# **Campaign Finance Report**

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

Filer Identificat Number :	<b>ion</b> 201	150218			Report Filed E		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST	
	Committee, Cand	idate or L	obbyist:			-	nna Bullo	l							
Street Address:	PO Box 589	21													
City:	Philadelphia						State:	PA			Zip Co	<b>de:</b> 19	102		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDI REPORT		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	- 5.	30 DA		POST- 6.			TERMIN REPORT		Yes	No	$\checkmark$
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2017	7			NG METHO				PAPER		$\checkmark$	DISKE	TTE
Name of Office	L Sought by Candic	late:					DATE O	F ELE	СТІО	N	District Number	Office	Par	ty Code	County Code
							MO DAY YEAR					I			
							11		7	2017		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		3 28	3 20	017 <b>T</b>	0	5		1	2017					
A. Amount Bro	ought Forward Fr	om Last R	eport			\$			19,8	357.50					
B. Total Monet	ary Contribution	s And Rec	eipts (From	m Sche	dule I)	\$	\$ 8,128.78								
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			27,9	986.28					
D. Total Expen	ditures (From So	hedule II	I)			\$			8,7	'14.64					
E. Ending Cash	n Balance (Subtra	act Line D	From Line	C)		\$			19,2	71.64					
F. Value Of In-	-Kind Contributio	ns Receiv	ed (From S	Schedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligation	ns (From S	Schedule I	V)		\$	\$ 0.00								
				AFF	IDAVI	T SE	CTION								
PART I - If this i	is a Committee re	eport, trea	isurer sign	here. 1	lf this is	a Cai	ndidate re	eport, c	andi	date sig	gn here.				
I swear (or affirm correct and compl	i) that this report, in lete.	ncluding the	e attached so	chedules	s filed on	paper	or by elect	ronic m	edium	, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me t day of	his	20						s	ignatur	e of Perso	on Submitt	ing Rep	oort	
	Signa	ture				_					Prir	ited Name	1		
My Commission E	-					_					Ema	nil			
	МО	D	AY	YR				Are	ea Cod	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	d Comm	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amend	) that to the best of ed.	f my knowl	edge and be	lief this	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subse	cribed before me th day of	is	20							s	ignature	of Candida	ite		
						_					Printe	ed Name			
My Commission Exp	Signatur	e				-					Ema	nil			
						_									
	мо	D	AY	YR				Area	Code		D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Friends of Donna Bullock From: <u>3/28/2017</u> To: <u>5/1/2017</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 125.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 500.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 500.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 7,500.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 7,500.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 3.78 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 8,128.78 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		Rep	porting <b>I</b>	Period				
Friends of Donna Bullock			Fro	om:	<u>3/28/20</u>	) <u>17</u> To	:	<u>5/1/2017</u>	
				DATE AMOUNT					
Full Name of Contributing Committee Bayada Home Health Care Political Action Committee					DAY	YEAR			
Mailing Address 1315 Walnut St Ste 600							\$	250.00	
City Philadelphia	State PA	Zip Code (Plus 4 191074707	4)	4	3	2017			
Full Name of Contributing Committee LawPAC				мо	DAY	YEAR			
Mailing Address 800 N 3rd St							\$	250.00	
City Harrisburg	<b>State</b> PA	Zip Code (Plus 4 171022025	4)	4	27	2017			
								PAGE TOTAL	
Enter Grand Total of Part A on Sche	edule I, Detail	led Summary Page, Se	ectior	n 2.			\$	500.00	

5/6/2024 2:12:25 AM

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 Candidat	e			orting P	eriod				
			Fro	m:		Тс	):		
					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. \$ 0.00									

# 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	porting Period				
Friends of Donna Bullock			From:	<u>3/2</u>	<u>8/2017</u>	То:	<u>5/1/2017</u>	
				DA	TE		AMOUNT	
Full Name of Contributing Committee Friends of Vikki For Judge				мо	DAY	YEAR		
Mailing Address 2053 North St							<b>\$</b> 3,000.00	
City Philadelphia	<b>State</b> PA	<b>Zip Cod</b> 191303	e <b>(Plus 4)</b> 217	4	14	2017		
Full Name of Contributing Committee Goodman for Judge				мо	DAY	YEAR		
Mailing Address 1515 Market St Ste City Philadelphia	1200 State PA	<b>Zip Cod</b> 191021	<b>e (Plus 4)</b> 932	4	14	2017	\$ 3,000.00	
Full Name of Contributing Committee IBC PAC				мо	DAY	YEAR		
Mailing Address 1901 Market St City Philadelphia	<b>State</b> PA	<b>Zip Cod</b> 191031	<b>e (Plus 4)</b> 480	4	3	2017	\$ 250.00	
Full Name of Contributing Committee IBC PAC				мо	DAY	YEAR		
Mailing Address 1901 Market St City Philadelphia	<b>State</b> PA	<b>Zip Cod</b> 191031	<b>e (Plus 4)</b> 480	4	3	2017	\$        250.00	
Full Name of Contributing Committee PECOPAC				мо	DAY	YEAR		
Mailing Address 2301 Market St S15 City Philadelphia	-1 State PA	<b>Zip Cod</b> 191031	<b>e (Plus 4)</b> 338	4	3	2017	<b>\$</b> 500.00	

Full Name of Contributing Committee Plumbers Union Local 690 Election Polit	мо	DAY	YEAR	
Mailing Address 2791 Southampton R				\$ 500.00
City Philadelphia	4	14	2017	
Enter Grand Total of Part C on Sched	\$ <b>PAGE TOTAL</b> 7,500.00			

## 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:	То:

				D	ATE		АМО	UNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	Address						\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Princip Business	pal Place of		City	·	State		Zip Code (	(Plus 4)
Enter Grand Total of Part C or	n Schedule I, Detail	led Sumr	nary Page, Secti	on 3.			PAG	E TOTAL
							5	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	Name of Filing Committee or Candidate			Reporting Period						
Friends of Donna Bullock			From:		<u>3/28/201</u>	<u>7</u> To:	: <u>5/1/2017</u>			
				D	ATE			AMOUNT		
<b>Full Name</b> PayPal				мо	DAY	YEAR				
Mailing Address 1840 Embarcadero	Mailing Address 1840 Embarcadero Rd						\$	3.7		
City Palo Alto	State CA	<b>Zip Code (</b> 9430333	-	4	3	201	7			
Receipt Description cash back on	credit card									
Enter Grand Total of Part E on Sched	ule T. Detailed	Summary Page	Section	4				PAGE TOTAL		
	are 1, Detanea	Summary ruge,					\$	3.78		

# 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		
Friends of Donna Bullock	From:	<u>3/28/2017</u> <b>To:</b>	<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 PART	ſF)		
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		AMOU	INT
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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE 1	TOTAL
					4	i	0.00

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

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

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
Friends of Donna Bullock			From	<u>3/28</u>	<u>8/2017</u>	То:	<u>5/1/2017</u>
				DATE			AMOUNT
<b>To Whom Paid</b> Chris Curtis			мо	DAY	YEAR		
Mailing Address			4	8	2017	\$	120.00
City State Zip Code (Plus 4) DE				Description of Expenditure website management			
To Whom Paid Independence Communications And Campaigns, LLC			мо	DAY	YEAR		
Mailing Address 10 Canal St Ste 228				26	2017	\$	8,586.00
CityBristolStateZip Code (Plus 4)PA190073900				<b>stion of Ex</b> ement mai		1	
To Whom Paid Sage Payment Solutions			мо	DAY	YEAR		
Mailing Address 12120 Sunset Hills	Rd Ste 500		4	3	2017	\$	7.39
City Reston	State VA	<b>Zip Code (Plus 4)</b> 201905858	<b>Descrip</b> mercha	otion of Exp ant fees	penditure	1	
To Whom Paid Sage Payment Solutions			мо	DAY	YEAR		
Mailing Address 12120 Sunset Hills Rd Ste 500			5	1	2017	\$	1.25
City         Reston         State         Zip Code (Plus 4)           VA         201905858				otion of Exp ant fees	penditure	1	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D			).				PAGE TOTAL
inter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						\$	8,714.64