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 8100	155			Repoi		CA	WDI	DATE		COM	AITTEE	Y	LUBI	51151	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	Ī	DISTR:	ICT CC	DUNC	IL 47	7		•					
Street Address:																
City:	PHILADELPHIA	4					Stat	e:	PA			Zip Co	de: 19	103		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. X	30 DA		F	POST-	6.		TERMINA REPORT		Yes	No	\
report type)	ANNUAL REPORT	7.	Year 2016				NG MI					PAPER		⋈	DISKE	TTE
Name of Office S	ought by Candida	te:					DAT	TE O	F ELEC	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							МО		DAY	YE	AR		-	DEN	1	51
			_					11		8	2016		(SEE IN:	STRUCTI	ONS FOR C	CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			МО		DAY	ΥI	EAR	FC	R OFFI	E USE	ONLY	
			9 20	20	016	ГО		10	2	24	2016					
A. Amount Bro	ught Forward Fror	n Last R	eport			\$				5,7	783.22					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$;				0.00					
C. Total Funds Available (Sum Of Lines A and B)							i			5,7	783.22					
D. Total Expenditures (From Schedule III)						\$	i			2,8	361.00					
E. Ending Cash Balance (Subtract Line D From Line C)						\$				2,9	22.22					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)	\$	i .				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$	1				0.00					
				AFF	IDAV	IT SE	CTI	ON								
I swear (or affirm)	s a Committee rep that this report, incl	-	_						-		_		f my knov	vledge	and belie	ef , true
correct and comple	ete. cribed before me this															
	day of	•	_ 20			_				S	Signature	of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_						Prin	ted Name	1		
My Commission Ex	·					_						Ema				
	МО		AY	YR	•					a Coc	le	Daytin	e Teleph	one Nu	mber	
	a report of a cand				•						v provis	ions of th	e act of li	ına 3 1	037 (D I	1222
No 320) as amende	ed.	iy kilowi	suge and ben	ici tilis	politica	Comm	iicce i	ilas ii	Ot VIOIA	cu an	iy provis	10113 01 111	e act of 5	e 5,1	337 (F.E	. 1555,
SWOFN TO AND SUBSC	ribed before me this day of		20								S	ignature	of Candida	ate		
						_						Printe	d Name			
My Commission Exp	Signature ires					_						Ema	il			—
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephor	ie Numb	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period						
DISTRICT COUNCIL 47	From:	9/20/201	<u>L6</u> To:	10/24/2016				
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	(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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period					
			From:			:		
		L		DATE			AMOUNT	
Full Name of Contributing	Committee		МО	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4))					

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

0.00

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 Filling Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address	Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)						

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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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	orting Pe	riod			
			Fron	n:		То	:	
				D	ATE		АМО	DUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address City State Zip Code (Plus 4)							\$	0.00
City	State	Zip Code (Plu	s 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, Sectio				on 3.			PAG	GE TOTAL 0.00

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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z 5</i> 4a. y 1 4 9 0,	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 Perio	d							
DISTRICT COUNCIL 47	From:	<u>9/20/2016</u> To:	<u>10/24/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address State Zin Code(Plus 4)							\$	0.00	
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ididate		Reporti	ng Period			
DISTRICT COUNCIL 47			From	<u>9/20</u>	0/2016	То:	10/24/2016
				DATE			AMOUNT
To Whom Paid THE FRIENDS OF COUCILMAN C	URTIS JONES, JR		МО	DAY	YEAR		
Mailing Address 100 SOUTH E	BROAD STREET		6	23	2016	\$	1,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19110	Description of Expenditure FUNDRAISER				
To Whom Paid COMMITTEE TO RE-ELECT JOHN TAYLOR				DAY	YEAR		
Mailing Address 7702 CASTOR AVENUE 2ND FLOOR			6	21	2016	\$	80.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19152	4) Description of Expenditure FUNDRAISER				
To Whom Paid THE NEW LOU/CHOO'S			МО	DAY	YEAR		
Mailing Address 2101 WEST H	HUNTING PARK AVE.		6	16	2016	\$	141.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19140	Descrip FUNDR	otion of Exp	penditure		
To Whom Paid CITIZENS FOR DARRELL L. CLAR	KE	•	мо	DAY	YEAR		
Mailing Address 140 S. BROA	D ST.		6	20	2016	\$	500.00
City PHILADELPHIA State Zip Code (Plus 4) PA 19102				otion of Exp AISER	penditure		
To Whom Paid FUNDRAISER FOR CHENELL PAR	KER	·	МО	DAY	YEAR		

8

FUNDRAISER

Description of Expenditure

Zip Code (Plus 4)

19118

2016

Mailing Address

PHILADELPHIA

City

P. O. BOX 27647

State

PΑ

500.00

To Whom Paid FRIENDS OF SHARIF STREET			мо	DAY	YEAR			
Mailing Address 1421 SUSQUEHA	NNA ST.		8	17	2016	\$	500.00	
City PHILADELPHIA PA Zip Code (Plus 4) PA 19121				Description of Expenditure FUNDRAISER				
To Whom Paid COMMITTEE TO RE-ELECT JOHN TAYLOR			МО	DAY	YEAR			
Mailing Address C/O T. TSUCALAS	3 1600 WALNUT S	ST. STE 305	9	12	2016	\$	140.00	
City PHILADELPHIA State Zip Code (Plus 4) PA 19103				otion of Exp	penditure			
Enter Grand Total of Expenditure	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item I						PAGE TOTAL	
·	er Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	2,861.00	