# **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 99	00251			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Cand	lidate or L	obbyist:			-	M EXEC (	СОМ			<b>L</b>			
Street Address:	2315 W CU	MBERLANI	D ST											
City:	PHILADELPH	HIA					State:	PA		Zip Co	<b>de:</b> 19	132-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIM		POST-	3.	AMENDN REPORT		Yes	✓ No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		POST-	6.	TERMINATION Yes REPORT?				$\checkmark$
report type)	ANNUAL REPOR	RT 7. X	<b>Year</b> 2017				NG METHO CHECK O			PAPER		$\checkmark$	DISKE	TTE
Name of Office S	L Sought by Candie	date:					DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEAR			DEN	1	51
							11		7 2017	1	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	from:		10 24	20	017 <b>T</b>	0	12	3	1 2017	- <b>-</b>				
A. Amount Bro	ught Forward Fr	om Last R	eport			\$			4,009.91					
B. Total Monet	ary Contribution	s And Rec	eipts (Fron	n Scheo	dule I)	\$			120.00	]				
C. Total Funds	Available (Sum	Of Lines A	and B)			\$	;		4,129.91					
D. Total Expen	ditures (From So	chedule II	I)			\$			2,850.00	]				
E. Ending Cash	Balance (Subtra	act Line D	From Line	C)		\$			1,279.91					
F. Value Of In-	Kind Contributio	ons Receiv	ed (From S	chedul	e II)	\$			0.00	_				
G. Unpaid Deb	ts And Obligation	ns (From S	Schedule IV	/)		\$			0.00					
				AFF:	IDAVI	T SE	CTION							
PART I - If this is	s a Committee ro	eport, trea	surer sign	here. I	f this is	a Ca	ndidate re	eport, ca	andidate si	gn here.				
I swear (or affirm correct and compl	) that this report, i ete.	ncluding the	attached sc	hedules	filed on	paper	or by elect	ronic me	dium, are to	the best o	of my know	vledge	and beli	ef , true
Sworn to and subs	cribed before me t day of	his	20						Signatur	e of Perso	n Submitt	ing Rep	oort	
	—Signa	ature				_				Prin	ted Name			
My Commission E	-									Ema	il			
	мо	D	AY	YR		-		Area	a Code	Daytin	ne Telepho	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comm	ittee, C	andid	ate shall	sign he	re.					
I swear (or affirm) No 320) as amende		f my knowle	edge and beli	ief this	political	comm	iittee has n	ot violate	ed any provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me th day of	is	20						5	Gignature	of Candida	ite		
						-				Printe	ed Name			
My Commission Exp	Signatur	e				-				Ema	il			
						_								
	мо	D	AY	YR				Area C	ode	D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** WARD 16 DEM EXEC COM From: <u>10/24/2017</u> **To:** <u>12/31/2017</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) \$ 120.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 120.00 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 \$ 120.00 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 Candi	date		Repo	Reporting Period							
WARD 16 DEM EXEC COM			From	n:	<u>10/24/20</u>	:	<u>12/31/2017</u>				
					DATE			AMOUNT			
Full Name of Contributing Committee Friends of Emillio Vazquez			1	мо	DAY	YEAR					
Mailing Address 200 S Broad S	t						\$	120.00			
City Philadelphia	<b>State</b> PA	<b>Zip Code (Plus</b> 19102	4)	11	4	2017					
							Г	PAGE TOTAL			

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

PAGE TOTAL

\$

120.00

Use this Part to ite	emize all other 0.01 to \$250.0	1 TO \$250.00 r contribution 00 in the repo	s w ortir	ith an 1g per	aggreg iod.			rom		
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 S	Schedule I, Detail	PAGE TOTALEnter 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 Cand	lidate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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 C	andidate		Report	ting Perio	bd				
			From:			То:	:		
			I	D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	I				1				
Enter Grand Total of Part E o	- Schodulo I. Dotailoc	l Summary Page	Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	Section	7.			\$		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	od	
WARD 16 DEM EXEC COM	From:	<u>10/24/2017</u> <b>то:</b>	<u>12/31/2017</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			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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE 1	TOTAL
					4		0.00

0.00

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

Name of Filing Committee or Candidate					Rep	oorting P	Period			
					Fro	m:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Summary Page, Section 3.

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
WARD 16 DEM EXEC COM			From	<u>10/24</u>	<u>4/2017</u>	То:	<u>12/31/2017</u>
				DATE			AMOUNT
<b>To Whom Paid</b> Citizens Bank			мо	DAY	YEAR		
Mailing Address 1500 N Broad St			10	31	2017	\$	25.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19132		btion of Exp serv fee	penditure	3	
<b>To Whom Paid</b> Andrew Smith			мо	DAY	YEAR		
Mailing Address 2252 N Woodstock	St		11	4	2017	\$	900.00
City Philadelphia State Zip Code (Plus 4)   PA 19132			-	otion of Exp	penditure	2	
To Whom Paid Lou & Choo			мо	DAY	YEAR		
Mailing Address 21 & Hunting Park A	Ve		10	27	2017	\$	400.00
City Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19129		otion of Exp		3	
<b>To Whom Paid</b> Max's			мо	DAY	YEAR		
Mailing Address Germantown & Erie	Ave		11	7	2017	\$	650.00
City Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19140		otion of Exp ard Election			
To Whom Paid Steve Jones			мо	DAY	YEAR		
Mailing Address 2621 N Chadwick St	Aailing Address 2621 N Chadwick St			20	2017	\$	75.00
City Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19132		otion of Exp			

<b>To Whom Paid</b> Citizens Bank			мо	DAY	YEAR		
Mailing Address 1500 N Broad St	:		11	30	2017	\$	25.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	ption of Exp	, Denditure	•	
	PA	19132	Bank s	serv fee			
<b>To Whom Paid</b> Citizens Bank			мо	DAY	YEAR		
Mailing Address 1500 N Broad St				29	2017	\$	25.00
City Philadelphia	State	Zip Code (Plus 4)	Descri	ption of Exp	, penditure		
	PA	19132	Bank s	serv fee			
<b>To Whom Paid</b> City Of Phila	-		мо	DAY	YEAR		
Mailing Address 1515 Arch St			12	19	2017	\$	750.00
City Philadelphia	State	Zip Code (Plus 4)	Descri	tion of Ex	, penditure	<b>I</b>	
	Late fil	ing fee cyl	cle 6 repo	orting			
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	2,850.00