

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 : 2017C0109		Report Filed By :		CANDIDATE <input checked="" type="checkbox"/>		COMMITTEE		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: JENNIFER SCHULTZ, ESQUIRE											
Street Address:											
City:				State:		Zip Code: 19128					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	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.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2017	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate: JUDGE OF THE COURT OF COMMON PLEAS					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	1	CPJ	DEM	
					11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	2017		3	27	2017			
A. Amount Brought Forward From Last Report					\$		0.00				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		0.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		0.00				
D. Total Expenditures (From Schedule III)					\$		12,583.25				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		0.00				
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
JENNIFER SCHULTZ, ESQUIRE	From: <u>1/1/2017</u> To: <u>3/27/2017</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)	\$ 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)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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.)	\$ 0.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

<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	
	From:	To:

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

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

PAGE TOTAL
\$ 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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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
	From: To:

			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	
JENNIFER SCHULTZ, ESQUIRE		From: <u>1/1/2017</u> To: <u>3/27/2017</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 III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
JENNIFER SCHULTZ, ESQUIRE	From <u>1/1/2017</u> To: <u>3/27/2017</u>

DATE				AMOUNT		
To Whom Paid COMMONWEALTH OF PENNSYLVANIA			MO	DAY	YEAR	\$ 100.00
Mailing Address 210 NORTH OFFICE BUILDING			3	3	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 171200029	Description of Expenditure FEE-PETITION FILING			
To Whom Paid TD BANK			MO	DAY	YEAR	\$ 8.00
Mailing Address 8301 HENRY AVENUE			3	3	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19128	Description of Expenditure FEE-OFFICIAL BANK CHECK			
To Whom Paid PARCEL PLUS			MO	DAY	YEAR	\$ 12.00
Mailing Address 8500 HENRY AVENUE SUITE 45			2	4	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19128	Description of Expenditure FEE-NOTARY SERVICES			
To Whom Paid PARKING GARAGE			MO	DAY	YEAR	\$ 10.00
Mailing Address 7TH STREET			3	3	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17120	Description of Expenditure FILING OF PETITIONS			
To Whom Paid DEMOCRATIC WOMEN OF PHILADELPHIA			MO	DAY	YEAR	\$ 10.00
Mailing Address 219 SPRING GARDEN STREET			2	8	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure ANNUAL MEMBERSHIP DUES			

To Whom Paid UNION LEAGUE OF PHILADELPHIA			MO	DAY	YEAR	\$ 38.00
Mailing Address 140 SOUTH BROAD STREET			2	25	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure EVENT TICKET			

To Whom Paid 38TH WARD DEMOCRATIC EXECUTIVE COMMITTEE			MO	DAY	YEAR	\$ 150.00
Mailing Address 3324 WEST ALLEGHENY AVENUE			3	4	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19132	Description of Expenditure EVENT TICKET			

To Whom Paid THE CEDARS HOUSE			MO	DAY	YEAR	\$ 18.36
Mailing Address 200 NORTHWESTERN AVENUE			2	23	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	Description of Expenditure MEETING-MEAL			

To Whom Paid SANTUCCI'S			MO	DAY	YEAR	\$ 42.00
Mailing Address 901 SOUTH 10TH STREET			2	1	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19147	Description of Expenditure MEETING-MEAL			

To Whom Paid LUCKY STAR			MO	DAY	YEAR	\$ 20.50
Mailing Address 8919 RIDGE AVENUE			3	24	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19128	Description of Expenditure MEETING-MEAL			

To Whom Paid TROLLEY CAR DINER			MO	DAY	YEAR	\$ 38.71
Mailing Address 7619 GERANTOWN AVENUE			2	28	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19119	Description of Expenditure MEETING-MEAL			

To Whom Paid TROLLEY CAR DINER			MO	DAY	YEAR	\$ 11.29
Mailing Address 7619 GERMANTOWN AVENUE			3	4	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19119	Description of Expenditure MEETING-MEAL			

To Whom Paid MANHATTAN BAGEL			MO	DAY	YEAR	\$ 8.48
Mailing Address 6001 RIDGE AVENUE			2	24	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19128	Description of Expenditure MEETING-MEAL			

To Whom Paid SALAD WORKS			MO	DAY	YEAR	\$ 29.13
Mailing Address HENRY AVENUE			2	20	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19128	Description of Expenditure MEETING-MEAL			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 496.47

