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 :	ion 2015	0358			Repo Filed		CA	NDI	DATE		СОМ	1ITTEE	<	LOB	BYIST		
	Committee, Candid	ate or L	obbyist:			-	INEER	S. I	NC PAC	2							
Street Address:	530 WALNUT		-		-			- ,		-							
City:	PHILADELPHI	A					State	e:	PA			Zip Co	de: 19	106-3	685		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	2ND FRIDAY PRE- 2. X 30 PRIMARY PR				F	POST- 3.			AMENDM REPORT	Yes	N	0	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	2ND FRIDAY PRE- ELECTION 5. 30 E				P	POST- 6.			TERMIN/ REPORT	Yes	Ν	0	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2017				ING ME) CHEC					PAPER		\checkmark	DISK	ETTE	
Name of Office §	L Sought by Candida	te:					DAT	E O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Cod	e Cour	
							мо		DAY YEAR							1	
								11		7	2017		(SEE INS	TRUCTI	ONS FOR	CODES	3)
	Receipts and	мо	DAY	YEAR	Ł		мо		DAY	YE	AR	FC	R OFFIC	e use	ONLY	,	
Expenditures	s from:		3 28	2	017	го		5		1	2017						
A. Amount Bro	ught Forward Fror	n Last R	eport			5	\$			2,0	00.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			2,0	00.00						
D. Total Expen	ditures (From Sch	edule II	I)				\$			70	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			1,30	0.00						
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)	!	\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						_
				AFF	IDAV	IT S	ECTI	ON									
	s a Committee rep		-						• •		_		6 I.m.a	dadaa	and he	lind to	
correct and compl) that this report, incl ete.		e attached sc	neuule	s mea o	і раре	I OI DY	electi	ionic me	arum,	are to i	ine best o	i iliy kilov	neuge	anu be	ner, u	ue
Sworn to and subs	scribed before me this day of	5	_20							Si	gnature	e of Perso	n Submitt	ing Rep	oort		
	Signatu	re				_						Prin	ted Name				_
My Commission E	xpires											Ema	il				_
	МО	D	AY	YR					Are	a Code		Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee,	Candi	date s	hall	sign he	ere.							
I swear (or affirm) No 320) as amendo) that to the best of n ed.	ny knowle	edge and beli	ief this	politica	l comi	nittee ł	nas n	ot violat	ed any	provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	worn to and subscribed before me this Signature of Candidate day of 20									-							
						Printed Name								-			
My Commission Exp	Signature					_						Ema	il				_
	мо	D	AY	YR	1	_			Area (Code		D	aytime Te	lephor	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** URBAN ENGINEERS, INC PAC From: <u>3/28/2017</u> To: <u>5/1/2017</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)** 0.00 All Other Contributions (Part B) \$ **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 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 \$ 0.00 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 Candidate				Reporting Period						
				From: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
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 Candida	te		Rep	orting P	eriod					
			Fror	From: Te):			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0										

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		A	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.00		
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio							\$	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 Rep				porting Period					
			Froi	n:		Т):		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE 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 Candidat	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	•				•					
		_	o .:					PAGE TO	TAL	
Enter Grand Total of Part E on Scheo	iule I, Detailed Sum	imary Page,	Section	4.			\$		0.00	

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
URBAN ENGINEERS, INC PAC	From:	<u>3/28/2017</u> то:	<u>5/1/2017</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 R			Reporting Period						
						То:			
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address		_				7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.	
						\$		0.00	

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

Name of Filing Committee or Candidate				Reporting Period						
				From:						
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor		•		Occupa	ation					
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period							
URBAN ENGINEERS, INC PAC				<u>3/28</u>	<u>3/2017</u>	То:	5/1/2017					
				DATE AMO								
To Whom Paid			мо	DAY	YEAR							
Friends of Val Arkoosh												
Mailing Address P.O. Box 1177			4	26	2017	\$	500.00					
City Norristown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure							
	PA	19404	4/26/2017 Spring Reception									
To Whom Paid			мо	DAY	YEAR							
The Committee to Elect Rob Mahrt			MO									
Mailing Address 530 Vermont Avenu	e		4	26	2017	\$	200.00					
City Erie	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure							
	PA	16505	Contrib	ution								
							PAGE TOTAL					
Enter Grand Total of Expenditures of	on Page 1, Report C	Cover Page, Item I	D .			\$	700.00					