Schedu	le II)	\$	5		0.00)				
G. Unpaid Deb	ts And Obliga	tions	(From S	Schedule I	V)		\$	5		0.00)		•		
					AFF	IDAV	'IT SE	CTION							
PART I - If this is				_							-				
I swear (or affirm correct and compl		rt, inclu	iding the	e attached so	chedule	s filed o	n paper	or by elect	ronic me	dium, are to	the best o	of my know	wledge	and beli	ef , true
Sworn to and subs	cribed before r day of	ne this		20						Signatu	re of Perso	on Submit	ting Rep	oort	
		ignatur					_				Prii	nted Name	9		
My Commission E		ignatur	C								Ema	ail			
	мо		D	AY	YR				Area	a Code	Daytir	ne Teleph	none Nu	mber	
Part II- If this is	a report of a	a cand	idate's	authorized	l Comr	nittee,	Candic	late shall	sign hei	re.					
I swear (or affirm) No 320) as amende		st of m	y knowle	edge and be	lief this	s politica	al comn	nittee has n	iot violate	ed any prov	sions of th	ne act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subso		e this									Signature	of Candid	ate		
	day of										Print	ed Name			
	Signa	ature													
My Commission Exp	bires										Ema	ail			
	м	10	D	AY	YF	ł			Area C	ode	C	aytime T	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MAJOR, RANIA FRIENDS OF From: <u>1/1/2017</u> **To:** <u>3/27/2017</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **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)** 700.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 700.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 3,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 3,000.00 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 \$ 3,700.00 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.

Name of Filing Committee or Candida	te		Re	porting	Period			
			Fro	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

\$

0.00

Use this Part to i	\$! itemize all c \$50.01 to \$2	PART B ER CONTRI 50.01 TO \$250.00 other contributio 250.00 in the rep om political com	0 ns w ortir	ith an ng peri	aggreg iod.			rom
Name of Filing Committee or Candio	date		Rep	oorting P	eriod			
MAJOR, RANIA FRIENDS OF			Fro	m:	<u>1/1/</u>	2017 T o) :	<u>3/27/2017</u>
					DATE			AMOUNT
Full Name of Contributor MICHAEL LAMBERT				мо	DAY	YEAR		
Mailing Address 5724 RISING SU	N AVE						\$	200.00
City PHILA	State PA	Zip Code (Plus 4 19120	•)	3	10	2017		
Full Name of Contributor ROBERTA J GINSBURG				мо	DAY	YEAR		
Mailing Address 3709 MIDVALE A	VE						\$	50.00
City PHILA	State PA	Zip Code (Plus 4 19129	•)	3	2	2017		
Full Name of Contributor MARIOLA STRAND				мо	DAY	YEAR		
Mailing Address 200 HOLCOMBE	WAY						\$	50.00
City LAMBERTVILLE	State NJ	Zip Code (Plus 4 08530	•)	3	2	2017		
Full Name of Contributor CHARLES A ROBIN				мо	DAY	YEAR		
Mailing Address 2003 CHESTNUT	ST						\$	100.00
City PHILA	State PA	Zip Code (Plus 4 19103	•)	3	8	2017		
Full Name of Contributor CHRISTIAN A DICICCO				мо	DAY	YEAR		
Mailing Address 1315 S 5TH ST							\$	150.00
City PHILA	State PA	Zip Code (Plus 4 19147	•)	3	8	2017		

Full Name of Contributor			мо	DAY	YEAR	
CHARLIE HANNAH						
Mailing Address 270	7 FEDERAL ST					\$ 50.00
City PHILA	State	Zip Code (Plus 4)	3	10	2017	
	РА	19147				
Full Name of Contributor			NO	DAY	YEAR	
RENATA HUNTER			мо	DAT	TEAR	
Mailing Address 263	6 MANTON ST					\$ 50.00
City PHILA	State	Zip Code (Plus 4)	3	10	2017	
	PA	19147				
Full Name of Contributor			мо	DAY	YEAR	
EAMON EGAN			MO	DAT	TEAR	
Mailing Address 182	3 PINE ST					\$ 50.00
City PHILA	State	Zip Code (Plus 4)	3	10	2017	
	PA	19103				
	·		-	-		PAGE TOTAL
Entor Grand Total	of Part A on Schedule I,	Detailed Summary Page	Section 7			\$ 700.00

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 Ca	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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 Co	ommittee or Candidate				Rep	orting Pe	riod			
MAJOR, RANIA	FRIENDS OF				Fror	n:	<u>1/1/2</u>	<u>017</u> T	o:	<u>3/27/2017</u>
						DA	ATE		AI	MOUNT
Full Name of Con RANIA MAjor	ntributor					мо	DAY	YEAR		
Mailing Address	1806 KATER ST								\$	2,500.00
City PHILA		State PA		p Code (Plus 9146	; 4)	3	1	201	7	
Employer Name	SELF		•			Occupat	tion	AWYEF	R	
Employer Mailing Business	Address/Principal Plac	e of		City		•	State		Zip Cod	e (Plus 4)
2915 N 5TH ST				PHILA			PA		19133	
Full Name of Con JOSEPH STIVAL						мо	DAY	YEAR		
Mailing Address	744 FEDERAL ST								\$	500.00
City PHILA		State PA		p Code (Plus	; 4)	3	10	201	7	
Employer Name	SELF		•			Occupat	tion L	AWYEF	2	
Employer Mailing Business	Address/Principal Plac	e of		City			State		Zip Cod	e (Plus 4)
744 FEDERAL ST	Г			PHILA			PA		19147	
Enter Grand To	tal of Part C on Sche	dule T. Detailed S	umn	nary Page	Sectio	on 3.		ſ	P	AGE TOTAL
		,,,,,,,			2000	•1			\$	3,000.00

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		Report	ing Perio	od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description		I			1			
Enter Grand Total of Part E c	n Schodulo I. Dotailog		Section	4			PAGE TOT	AL
	in Schedule I, Detailed	i Summaly Paye,	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 Period		
MAJOR, RANIA FRIENDS OF	From:	<u>1/1/2017</u> To:	<u>3/27/2017</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	T F)		
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	g Period			
			From:			То:	
				DATE		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

PAGE 11

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

Name of Filing Committee or Candidate					Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Co	ommittee or Candidate			Reporti	ng Period			
MAJOR, RANIA F	RIENDS OF			From	<u>1/</u>	<u>1/2017</u>	То:	<u>3/27/2017</u>
					DATE			AMOUNT
To Whom Paid ANTHONY KYRIAI	KAKIS FOR JUDGE			мо	DAY	YEAR		
Mailing Address	1500 MARKET ST			2	7	2017	\$	50.00
City PHILA		State PA	Zip Code (Plus 4) 19102	Descrip DONAT	otion of Exp TON	penditure		
To Whom Paid TD BANK				мо	DAY	YEAR		
Mailing Address	1726 WALNUT ST			3	27	2017	\$	40.00
City PHILA		State PA	Zip Code (Plus 4) 19103	Descrip BANK F	tion of Exp EES	penditure	1	
To Whom Paid FRIENDS OF THE	65TH WARD			мо	DAY	YEAR		
Mailing Address	4521 AUBREY AVE			2	10	2017	\$	40.00
City PHILA		State PA	Zip Code (Plus 4) 19114	Descrip DONAT	ion of Exp ION	penditure	1	
To Whom Paid NORTHERN LIBER	RTY PRESS		·	мо	DAY	YEAR		
Mailing Address	1223 N MASCHER S	Т		2	22	2017	\$	331.00
City PHILA		State PA	Zip Code (Plus 4) 19122		tion of Exp			
To Whom Paid NORTHERN LIBER	RTY PRESS			мо	DAY	YEAR		
Mailing Address	1223 N MASCHER S	Т		3	6	2017	\$	189.00
City PHILA		State PA	Zip Code (Plus 4) 19122	Descrip BUTTO	otion of Ex NS	penditure		

To Whom Paid DOLLAR TREE				мо	DAY	YEAR	
Mailing Address	500 VOLVO PKWY			2	6	2017	\$ 104.56
City CHESAPE	ΔKE	State	Zip Code (Plus 4)	Descrip	tion of Exp) Denditure	
		VA	23320	CLIP BO			
To Whom Paid NORTHERN LIBE	RTY PRESS			мо	DAY	YEAR	
Mailing Address	1223 N MASCHER	ST		3	27	2017	\$ 2,383.00
City PHILA		State	Zip Code (Plus 4)	Descrip	tion of Exp	, Denditure	
		РА	19122		IGN LITER		
To Whom Paid 5TH WARD				мо	DAY	YEAR	
Mailing Address	123 S. BROAD ST			2	15	2017	\$ 100.00
City PHILADE	LPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	
		PA	19107	PETITIO	ONS		
To Whom Paid RASHEEN CRUZ				мо	DAY	YEAR	
	1412 S. 51ST ST			мо 2	DAY 28	YEAR 2017	\$ 800.00
RASHEEN CRUZ		State	Zip Code (Plus 4)	2		2017	800.00
RASHEEN CRUZ		State PA	Zip Code (Plus 4) 19143	2	28 otion of Exp	2017	800.00
RASHEEN CRUZ				2 Descrip	28 otion of Exp	2017	800.00
RASHEEN CRUZ Mailing Address City PHILADE				2 Descrip PETITIO	28 ption of Exp DNS	2017 penditure	800.00
RASHEEN CRUZ Mailing Address City PHILADE To Whom Paid RASHEEN CRUZ Mailing Address	LPHIA 1412 S. 51ST ST			2 Descrip PETITIC MO 2	28 btion of Exp DNS DAY	2017 Denditure YEAR 2017	\$
RASHEEN CRUZ Mailing Address City PHILADE To Whom Paid RASHEEN CRUZ Mailing Address	LPHIA 1412 S. 51ST ST	PA	19143	2 Descrip PETITIC MO 2	28 ption of Exp DNS DAY 25 ption of Exp	2017 Denditure YEAR 2017	\$
RASHEEN CRUZ Mailing Address City PHILADE To Whom Paid RASHEEN CRUZ Mailing Address	LPHIA 1412 S. 51ST ST	PA	19143 Zip Code (Plus 4)	2 Descrip PETITIO MO 2 Descrip	28 ption of Exp DNS DAY 25 ption of Exp	2017 Denditure YEAR 2017	\$
RASHEEN CRUZ Mailing Address City PHILADE To Whom Paid RASHEEN CRUZ Mailing Address City PHILADE To Whom Paid	LPHIA 1412 S. 51ST ST	PA	19143 Zip Code (Plus 4)	2 Descrip PETITIO MO 2 Descrip PETITIO	28 otion of Exp DAY 25 otion of Exp DNS	2017 penditure YEAR 2017 penditure	\$
RASHEEN CRUZ Mailing Address City PHILADE To Whom Paid RASHEEN CRUZ Mailing Address City PHILADE To Whom Paid 32ND WARD	LPHIA 1412 S. 51ST ST LPHIA 1852 N. 21ST ST	PA	19143 Zip Code (Plus 4)	2 Descrip PETITIO MO 2 Descrip PETITIO MO 2	28 ption of Exp DNS DAY 25 ption of Exp DNS DAY	2017 Denditure YEAR 2017 Denditure YEAR 2017	\$ 1,200.00

To Whom Paid 13TH WARD				DAY	YEAR			
Mailing Address 1525 E. LOUDEN ST			2	25	2017	\$	125.00	
City PHILADELPHIA	State PA				Description of Expenditure PETITIONS			
To Whom Paid JOANNE SCHOFIELD			мо	DAY	YEAR			
Mailing Address 2101 PINE ST			2	25	2017	\$	50.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure NOTARY SERVICES					
To Whom Paid 42ND WARD			мо	DAY	YEAR			
Mailing Address PO BOX 24419			2	18	2017	\$	50.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19120	Description of Expenditure ELAINE TOMLIN					
To Whom Paid 7TH WARD			мо	DAY	YEAR			
7TH WARD	MORELAND ST		мо 2	DAY 19	YEAR 2017	\$	100.00	
7TH WARD	MORELAND ST State PA	Zip Code (Plus 4) 19134	2	19 otion of Exp	2017	\$	100.00	
7TH WARD Mailing Address 133 E. WEST	State		2 Descrip	19 otion of Exp	2017	\$	100.00	
7TH WARD Mailing Address 133 E. WEST City PHILADELPHI To Whom Paid	State PA		2 Descrip PETITIO	19 htion of Exp DNS	2017 Denditure	\$		
7TH WARD Mailing Address 133 E. WEST City PHILADELPHI To Whom Paid JOANNE SCHOFIELD Mailing Address 2101 PINE ST	State PA		2 Descrip PETITIO MO 2 Descrip	19 btion of Exp DNS DAY	2017 penditure YEAR 2017 penditure			
7TH WARD Mailing Address 133 E. WEST City PHILADELPHI To Whom Paid JOANNE SCHOFIELD Mailing Address 2101 PINE ST	State PA T State	19134 Zip Code (Plus 4)	2 Descrip PETITIO MO 2 Descrip	19 htion of Exp DNS DAY 25 htion of Exp	2017 penditure YEAR 2017 penditure			
7TH WARD Mailing Address 133 E. WEST City PHILADELPHI To Whom Paid JOANNE SCHOFIELD Mailing Address 2101 PINE ST City PHILADELPHIA To Whom Paid	State PA T State PA	19134 Zip Code (Plus 4)	2 Descrip PETITIO MO 2 Descrip NOTAR	19 btion of Exp DAY 25 btion of Exp Y SERVICE	2017 penditure YEAR 2017 penditure		100.00	

						PAGE	15	
To Whom Paid COMMONWEALTH OF PA				DAY	YEAR			
Mailing Address 210 NORTH OFFICE BLDG			2	28	2017	\$	100.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17120		ition of Exp ON FILING				
To Whom Paid 53RD WARD			мо	DAY	YEAR			
Mailing Address 1423 UNRUH AVE			2	15	2017	\$	100.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19111	Descrip PETITIO	ription of Expenditure TIONS				
To Whom Paid 58TH WARD			мо	DAY	YEAR			
Mailing Address 10878 PARLIN TERRACE			3	3	2017	\$	100.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19116	Description of Expenditure PETITIONS					
To Whom Paid FRIENDS OF JIM ROEBUCK			мо	DAY	YEAR			
Mailing Address 435 South 46th Street			2	23	2017	\$	50.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143	Description of Expenditure DONATION					
To Whom Paid WILLIE MUNDY			мо	DAY	YEAR			
Mailing Address 237 E. CAMBRIA ST			2	25	2017	\$	200.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure PETITIONS					
To Whom Paid DAMON DENT			мо	DAY	YEAR			
Mailing Address 2325 N. GRATZ ST			2	25	2017	\$	60.00	
City PHILADELPHIA	PHIA State Zip Code (Plus 4) PA 19132			Description of Expenditure PETITIONS				

							10
To Whom Paid PUBLIC SERVICE PAC			мо	DAY	YEAR		
Mailing Address 3218 PIETRO WAY			2	21	2017	\$	100.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19145	Description of Expenditure DONATION				
To Whom Paid 33RD WARD			мо	DAY	YEAR		
Mailing Address 720 WILLARD ST			2	17	2017	\$	60.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure PETITIONS				
To Whom Paid SABATINA			мо	DAY	YEAR		
Mailing Address 7720 CASTOR AVE, 2ND FL			2	24	2017	\$	250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19152	Description of Expenditure PETITIONS				
Enter Grand Total of Expenditures	on Page 1, Re	port Cover Page, Item D				\$	PAGE TOTAL 6,882.56