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 :	ion 2016	0341			Repor Filed		CAND	IDATE	•	соми	1ITTEE	✓	LOB	BYIST		
Name of Filing (Committee, Candid	ate or Lo	obbyist:	Į	NICHO	LS FO	DR PA									
Street Address:	PO BOX 3998	,2900 G	RAY'S FER	RY AV	E											
City:	PHILADELPHI	A					State:	PA			Zip Co	de: 19	146			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIM		POST- 3.			AMENDMENT REPORT?		Yes	✓ ^	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X				30 D ELEC	AY TION	POST- 6.			TERMINATION REPORT?		Yes	٢	No	\checkmark
report type)	ANNUAL REPORT	7.					FILING METHOD () CHECK ONE			PAPER		\checkmark	DISK	ETTE		
Name of Office S	L Sought by Candida	te:					DATE C	OF ELEC	CTION		District Number	Office Code	Pa	ty Cod	le Cou Cod	
							мо	DAY	YEA	R		10000	DEI	Ч	100-	
							11		7 2	2017		(SEE INS	TRUCTI	ONS FO	R CODE	S)
Summary of Receipts and MO DAY YEAR							мо	DAY	YEA	R	FC	R OFFIC	E USE	ONL	Y	
Expenditures	s from:		6 6	20	017	Ю	ç) 1	.8 2	2017						
A. Amount Bro	ught Forward Froi	n Last Re	eport	-		\$	5		1,628	8.12						
B. Total Monetary Contributions And Receipts (From Schedule I							5	59,145.00								
C. Total Funds Available (Sum Of Lines A and B)							5		60,773	3.12						
D. Total Expenditures (From Schedule III)						\$	5		6,995	5.14						
E. Ending Cash	Balance (Subtrac	t Line D I	From Line	C)		4	5		53,777	7.98						
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedu	le II)	4	5		15,869	9.63						
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	/)		4	5		82,200	0.00						
				AFF	IDAV	it se	ECTION									
PART I - If this i	s a Committee rep	ort, treas	surer sign	here. I	lf this i	s a Ca	ndidate r	eport, c	andida	te sig	jn here.					
I swear (or affirm correct and compl) that this report, inc ete.	luding the	attached sc	hedules	s filed or	paper	or by elect	tronic me	edium, a	re to t	he best o	f my know	vledge	and be	elief , t	rue
Sworn to and subs	scribed before me this day of	5	20						Sigr	nature	e of Perso	n Submitt	ing Re	port		_
	Signatu	re	-			_					Prin	ted Name				_
My Commission E	2	-									Ema	il				
	мо	DA	NY	YR				Are	a Code		Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's a	authorized	Comm	nittee, (Candio	date shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of r ed.	ny knowle	dge and beli	ief this	political	comn	nittee has r	not violat	ed any p	provisi	ions of th	e act of Ju	ine 3,1	937 (P	.L. 133	33,
Sworn to and subscribed before me this day of 20										Si	ignature (of Candida	ite			_
						_		Printed Name						—		
My Commission Exp	Signature My Commission Expires							Email						_		
	мо	DA	AY	YR		_		Area (Code		D	aytime Te	elephor	ne Nun	ıber	-
	MO DAY YR												-			

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** NICHOLS FOR PA From: <u>6/6/2017</u> **To:** <u>9/18/2017</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 160.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 250.00 **Contributions Received From Political Committees (Part A)** 535.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 785.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 53,500.00 4,700.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 58,200.00 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 \$ 59,145.00 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						
NICHOLS FOR PA Fr			From:	<u>6/6/20</u>	•	<u>9/18/2017</u>			
		DATE			AMOUNT				
Full Name of Contributing Comm AREA 14 DEMOCRATIC COMMI	мо	DAY	YEAR						
Mailing Address 68 S BET	HLEHEM PIKE		_			\$	250.00		
City AMBLER	State PA	Zip Code (Plus 4) 190025823	9	6	2017				
							PAGE TOTAL		

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

250.00

\$

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 Candidat	e		Report	ting Po						
NICHOLS FOR PA			From:	om: <u>6/6/2017</u> To:				<u>9/18/2017</u>		
			DATE			AMOUNT				
Full Name of Contributor CAROL JONES										
Mailing Address 390 MANSION AVE							\$	100.00		
City PENLLYN	State PA	Zip Code (Plus 4)		9	6	2017				
Full Name of Contributor BRADLEY KIRSCH	Μ	чо	DAY	YEAR						
Mailing Address 441 SADDLERY DR							\$	150.00		
City PERKASIE	State PA	Zip Code (Plus 4) 18944423		8	19	2017				
Full Name of Contributor THERON "TERRY" G. TERRY NOBLE			Μ	мо	DAY	YEAR				
Mailing Address 912 S BRADY ST							\$	100.00		
City DU BOIS	State PA	Zip Code (Plus 4)		8	31	2017				
Full Name of Contributor ALI THOMPSON CRANDALL			Μ	мо	DAY	YEAR				
Mailing Address 2662 LIVINGSTON	ST						\$	50.00		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191253843		6	10	2017				
Full Name of Contributor ALI THOMPSON CRANDALL				мо	DAY	YEAR				
Mailing Address 2662 LIVINGSTON ST							\$	35.00		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191253843	7	7	16	2017				

Full Name of Contributor WANDA WHITTED	мо	DAY	YEAR	
Mailing Address 6745 GREENE City PHILADELPHIA	9	6	2017	\$ 100.00
Enter Grand Total of Part A	\$ PAGE TOTAL 535.00			

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	me of Filing Committee or Candidate Report			Period					
NICHOLS FOR PA			From:	<u>6/</u>	6/2017	То:	<u>9/18/2017</u>		
				DA	TE		AMOUNT		
Full Name of Contributing Committee COMMITTEE FOR A BETTER TOMORROV	V			мо	DAY	YEAR			
Mailing Address 123 S BROAD ST ST	E 2200						\$ 25,000.00		
City PHILADELPHIA	State Zip Code (Plus 4) PA 191091029			8	31	2017			
Full Name of Contributing Committee LABORERS DISTRICT COUNCIL					DAY	YEAR			
Mailing Address 665 N BROAD ST # 5	5 State Zip Code (Plus 4) PA 191232418			9	18	2017	\$ 10,000.00		
Full Name of Contributing Committee LOCAL UNION #98 I.B.E.W. COMMITTE	E ON POLITICAL EDU	CATION		мо	DAY	YEAR			
Mailing Address 1719 SPRING GARDE	EN ST						\$ 5,000.00		
City PHILADELPHIA	State PA	Zip Code 191303	e (Plus 4) 915	9	15	2017			
Full Name of Contributing Committee PENNSYLVANIA AFL-CIO COPE				мо	DAY	YEAR			
Mailing Address 600 N 2ND ST	State	7:0 00 40	e (Plus 4)	6	14	2017	\$ 500.00		
City HARRISBURG	PA	171011							
Full Name of Contributing Committee PENNSYLVANIA FEDERATION OF DEMOCRATIC WOMEN				мо	DAY	YEAR			
Mailing Address 438 PINE MOUNTAIN RD							\$ 1,500.00		
City LOCK HAVEN	State PA	Zip Code 177458	e (Plus 4) 461	4) 9 6 2		2017			

Full Name of Contributing Committee PFT COMMITTEE TO SUPPORT PUBL	FT COMMITTEE TO SUPPORT PUBLIC EDUCATION						
Mailing Address 1816 CHESTNUT	ST					\$	1,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191034902	9	18	2017		
Full Name of Contributing Committee SHEET METAL WORKERS LU 19	мо	DAY	YEAR				
Mailing Address 1301 S COLUMBUS BLVD				10	2017	\$	10,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191475505	9	18	2017		
Full Name of Contributing Committee		Y	мо	DAY	YEAR		
Mailing Address PO BOX 27						\$	500.00
City RIDLEY PARK	State PA	Zip Code (Plus 4) 190780027	9	6	2017		
							PAGE TOTAL
nter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						\$	53,500.00

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	ame of Filing Committee or Candidate Rep				porting Period					
NICHOLS FOR PA				Fron	n:	<u>6/6/2</u>	017 To	:	<u>9/18/2017</u>	
					DA	ATE		AMOUNT		
Full Name of Contributor BEVERLY HAHN					мо	DAY	YEAR			
Mailing 1621 WINCHESTER D	PR							\$	500.00	
City BLUE BELL	State	Zip	Code (Plus	4)	9	12	2017			
	PA	19	4223527							
Employer Name _{N/A}					Occupat	tion N	IOT EMI	PLOYED		
Employer Mailing Address/Principal Place of City Business				1	State		Zip Cod	e (Plus 4)		
1621 WINCHESTER DR BLUE BELL				PA		19422				
Full Name of Contributor SHAKA JOHNSON					мо	DAY	YEAR			
Mailing 1420 WALNUT ST ST Address	E 806							\$	1,000.00	
City PHILADELPHIA	State	Zip	Code (Plus	4)	6	28	2017			
	PA	19	1024008							
Employer Name SELF EMPLOYED		•			Occupation ATTORNEY					
Employer Mailing Address/Principal Plac Business	ce of		City		State Zip Cod			Zip Cod	e (Plus 4)	
SAME AS ABOVE										
Full Name of Contributor CAROLYN H. NICHOLS					мо	DAY	YEAR			
Mailing 6115 COBBS CREEK	РКШҮ							\$	3,200.00	
City PHILADELPHIA State Zip Code (Plus 4)			4)	6	22	2017				
PA 191432908										
Employer Name CITY OF PHILADELPHIA				Occupation COMMON PLEAS COURT JU				COURT JUDGE		
Employer Mailing Address/Principal Place of City				State			Zip Code (Plus 4)			
CRIMINAL JUSTICE CENTERROOM 141	6		PHILADE	LPHIA	PA 19107					

\$

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	d					
From			From:	om: To:						
					DATE				AMOUNT	
Full Name					DAY	YEAR				
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description										
Enter Grand Total of Part F on Schedu	Section	4				PAGE TO	TAL			
inter Grand Total of Part E on Schedule I, Detailed Summary Page, Sectio							\$		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								
NICHOLS FOR PA	From:	<u>6/6/2017</u> То:	<u>9/18/2017</u>						
. 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 PAR	T F)								
TOTAL for the Reporting Pe	eriod (2)	\$	100.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (3)	\$	15,769.63						
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		\$	15,869.63						

SCHEDULE II PART F **IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period					
NICHOLS FOR PA			From: <u>6/6/201</u>			То:	<u>9/18/2017</u>		
				DATE			AMOUNT		
Full Name of Contributor OLGA NEGRON			мо	DAY	YEAR				
Mailing Address 1136 HAMILTON ST STE 101				17	2017	\$	100.00		
City ALLENTOWN	State	Zip Code (Plus 4)	1						
	PA	181011197							
Description of Contribution: ADVERTISEMENT									
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	je,		PAGE TOTAL		
						5	100.00		

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

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate					porting P	eriod					
NICHOLS FOR PA					Fro	From: <u>6/6/201</u>				<u>9/18/2017</u>		
						DATE				AMOUNT		
Full Name of Contributor CAROLYN H. NICHOLS						мо	DAY	YEAR				
Mailing Address 6115 COBBS CREEK PKWY									\$	15,769.63		
City PHILADELPHIA	State PA	Zip Code(Plus 4) 191432908			9	18	2017					
Employer of Contributor CITY OF PH	ILADELPHI	٩				Occupation COMMON PLEAS COURT JUE				5 COURT JUDGE		
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption o	of Contribution		
CRIMINAL JUSTICE CENTER ROOM 1416									CANDIDATE CAMPAIGN EXPENSES			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.									PAGE TOTAL 15,769.63			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
NICHOLS FOR PA			From	<u>6/0</u>	<u>5/2017</u>	То:	<u>9/18/2017</u>		
				DATE			AMOUNT		
To Whom Paid DHAMANA DIXON			мо	DAY	YEAR				
Mailing Address 5808 CHRISTIAN ST	-		6	30	2017	\$	500.00		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191433002		Description of Expenditure CAMPAIGN SERVICES					
To Whom Paid KATHRYN MARTUCCI	мо	DAY	YEAR						
Mailing Address 1414 S HICKS ST				26	2017	\$	314.50		
City PHILADELPHIA		Description of Expenditure REIMBURSEMENT							
To Whom Paid KATHRYN MARTUCCI			мо	DAY	YEAR				
Mailing Address 1414 S HICKS ST			6	26	2017	\$	1,750.00		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191464819	Description of Expenditure CAMPAIGN SERVICES						
To Whom Paid NGP VAN			мо	DAY	YEAR				
Mailing Address 1445 NEW YORK AV	E NW STE 200		6	26	2017	\$	2,625.00		
City WASHINGTON State Zip Code (Plus 4) DC 200052158				otion of Exp ASE, WEBS					
To Whom Paid PAYCHEX			мо	DAY	YEAR				
Mailing Address 1100 ADAMS AVE			6	12	2017	\$	58.00		
City NORRISTOWN State Zip Code (Plus 4) PA 194032404				Description of Expenditure PAY SERVICES					

To Whom Paid											
PAYCHEX				мо	DAY	YEAR					
Mailing Address 1100 ADAMS AVE				7	10	2017	\$		58.00		
City NORRISTOWN		State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure					
PA 194032404				PAY SE	RVICES						
To Whom Paid PAYCHEX				мо	DAY	YEAR					
Mailing Address 110	0 ADAMS AVE			8	10	2017	\$		69.00		
City NORRISTOWN State Zip Code (Plus 4)					tion of Ex	penditure					
		PA	194032404	PAY SERVICES							
To Whom Paid PAYCHEX					DAY	YEAR					
Mailing Address 1100 ADAMS AVE					11	2017	\$		58.00		
City NORRISTOWN State Zip Code (Plus 4)					Description of Expenditure						
	PA 194032404					PAY SERVICES					
To Whom Paid PNC MERCHANT SERVICES											
	CES		I	мо	DAY	YEAR					
PNC MERCHANT SERVI	CES 0 GERMANTOWN	I AVE		мо 8	DAY 12	YEAR 2017	\$		12.00		
PNC MERCHANT SERVI		I AVE State	Zip Code (Plus 4)	8		2017	\$		12.00		
PNC MERCHANT SERVI		r	Zip Code (Plus 4) 191183404	8	12 otion of Exp	2017	\$		12.00		
PNC MERCHANT SERVI	0 GERMANTOWN	State		8 Descrip	12 otion of Exp	2017	\$		12.00		
PNC MERCHANT SERVI Mailing Address 834 City PHILADELPHIA To Whom Paid SAGE PAYMENT SOLUT	0 GERMANTOWN	State PA		8 Descrip BANK F	12 Dition of Exp TEE	2017 penditure	\$		27.45		
PNC MERCHANT SERVI Mailing Address 834 City PHILADELPHIA To Whom Paid SAGE PAYMENT SOLUT	0 GERMANTOWN	State PA		8 Descrip BANK F MO	12 btion of Exp EE DAY	2017 penditure YEAR 2017	\$				
PNC MERCHANT SERVI Mailing Address 834 City PHILADELPHIA To Whom Paid SAGE PAYMENT SOLUT Mailing Address 121	0 GERMANTOWN	State PA S RD STE 500	191183404	8 Descrip BANK F MO 7 Descrip	12 btion of Exp EE DAY 3	2017 penditure YEAR 2017 penditure	\$				
PNC MERCHANT SERVI Mailing Address 834 City PHILADELPHIA To Whom Paid SAGE PAYMENT SOLUT Mailing Address 121	0 GERMANTOWN TONS 20 SUNSET HILL	State PA S RD STE 500 State	191183404 Zip Code (Plus 4)	8 Descrip BANK F MO 7 Descrip	DAY 3	2017 penditure YEAR 2017 penditure	\$				
PNC MERCHANT SERVI Mailing Address 834 City PHILADELPHIA To Whom Paid SAGE PAYMENT SOLUT Mailing Address 121 City RESTON To Whom Paid SAGE PAYMENT SOLUT Mailing Address	0 GERMANTOWN TONS 20 SUNSET HILL	State PA S RD STE 500 State VA	191183404 Zip Code (Plus 4)	8 Descrip BANK F MO 7 Descrip CREDIT	12 ation of Exp EE DAY 3 ation of Exp CARD PR	2017 penditure YEAR 2017 penditure OCESSIN	\$				
PNC MERCHANT SERVI Mailing Address 834 City PHILADELPHIA To Whom Paid SAGE PAYMENT SOLUT Mailing Address 121 City RESTON To Whom Paid SAGE PAYMENT SOLUT Mailing Address	0 GERMANTOWN TONS 20 SUNSET HILL	State PA S RD STE 500 State VA	191183404 Zip Code (Plus 4)	8 Descrip BANK F MO 7 Descrip CREDIT MO 8	12 ption of Exp EE DAY 3 ption of Exp CARD PR DAY	2017 penditure YEAR 2017 penditure OCESSIN YEAR 2017	\$ G		27.45		

To Whom Paid SAGE PAYMENT SOLUTIONS			мо	DAY	YEAR			
Mailing Address 12120 SUNSET HILLS RD STE 500			9	5	2017	\$	9.24	
City RESTON	ESTON State Zip Code (Plus 4) VA 201905858			Description of Expenditure CREDIT CARD PROCESSING				
To Whom Paid TML COMMUNICATIONS			мо	DAY	YEAR			
Mailing Address PO BOX 138			7	12	2017	\$	1,500.00	
City ABINGTON	TON State Zip Code (Plus 4) PA 190010138			Description of Expenditure COMMUNICATIONS				
To Whom Paid US MAILROOM			мо	DAY	YEAR			
Mailing Address 45 E CITY AVE			6	28	2017	\$	10.00	
City BALA CYNWYD	State PA	Zip Code (Plus 4) 190042421	Description of Expenditure MAILING					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	PAGE TOTAL 6,995.14		

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Reportin			ng Period					
NICHOLS FOR PA			From:		<u>6/6/2017</u>	То:		<u>9/18/2017</u>
					DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS				мо	DAY	YEAR		
Mailing Address 6115 COBBS CREEK PKWY				12	15	2016	\$	25,000.00
CityPHILADELPHIAStateZip Code (Plus 4)PA191432908				Description of Debt LOAN RECEIVED				
					DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS				мо	DAY	YEAR		
Mailing Address 6115 COBBS CREE	K PKWY			2	8	2017	\$	20,000.00
City PHILADELPHIA	State PA	Zip Code (Pl 191432908		Description of Debt LOAN RECEIVED				
				1	DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS				мо	DAY	YEAR		
Mailing Address 6115 COBBS CREE	K PKWY			4	3	2017	\$	14,000.00
City PHILADELPHIA	State PA	Zip Code (Pl 191432908	-	Description of Debt LOAN RECEIVED				
	•				DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS				мо	DAY	YEAR		
Mailing Address 6115 COBBS CREE	K PKWY			4	10	2017	\$	5,000.00
CityPHILADELPHIAStateZip Code (Plus 4)PA191432908			Description of Debt LOAN RECEIVED					

				DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS			мо	DAY	YEAR		
Mailing Address 6115 COBBS CREEK PKWY			5	2	2017		15,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191432908	Description of Debt LOAN RECEIVED				
				DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS			мо	DAY	YEAR		
Mailing Address 6115 COBBS CR	EEK PKWY		6	22	2017		3,200.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191432908	Description of Debt LOAN RECEIVED				
	_						PAGE TOTAL
Enter Grand Total of Unpaid De	ebts on Page 1	, Report Cover Page, Iten	1 G.			\$	82,200.00