### **Campaign Finance Report**

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

| Filer Identificati<br>Number :           | on                         | 20150     | 217         |                      |           | Rep<br>File | oort      |       | CA            | NDII   | DATE     |        | COMN        | 1ITTEE             | <b>✓</b>       | LOBI         | BYIST  |            |          |
|--|----------------------------|-----------|-------------|----------------------|-----------|-------------|-----------|-------|---------------|--------|----------|--------|-------------|--------------------|----------------|--------------|--------|------------|----------|
| Name of Filing C                         | ommittee, C                | andida    | te or Lo    | bbyist:              |           | MCC         | CLIN      | TON,  | JOAN          | INA    | FRIEN    | DS C   | )F          |                    | ·              |              |        |            |          |
| Street Address:                          | РО ВОХ                     | 16668     |             |                      |           |             |           |       |               |        |          |        |             |                    |                |              |        |            |          |
| City:                                    | PHILADE<br>-               | ELPHIA    |             |                      |           |             |           |       | State         | e:     | PA       |        |             | Zip Cod            | l <b>e:</b> 19 | 139-9        | 998    |            | _        |
| TYPE OF<br>REPORT                        | 6TH TUESDAY<br>PRE-PRIMARY |           | 1.          | 2ND FRID<br>PRIMARY  | AY PRE    | :- :        | 2.        | 30 DA |               | Р      | OST-     | 3.     |             | AMENDM<br>REPORT?  |                | Yes          | 1      | No         |          |
| (place X to<br>the right of              | 6TH TUESDA'<br>PRE-ELECTIO |           | 4.          | 2ND FRID<br>ELECTION |           | E- !        | 5.        | 30 DA |               | Р      | OST-     | 6.     |             | TERMINA<br>REPORT? |                | Yes          | ١      | No         | <b>\</b> |
| report type)                             | ANNUAL RE                  | PORT      | 7. <b>X</b> | Year 201             | 7         |             |           |       | IG ME<br>CHEC |        | _        |        |             | PAPER              |                | $\checkmark$ | DISK   | ETTE       |          |
| Name of Office S                         | ought by Ca                | ndidate   | e:          |                      |           |             |           |       | DAT           | E O    | F ELE    | CTIC   | ON          | District<br>Number | Office<br>Code | Par          | ty Cod | le Cou     |          |
|  |                            |           |             |                      |           |             |           |       | МО            |        | DAY      | Y      | EAR         |                    | •              | DEN          | 1      | 51         |          |
|  |                            |           |             |                      |           |             |           |       |               | 11     |          | 7      | 2017        |                    | (SEE INS       | TRUCTI       | ONS FO | R CODES    | 5)       |
| Summary of                               |                            | nd        | МО          | DAY                  | YEAR      | 2           |           |       | МО            |        | DAY      | Y      | EAR         | FO                 | R OFFIC        | E USE        | ONL    | ſ          |          |
| Expenditures                             | Trom:                      |           |             | 1                    | 1 2       | 017         | Т         | 0     |               | 12     |          | 31     | 2017        |                    |                |              |        |            |          |
| A. Amount Bro                            | ught Forward               | d From    | Last R      | eport                |           |             |           | \$    |               |        |          | 16,    | 557.53      |                    |                |              |        |            |          |
| B. Total Moneta                          | ary Contribut              | tions A   | nd Rec      | eipts (Fro           | m Sche    | dule        | <b>I)</b> | \$    |               |        |          | 35,    | 275.00      |                    |                |              |        |            |          |
| C. Total Funds                           | Available (S               | um Of I   | Lines A     | and B)               |           |             |           | \$    |               |        |          | 51,    | 832.53      |                    |                |              |        |            |          |
| D. Total Expend                          | ditures (Fron              | n Sche    | dule II     | [)                   |           |             |           | \$    |               |        |          | 20,3   | 392.62      |                    |                |              |        |            |          |
| E. Ending Cash                           | Balance (Su                | btract    | Line D      | From Line            | (C)       |             |           | \$    |               |        |          | 31,4   | 139.91      |                    |                |              |        |            |          |
| F. Value Of In-                          | Kind Contrib               | utions    | Receive     | ed (From             | Schedu    | le II       | )         | \$    |               |        |          |        | 0.00        |                    |                |              |        |            |          |
| G. Unpaid Debt                           | s And Obliga               | ations (  | From S      | chedule I            | V)        |             |           | \$    |               |        |          |        | 0.00        |                    | ,              |              |        |            |          |
|  |                            |           |             |                      | AFF       | IDA         | \VI       | ΓSE   | CTIC          | N      |          |        |             |                    |                |              |        |            |          |
| PART I - If this is I swear (or affirm)  |                            | -         | -           | _                    |           |             |           |       |               |        |          |        | _           |                    | f my knov      | anhalv       | and be | alief to   | rue      |
| correct and comple                       |                            | n c, meiu | ung the     | attacheu s           | ciiedule  | s med       | . 011     | paper | OI Dy C       | iecu   | onic in  | eululi | i, are to t | ine best of        | illy Kilov     | vieuge       | and be | iller , ti | ue       |
| Sworn to and subs                        | cribed before i            | me this   |             | 20                   |           |             |           |       |               |        |          | \$     | Signature   | of Persoi          | 1 Submitt      | ing Rep      | ort    |            |          |
|  | S                          | ignature  | e           |                      |           |             |           | -     |               | •      |          |        |             | Print              | ted Name       |              |        |            |          |
| My Commission Ex                         | xpires                     |           |             |                      |           |             |           | _     |               |        |          |        |             | Emai               | il             |              |        |            |          |
|  | мо                         |           | D/          | ΛΥ                   | YR        |             |           |       |               |        | Are      | ea Co  | de          | Daytim             | e Teleph       | one Nu       | mber   |            | ᆜ        |
| Part II- If this is                      | a report of                | a candi   | date's      | authorize            | d Comn    | nitte       | e, C      | andid | ate sl        | nall s | sign he  | ere.   |             |                    |                |              |        |            |          |
| I swear (or affirm)<br>No 320) as amende |                            | est of my | y knowle    | dge and be           | lief this | polit       | ical      | comm  | ittee h       | as no  | ot viola | ted ar | ny provisi  | ions of the        | e act of Ju    | ine 3,1      | 937 (P | .L. 133    | 3,       |
| Sworn to and subsc                       | ribed before m             | e this    |             | 20                   |           |             |           |       |               |        |          |        | Si          | ignature o         | f Candida      | ite          |        |            | _        |
|  |                            |           |             |                      |           |             |           | -     |               |        |          |        |             | Printe             | d Name         |              |        |            | -        |
|  | _                          | ature     |             |                      |           |             |           | -     |               | -      |          |        |             | Em-                |                |              |        |            | _        |
| My Commission Exp                        | ires                       |           |             |                      |           |             |           |       |               |        |          |        |             | Emai               |                |              |        |            |          |
|  |                            | 10        | DA          | ΛΥ                   | YR        | ì           |           | -     |               |        | Area     | Code   |             | Da                 | ytime Te       | elephor      | ie Nun | ıber       | _        |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| , -  |           |          |              |            |
|--|-----------|----------|--------------|------------|
| Name of Filing Committee or Candidate  | Reporting | g Period |              |            |
| MCCLINTON, JOANNA FRIENDS OF   | From:     | 1/1/201  | <u>7</u> To: | 12/31/2017 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |          |              |            |
| TOTAL for the Reporting  | J 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)  |           |          | \$           | 6,400.00   |
| All Other Contributions (Part B)   |           |          | \$           | 3,325.00   |
| TOTAL for the Reporting  | y Period  | (2)      | \$           | 9,725.00   |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |          |              |            |
| Contributions Received From Political Committees (Part C)  |           |          | \$           | 25,550.00  |
| All Other Contributions (Part D)   |           |          | \$           | 0.00       |
| TOTAL for the Reporting  | J Period  | (3)      | \$           | 25,550.00  |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |          |              |            |
| TOTAL for the Reporting  | g Period  | (4)      | \$           | 0.00       |
|  |           |          |              |            |
| Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa |           |          | \$           | 35,275.00  |

#### 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 Candid  | ate                |                                    | Re       | porting I | Period |                |    |            |
|---|--------------------|------------------------------------|----------|-----------|--------|----------------|----|------------|
| MCCLINTON, JOANNA FRIENDS OF  |                    |                                    | Fr       | om:       | 1/1/20 | ) <u>17</u> To | :  | 12/31/2017 |
|   |                    |                                    | <u> </u> |           | DATE   |                |    | AMOUNT     |
| <b>Full Name of Contributing Committee</b><br>Kenney For Philadelphia     |                    |                                    |          | МО        | DAY    | YEAR           |    |            |
| Mailing Address P O Box 60065   |                    |                                    |          |           |        |                | \$ | 250.00     |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | Zip Code (Plus                     | 4)       | 8         | 11     | 2017           |    |            |
| Full Name of Contributing Committee INDEPENDENCE BLUE CROSS PAC (IF       | BC PAC)            |                                    |          | мо        | DAY    | YEAR           |    |            |
| Mailing Address 1901 MARKET S  City PHILADELPHIA                          | State PA           | <b>Zip Code (Plus</b><br>191031480 | 4)       | 8         | 11     | 2017           | \$ | 125.00     |
| <b>Full Name of Contributing Committee</b> PA Society OF Ansethesiologist | <u>'</u>           |                                    |          | МО        | DAY    | YEAR           |    |            |
| Mailing Address 50 South Provide  | lence Road         |                                    |          |           |        |                | \$ | 125.00     |
| City Media  | <b>State</b><br>PA | Zip Code (Plus<br>19063            | 4)       | 8         | 11     | 2017           |    |            |
| Full Name of Contributing Committee PA REALTORS PAC                       | <u>'</u>           |                                    |          | мо        | DAY    | YEAR           |    |            |
| Mailing Address 500 NORTH 127  City LEMOYNE                               | TH STREET State    | Zip Code (Plus                     | 4)       | 8         | 14     | 2017           | \$ | 250.00     |
|   | PA                 | 17043                              |          |           |        |                |    |            |
| <b>Full Name of Contributing Committee</b> Friends Of Kevin Parker        |                    |                                    |          | МО        | DAY    | YEAR           |    |            |
| Mailing Address 3613 Avenue H   |                    |                                    |          |           |        |                | \$ | 100.00     |
| <b>City</b> Brooklyn  | <b>State</b><br>NY | Zip Code (Plus<br>11210            | 4)       | 8         | 21     | 2017           |    |            |

|   |               |                 |                      | PAGE 4                 |
|---|---------------|-----------------|----------------------|------------------------|
| Full Name of Contributing Committee PHILADELPHIA COUNCIL OF AFL CIO   | мо            | DAY             | YEAR                 |                        |
| Mailing Address 22 South 22nd Street 2nd Floor  |               |                 |                      | <b>\$</b> 125.00       |
| City Philadelphia State PA 19103  | 8             | 21              | 2017                 |                        |
| Full Name of Contributing Committee 40 B Ward Democratic Executive Committee  | мо            | DAY             | YEAR                 |                        |
| Mailing Address 7408 Elmwood Ave  |               |                 |                      | \$ 200.00              |
| City Philadelphia State Zip Code (Plus 4) PA 19153  | 8             | 21              | 2017                 |                        |
| Full Name of Contributing Committee ChamberPHL  | мо            | DAY             | YEAR                 |                        |
| Mailing Address 200 South Broad Street  |               |                 |                      | <b>\$</b> 250.00       |
| · · · · · · · · · · · · · · · · · · ·   | <b>-1</b> 8   | 22              | 2017                 |                        |
| City Philadelphia State Zip Code (Plus 4) PA 19102  |               |                 |                      |                        |
| Philadelphia  | мо            | DAY             | YEAR                 |                        |
| PA 19102  Full Name of Contributing Committee   |               |                 | YEAR                 | <b>\$</b> 150.00       |
| Full Name of Contributing Committee  Darby Borough Democratic Party   |               | <b>DAY</b> 22   | <b>YEAR</b> 2017     | <b>\$</b> 150.00       |
| Full Name of Contributing Committee Darby Borough Democratic Party  Mailing Address POBOX 7  City Darby  State Zip Code (Plus 4)  | МО            |                 |                      | <b>\$</b> 150.00       |
| Full Name of Contributing Committee Darby Borough Democratic Party  Mailing Address POBOX 7  City Darby  State Zip Code (Plus 4) 19023  Full Name of Contributing Committee   | мо 8          | DAY             | 2017<br>YEAR         | \$ 150.00<br>\$ 250.00 |
| Full Name of Contributing Committee Darby Borough Democratic Party  Mailing Address POBOX 7  City Darby  Full Name of Contributing Committee  KINSER GROUP PAC  | мо 8          | 22              | 2017                 |                        |
| Full Name of Contributing Committee Darby Borough Democratic Party  Mailing Address POBOX 7  City Darby State Zip Code (Plus 4) PA 19023  Full Name of Contributing Committee  KINSER GROUP PAC  Mailing Address 200 S BROAD ST, STE 912  City PHILADELPHIA State Zip Code (Plus 4)               | мо 8          | DAY             | 2017<br>YEAR         |                        |
| Full Name of Contributing Committee Darby Borough Democratic Party  Mailing Address POBOX 7  City Darby State PA 19023  Full Name of Contributing Committee KINSER GROUP PAC  Mailing Address 200 S BROAD ST, STE 912  City PHILADELPHIA State PA 19102-3850  Full Name of Contributing Committee | мо<br>8<br>мо | 22<br>DAY<br>25 | 2017<br>YEAR<br>2017 |                        |

|   |   |                        |  |           |              |                      | FAG |        |
|---|---|------------------------|--|-----------|--------------|----------------------|-----|--------|
| Full Name of Contri   | ibuting Committee   |                        |  |           |              | \ <u></u>            |     |        |
| DUANE MORRIS G  | OVT COM   |                        |  | МО        | DAY          | YEAR                 |     |        |
| Mailing Address   | 30 SOUTH 17TH S   | ST                     |  |           |              |                      | \$  | 250.00 |
| City PHILADELP  | PHTA  | State                  | Zip Code (Plus 4)                                    | 9         | 5            | 2017                 |     |        |
|   |   | PA                     | 19103-4196   |           |              |                      |     |        |
| Full Name of Contri   |   |                        |  | мо        | DAY          | YEAR                 |     |        |
| LOCAL 32BJ AMER   | ICAN DREAM FUND   |                        |  |           |              |                      |     |        |
| Mailing Address   | 25 West 18th Str  | eet 5th Floor          |  |           |              |                      | \$  | 250.00 |
| City New York   |   | State                  | Zip Code (Plus 4)                                    | 9         | 7            | 2017                 |     |        |
|   |   | NY                     | 10011  |           |              |                      |     |        |
| Full Name of Contri<br>FRIENDS OF MADE  |   |                        |  | МО        | DAY          | YEAR                 |     |        |
| Mailing Address   | 795 Glen Road   |                        |  |           |              |                      | \$  | 250.00 |
| <b>City</b> Jenkintown  | 1   | State                  | Zip Code (Plus 4)                                    | 9         | 25           | 2017                 |     |        |
|   |   | PA                     | 19046  |           |              |                      |     |        |
|   |   | .,,                    | 19046  |           |              |                      |     |        |
| Full Name of Contri<br>LOCAL 0013 BOILE   |   |                        | 19040  | мо        | DAY          | YEAR                 |     |        |
|   |   |                        | 19040  | МО        | DAY          | YEAR                 | \$  | 250.00 |
| LOCAL 0013 BOILE Mailing Address  | ERMAKERS PAC<br>2300 NEW FALLS                                      |                        | Zip Code (Plus 4)                                    | <b>MO</b> | <b>DAY</b> 4 | <b>YEAR</b> 2017     | \$  | 250.00 |
| LOCAL 0013 BOILE  | ERMAKERS PAC<br>2300 NEW FALLS                                      | RD                     |  |           |              |                      | \$  | 250.00 |
| LOCAL 0013 BOILE Mailing Address  | ERMAKERS PAC  2300 NEW FALLS  /ILLE  ibuting Committee              | RD State               | Zip Code (Plus 4)                                    |           |              |                      | \$  | 250.00 |
| Mailing Address  City NEWPORTV  Full Name of Contri   | ERMAKERS PAC  2300 NEW FALLS  /ILLE  ibuting Committee              | RD State               | Zip Code (Plus 4)                                    | 10        | DAY          | 2017<br>YEAR         | \$  | 250.00 |
| Mailing Address  City NEWPORTV  Full Name of Contri Markosek For State  Mailing Address   | 2300 NEW FALLS /ILLE ibuting Committee e Legislature P O BOX 193    | RD State               | Zip Code (Plus 4)                                    | 10        | 4            | 2017                 |     |        |
| Mailing Address  City NEWPORT  Full Name of Contri Markosek For State  Mailing Address  | 2300 NEW FALLS /ILLE ibuting Committee e Legislature P O BOX 193    | RD State PA            | <b>Zip Code (Plus 4)</b><br>19056-3299               | 10<br>MO  | DAY          | 2017<br>YEAR         |     |        |
| Mailing Address  City NEWPORTV  Full Name of Contri Markosek For State  Mailing Address   | 2300 NEW FALLS /ILLE ibuting Committee e Legislature P O BOX 193    | RD State PA State      | Zip Code (Plus 4)<br>19056-3299<br>Zip Code (Plus 4) | 10<br>MO  | DAY          | 2017<br>YEAR         |     |        |
| Mailing Address  City NEWPORT  Full Name of Contri Markosek For State  Mailing Address  City Monroeville  Full Name of Contri         | 2300 NEW FALLS /ILLE ibuting Committee e Legislature P O BOX 193    | RD  State PA  State PA | Zip Code (Plus 4)<br>19056-3299<br>Zip Code (Plus 4) | 10 MO     | 10 DAY       | 2017 YEAR 2017       |     |        |
| Mailing Address  City NEWPORT  Full Name of Contri Markosek For State  Mailing Address  City Monroeville  Full Name of Contri PAA-PAC | 2300 NEW FALLS  /ILLE  ibuting Committee e Legislature  P O BOX 193 | RD  State PA  State PA | Zip Code (Plus 4)<br>19056-3299<br>Zip Code (Plus 4) | 10 MO     | <b>DAY</b>   | 2017<br>YEAR<br>2017 | \$  | 250.00 |

|   |                             |  |          |               |                      | PAGE 6                 |
|---|-----------------------------|--|----------|---------------|----------------------|------------------------|
| Full Name of Contributing Committee  AFSCME COUNCIL 13 POL & LEG ACCT   |                             |  | мо       | DAY           | YEAR                 |                        |
| Mailing Address 4031 EXECUTIVE  | PARK DRIVE                  |  |          |               |                      | <b>\$</b> 250.00       |
| City HARRISBURG   | State<br>PA                 | <b>Zip Code (Plus 4)</b><br>171111507  | 10       | 20            | 2017                 |                        |
| Full Name of Contributing Committee CRISCI ASSOC PAC  |                             |  | мо       | DAY           | YEAR                 |                        |
| Mailing Address 204 STATE ST  |                             |  |          |               |                      | <b>\$</b> 250.00       |
| City HARRISBURG   | <b>State</b><br>PA          | <b>Zip Code (Plus 4)</b><br>171010000  | 10       | 20            | 2017                 |                        |
| Full Name of Contributing Committee KINSER GROUP PAC  |                             |  | МО       | DAY           | YEAR                 |                        |
| Mailing Address 200 S BROAD ST  | , STE 912                   |  |          |               |                      | <b>\$</b> 250.00       |
| City PHILADELPHIA   | <b>State</b><br>PA          | <b>Zip Code (Plus 4)</b><br>19102-3850 | 10       | 20            | 2017                 |                        |
|   |                             |  |          |               |                      |                        |
| Full Name of Contributing Committee FRIENDS OF MARGO DAVIDSON   |                             |  | мо       | DAY           | YEAR                 |                        |
|   | d                           |  | МО       | DAY           | YEAR                 | <b>\$</b> 250.00       |
| FRIENDS OF MARGO DAVIDSON   | State PA                    | <b>Zip Code (Plus 4)</b> 19050         | мо 10    | <b>DAY</b> 20 | <b>YEAR</b> 2017     | \$ 250.00              |
| FRIENDS OF MARGO DAVIDSON  Mailing Address 45 Scottdale Roa   | State                       |  |          |               |                      | \$ 250.00              |
| FRIENDS OF MARGO DAVIDSON  Mailing Address 45 Scottdale Roa  City Landsdowne  Full Name of Contributing Committee   | State                       |  | 10       | 20<br>DAY     | 2017<br>YEAR         | \$ 250.00<br>\$ 250.00 |
| FRIENDS OF MARGO DAVIDSON  Mailing Address 45 Scottdale Roa  City Landsdowne  Full Name of Contributing Committee  HIGHMARK PAC OF HIGHMARK INC   | State                       |  | 10       | 20            | 2017                 |                        |
| FRIENDS OF MARGO DAVIDSON  Mailing Address 45 Scottdale Roa  City Landsdowne  Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC  Mailing Address 1800 CENTER ST  | State PA  State PA          | 19050  Zip Code (Plus 4)               | 10<br>MO | 20<br>DAY     | 2017<br>YEAR         |                        |
| FRIENDS OF MARGO DAVIDSON  Mailing Address 45 Scottdale Roa  City Landsdowne  Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC  Mailing Address 1800 CENTER ST  City CAMP HILL  Full Name of Contributing Committee | State PA  State PA  ERS PAC | 19050  Zip Code (Plus 4)               | 10 MO    | 20 DAY 26     | 2017<br>YEAR<br>2017 |                        |

| PA ASSN OF NURSE ANESTHETISTS PAC  Mailing Address 17 S HIGH ST, STE 200  City COLUMBUS State OH A3215  State OH A3215  MO DAY YEAR  A3215  MO DAY YEAR  Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State 19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA 17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) 15219-1410  MO DAY YEAR  4 250.00  MO DAY YEAR  4 250.00  MO DAY YEAR  5 250.00  MO DAY YEAR  4 250.00  MO DAY YEAR  5 250.00  MO DAY YEAR  6 2017  | PA ASSN OF NURSE ANESTHETISTS PAC  Mailing Address 17 S HIGH ST, STE 200  City COLUMBUS State OH 43215  Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State Zip Code (Plus 4) 19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State Zip Code (Plus 4) 17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) 15219-1410  Full Name of Contributing Committee PA PT PAC  | 10 MO    | 26 DAY 26 | 2017  YEAR  2017 | \$ 250.00        |
|---|--|----------|-----------|------------------|------------------|
| ### A ASSN OF NURSE ANESTHETISTS PAC   Mailing Address   17 S HIGH ST, STE 200  | PA ASSN OF NURSE ANESTHETISTS PAC  Mailing Address 17 S HIGH ST, STE 200  City COLUMBUS State OH 43215  Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State Zip Code (Plus 4) 19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State Zip Code (Plus 4) 17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) 15219-1410  Full Name of Contributing Committee PA PT PAC  | 10 MO    | 26 DAY 26 | 2017  YEAR  2017 | \$ 250.00        |
| State   Zip Code (Plus 4)   10   26   2017     250.00   | City COLUMBUS  State OH OH A3215  Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State PA PA 19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA PA 2ip Code (Plus 4) 17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA 15219-1410  Full Name of Contributing Committee PA PT PAC  MC  MC  Tip Code (Plus 4) 17101  MC  MC  MC  MC  MC  Tip Code (Plus 4) 17101  MC  MC  MC  MC  MC  MC  Tip Code (Plus 4) 17101  MC  MC  MC  MC  MC  MC  MC  MC  MC  M   | мо 10 мо | DAY 26    | YEAR 2017 YEAR   | \$ 250.00        |
| City   COLUMBUS   CO  | City COLUMBUS    State   21p Code (Plus 4)   43215     43215   | мо 10 мо | DAY 26    | YEAR 2017 YEAR   |                  |
| Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State   Zip Code (Plus 4)   19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State   Zip Code (Plus 4)   17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State   Zip Code (Plus 4)   15219-1410  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State   Zip Code (Plus 4)   15219-1410  MO DAY YEAR  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00 | Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State Zip Code (Plus 4) PA 19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State Zip Code (Plus 4) PA 17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) PA 15219-1410  Full Name of Contributing Committee PA PT PAC   | 10 MO    | 26<br>DAY | 2017<br>YEAR     |                  |
| Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR  State   Zip Code (Plus 4)   100   26   2017  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG  State   Zip Code (Plus 4)   17101  MO DAY VEAR  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH  State   Zip Code (Plus 4)   15219-1410  MO DAY VEAR  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address No DAY VEAR  \$ 250.00  \$ 250.00  \$ 250.00  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address No DAY VEAR  \$ 250.00  \$ 250.00  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mailing Address 1500 PPG Place  State   Zip Code (Plus 4)   11   3   2017  \$ 250.00  \$ 25          | Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State Zip Code (Plus 4) 19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State Zip Code (Plus 4) 17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) PA 15219-1410  Full Name of Contributing Committee PA PT PAC   | 10 MO    | 26<br>DAY | 2017<br>YEAR     |                  |
| AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State PA 19010-3489  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH  State PA 2ip Code (Plus 4) 15219-1410  State PA 15219-1410  MO DAY YEAR  \$ 250.00  \$ 250.00  \$ 250.00  \$ 250.00  \$ 250.00  \$ 250.00  AMO DAY YEAR  \$ 250.00   | AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State PA 19010-3489  Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA 17101  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) 15219-1410  Full Name of Contributing Committee  | 10 MO    | 26<br>DAY | 2017<br>YEAR     |                  |
| Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State PA 19010-3489  State PA 19010-3489  Mo DAY YEAR  Molling Address 319 N FRONT ST  City HARRISBURG State PA 17101  State PA 17101  State PA 17101  Mo DAY YEAR  State PA 17101  State PA 17101  Mo DAY YEAR  State PA 17101  State PA 17101  Mo DAY YEAR  State PA 17101  State PA 17101  Mo DAY YEAR  Molling Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA 15219-1410  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) 15219-1410  Full Name of Contributing Committee PA PT PAC  Mailing Address 1500 PPG Place  State Zip Code (Plus 4) 11 3 2017   | AQUA AMERICA INC H2O PAC (FEDERAL PAC)  Mailing Address 762 W LANCASTER AVE  City BRYN MAWR State 19010-3489  Full Name of Contributing Committee  APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State 2ip Code (Plus 4) 17101  Full Name of Contributing Committee  BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State 2ip Code (Plus 4) 15219-1410  Full Name of Contributing Committee  PA PT PAC   | 10 MO    | 26<br>DAY | 2017<br>YEAR     |                  |
| State   PA  | City BRYN MAWR  State   Zip Code (Plus 4)   19010-3489  Full Name of Contributing Committee   APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address   319 N FRONT ST  City HARRISBURG   State   Zip Code (Plus 4)   17101  Full Name of Contributing Committee   BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address   ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH   State   Zip Code (Plus 4)   15219-1410  Full Name of Contributing Committee   PA PT PAC  | мо       | DAY       | YEAR             |                  |
| Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG  State Zip Code (Plus 4) PA 17101  To 26 2017  State BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address  ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH  State Zip Code (Plus 4) 15219-1410  MO DAY YEAR  \$ 250.00  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address  ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH  State Zip Code (Plus 4) 15219-1410  MO DAY YEAR  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00   | Full Name of Contributing Committee  APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG  Full Name of Contributing Committee  BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH  Full Name of Contributing Committee  BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Full Name of Contributing Committee  PA PITSBURGH  Full Name of Contributing Committee  PA PT PAC  | мо       | DAY       | YEAR             | \$ 250.00        |
| Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA 17101  State PA 17101  MO DAY YEAR  \$ 250.00  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  Mo DAY YEAR  \$ 250.00  **  **  **  **  **  **  **  **  **  | Full Name of Contributing Committee  APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA MODE PA 17101  Full Name of Contributing Committee  BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4)  PA 15219-1410  Full Name of Contributing Committee  PA PT PAC  |          |           |                  | \$ 250.00        |
| Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA MODAY YEAR  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) 15219-1410  Full Name of Contributing Committee PA PT PAC  MoDAY YEAR  4 250.00  Full Name of Contributing Committee PA PT PAC  MoDAY YEAR  4 250.00  Full Name of Contributing Committee PA PT PAC  MoDAY YEAR  4 250.00  Full Name of Contributing Committee PA PT PAC  MoDAY YEAR  4 250.00  Full Name of Contributing Committee PA PT PAC  MoDAY YEAR  4 250.00  Full Name of Contributing Committee PA PT PAC  MoDAY YEAR  4 250.00  | Full Name of Contributing Committee  APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA MINGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA MINGERSOLL& MINGERSOLL& PA MIN |          |           |                  | \$ 250.00        |
| APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA ST COL/UNIV FACL)  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  Mo DAY YEAR  \$ 250.00  Tup Code (Plus 4) 11 3 2017  Tup Code (Plus 4) 15219-1410  Mo DAY YEAR  \$ 250.00  \$ 250.00  \$ 250.00  Tup Code (Plus 4) 11 3 2017  | APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA DITION PA D |          |           |                  | \$ 250.00        |
| APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA ST COL/UNIV FACL)  Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  Mo DAY YEAR  \$ 250.00  Tup Code (Plus 4) 11 3 2017  Tup Code (Plus 4) 15219-1410  Mo DAY YEAR  \$ 250.00  \$ 250.00  \$ 250.00  Tup Code (Plus 4) 11 3 2017  | APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG State PA DITION PA D |          |           |                  | \$ 250.00        |
| State   Zip Code (Plus 4)   10   26   2017   \$ 250.00    Full Name of Contributing Committee   BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT   MO   DAY   YEAR    Mailing Address   ONE OXFORD CTR 301 GRANT ST 20 FL   250.00    City   PITTSBURGH   State   Zip Code (Plus 4)   15219-1410   15219-1410   11   3   2017    Full Name of Contributing Committee   PA PT PAC   MO   DAY   YEAR   4   250.00    Mailing Address   1500 PPG Place   \$ 250.00   11   3   2017   11  | City HARRISBURG  State   Zip Code (Plus 4)   17101  Full Name of Contributing Committee   BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address   ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH   State   Zip Code (Plus 4)   15219-1410  Full Name of Contributing Committee   PA PT PAC   | 10       | 26        | 2017             | \$ 250.00        |
| State   Zip Code (Plus 4)   10   26   2017   \$ 250.00    Full Name of Contributing Committee   BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT   MO   DAY   YEAR    Mailing Address   ONE OXFORD CTR 301 GRANT ST 20 FL   250.00    City   PITTSBURGH   State   Zip Code (Plus 4)   15219-1410   15219-1410   11   3   2017    Full Name of Contributing Committee   PA PT PAC   MO   DAY   YEAR   4   250.00    Mailing Address   1500 PPG Place   \$ 250.00   11   3   2017   11  | City HARRISBURG  State   Zip Code (Plus 4)   17101  Full Name of Contributing Committee   BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address   ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH   State   Zip Code (Plus 4)   15219-1410  Full Name of Contributing Committee   PA PT PAC   | 10       | 26        | 2017             | \$ 250.00        |
| Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mo DAY YEAR  Mo DAY YEAR  State Zip Code (Plus 4) 11 3 2017  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00  State Zip Code (Plus 4) 11 3 2017  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00  | City HARRISBURG  Full Name of Contributing Committee  BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address  ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH  State PA  PA  2ip Code (Plus 4) 17101  MC  State PA  15219-1410  Full Name of Contributing Committee PA PT PAC  | 10       | 26        | 2017             |                  |
| Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) PA 15219-1410  Full Name of Contributing Committee PA PT PAC  Mo DAY  YEAR  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mo DAY  YEAR  \$ 250.00  State Zip Code (Plus 4) 11 3 2017   | Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  Full Name of Contributing Committee PA PT PAC  |          |           |                  |                  |
| Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State Zip Code (Plus 4) 15219-1410  Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  \$ 250.00  Full Name of Contributing Committee PA PT PAC  Mailing Address 1500 PPG Place  City Pittsburg  State Zip Code (Plus 4) 11 3 2017  | Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  Full Name of Contributing Committee PA PT PAC  |          |           |                  |                  |
| BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address  ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH  State Zip Code (Plus 4) 15219-1410  Full Name of Contributing Committee PA PT PAC  Mo DAY  YEAR  \$ 250.00  The property of the property of the property of the part of the property of the property of the part of the property of the property of the part of the property of the part of the  | BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  Full Name of Contributing Committee PA PT PAC  |          |           |                  |                  |
| Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  Mailing Address 1500 PPG Place  City Pittsburg State 2ip Code (Plus 4)  The part of Contributing Committee Pa Pittsburg State 2ip Code (Plus 4)  The part of Code (Plus 4)  The part  | BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT  Mailing Address ONE OXFORD CTR 301 GRANT ST 20 FL  City PITTSBURGH State PA PT PAC  MICE PA PT PAC   |          |           |                  |                  |
| State   Zip Code (Plus 4)   11   3   2017   | City PITTSBURGH  State   Zip Code (Plus 4)   15219-1410    Full Name of Contributing Committee   PA PT PAC   | МО       | DAY       | YEAR             |                  |
| State   Zip Code (Plus 4)   11   3   2017   | City PITTSBURGH  State   Zip Code (Plus 4)   15219-1410    Full Name of Contributing Committee   PA PT PAC   |          |           |                  | -                |
| Full Name of Contributing Committee PA PT PAC  Mo DAY YEAR  Mo DAY \$ 250.00  City Pittsburg  State Zip Code (Plus 4)  15219-1410   | Full Name of Contributing Committee PA PT PAC  MC  |          |           |                  | <b>\$</b> 250.00 |
| Full Name of Contributing Committee PA PT PAC  Mailing Address  1500 PPG Place  State  State  Tip Code (Plus 4)  15219-1410  MO  DAY  YEAR  \$ 250.00   | Full Name of Contributing Committee PA PT PAC  MC  | 11       | 3         | 2017             |                  |
| Full Name of Contributing Committee PA PT PAC  Mailing Address  1500 PPG Place  State  Zip Code (Plus 4)  Til 3 2017  | Full Name of Contributing Committee PA PT PAC MG   |          |           |                  |                  |
| PA PT PAC  Mo DAY YEAR  Mailing Address 1500 PPG Place  State Zip Code (Plus 4)  11 3 2017  \$ 250.00   | PA PT PAC  |          |           |                  |                  |
| Mailing Address 1500 PPG Place \$ 250.00  City Pittsburg State Zip Code (Plus 4)  | PA PT PAC  |          |           |                  |                  |
| \$ 250.00     City   Pittsburg   State     Zip Code (Plus 4)   11   3   2017  | Mailing Address 1500 PPG Place   | МО       | DAY       | YEAR             |                  |
| \$ 250.00     City   Pittsburg   State   Zip Code (Plus 4)   11   3   2017  | 1500 PPG Place   |          |           |                  | -                |
| City Pittsburg State 21p code (Pids 4)  |  |          |           |                  | <b>\$</b> 250.00 |
| Pittsburg   |  | 11       | 3         | 2017             |                  |
| 15222   | Pittsburg  |          |           |                  |                  |
|   | 13222  |          |           |                  |                  |
| Full Name of Contributing Committee   | Full Name of Contributing Committee  |          |           |                  |                  |
| MALADY & WOOTEN PAC   | MALADY & WOOTEN PAC  |          | DAY       | YEAR             |                  |
| Mailing Address   | Mailing Address 604 N THIPD ST   | МО       |           |                  | 1                |
| Mailing Address 604 N THIRD ST  | 604 N IHIRD ST   | МО       |           | I                | 1 .              |
| \$ 250.00   |  | МО       |           |                  | \$ 250.00        |
| State   | TARRISBURG   |          | 26        | 2017             | \$ 250.00        |
| 12 26 2017  | 17101 3000   |          | 26        | 2017             | \$ 250.00        |

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

**PAGE TOTAL** 6,400.00

### **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 C                     | andidate           |                                   | Reporting P | eriod |                 |                   |
|---|--------------------|-----------------------------------|-------------|-------|-----------------|-------------------|
| MCCLINTON, JOANNA FRIEND                          | S OF               |                                   | From:       | 1/1/  | 2017 <b>T</b> o | <u>12/31/2017</u> |
|   |                    |                                   |             | DATE  |                 | AMOUNT            |
| <b>Full Name of Contributor</b><br>Beverly Clark  |                    |                                   | мо          | DAY   | YEAR            |                   |
| Mailing Address 7450 North                        | 21st Street        |                                   |             |       |                 | <b>\$</b> 35.00   |
| <b>City</b> Philadelphia                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19138 | 8           | 7     | 2017            |                   |
| Full Name of Contributor Cora Cooke               |                    |                                   | МО          | DAY   | YEAR            |                   |
| Mailing Address 5057 Summ  City Philadelphia      | State PA           | <b>Zip Code (Plus 4)</b><br>19139 | 8           | 11    | 2017            | <b>\$</b> 35.00   |
| Full Name of Contributor Carmen V. Craig-Williams | •                  | <u> </u>                          | МО          | DAY   | YEAR            |                   |
| Mailing Address 1710 South                        | Avondale Street    |                                   |             |       |                 | <b>\$</b> 75.00   |
| <b>City</b> Philadelphia                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19142 | 8           | 17    | 2017            |                   |
| Full Name of Contributor Paul Sydnor              | •                  | ·                                 | МО          | DAY   | YEAR            |                   |
| Mailing Address2718 SouthCityPhiladelphia         | 76th Street State  | Zip Code (Plus 4)                 | 8           | 21    | 2017            | \$ 100.00         |
| Full Name of Contributor                          | PA                 | 19153                             | МО          | DAY   | YEAR            |                   |
| Alice M. Flamer  Mailing Address 539 South 5      |                    |                                   |             |       |                 |                   |
| 333 30dtil 3                                      | State              | Zip Code (Plus 4)                 | 8           | 21    | 2017            | <b>\$</b> 125.00  |
| <b>City</b> Philadelphia                          | PA                 | 19143                             |             |       |                 |                   |

| Full Name of Contributor  |                       |
|---|-----------------------|
| Adrienne Benjamin MO DAY YEAR   |                       |
| Mailing Address 5030 Springfield Ave  | \$ 50.00              |
| City Philadelphia State Zip Code (Plus 4) 8 21 2017   |                       |
| PA 19143  |                       |
| Full Name of Contributor C. Gregg   |                       |
| Mailing Address 35 North 51st Street  | <b>\$</b> 50.00       |
| City Philadelphia State Zip Code (Plus 4) 8 21 2017   |                       |
| PA 19139  |                       |
| Full Name of Contributor Marilynn E. Miles  MO DAY YEAR   |                       |
|   | 1,00,00               |
| Mailing Address 7029 Woodland Ave   | \$ 100.00             |
| State State 8 21 2017   | \$ 100.00             |
| 8 21 2017   | \$ 100.00             |
| City Philadelphia State Zip Code (Plus 4) 8 21 2017   | <b>\$</b> 100.00      |
| City Philadelphia State PA 19142 8 21 2017  | \$ 50.00              |
| City Philadelphia  State PA  PA  19142  Full Name of Contributor Shalada Sankofa  Mailing Address  21 W. Elkinton Ave #B  |                       |
| City Philadelphia  State PA 19142  Full Name of Contributor Shalada Sankofa  Mailing Address 211 W. Elkinton Ave #B   |                       |
| City Philadelphia State PA 19142 8 21 2017  Full Name of Contributor Shalada Sankofa Mo DAY YEAR  Mailing Address 211 W. Elkinton Ave #B  City Chester State Zip Code (Plus 4) 8 21 2017  |                       |
| City Philadelphia State PA 19142 8 21 2017  Full Name of Contributor Shalada Sankofa MO DAY YEAR  City Chester State PA 19013 8 21 2017  Full Name of Contributor No DAY YEAR  Mailing Address 211 W. Elkinton Ave #B 21 2017  Full Name of Contributor No DAY YEAR  Mailing Address 1917 W. Master Street  |                       |
| City Philadelphia State PA 19142 8 21 2017  Full Name of Contributor Shalada Sankofa MO DAY YEAR  Mailing Address 211 W. Elkinton Ave #B  City Chester State PA 19013 8 21 2017  Full Name of Contributor Nustafa L. Rashed MO DAY YEAR   | \$ 50.00              |
| City Philadelphia State PA 19142 8 21 2017  Full Name of Contributor Shalada Sankofa MO DAY YEAR  City Chester State PA 19013 8 21 2017  Full Name of Contributor State PA 19013 8 21 2017  | \$ 50.00              |
| City Philadelphia State PA I 19142 8 21 2017  Full Name of Contributor Shalada Sankofa MO DAY YEAR  Mailing Address 211 W. Elkinton Ave #B  City Chester State PA 19013 8 21 2017  Full Name of Contributor No. Mo DAY YEAR  Mailing Address 1917 W. Master Street  City Philadelphia State Zip Code (Plus 4) 8 22 2017   | \$ 50.00              |
| City Philadelphia State PA 19142  Full Name of Contributor Shalada Sankofa  Mo DAY YEAR  City Chester State PA 19013  Full Name of Contributor Mustafa L. Rashed  Mailing Address 1917 W. Master Street  City Philadelphia State PA 19121  Full Name of Contributor Mustafa L. Rashed  Full Name of Contributor Mailing Address 1917 W. Master Street  City Philadelphia State PA 19121  Full Name of Contributor Mo DAY YEAR  Mailing Address 227 Price Ave                                    | \$ 50.00              |
| City Philadelphia State PA 19142 8 21 2017  Full Name of Contributor Shalada Sankofa MO DAY YEAR  Mailing Address 211 W. Elkinton Ave #B  City Chester State PA 19013 8 21 2017  Full Name of Contributor Mustafa L. Rashed Mailing Address 1917 W. Master Street  City Philadelphia State PA 21 2017  Full Name of Contributor Mustafa L. Rashed PA 19121  Full Name of Contributor Mailing Address 1917 W. Master Street  City Philadelphia State PA 19121  Full Name of Contributor PA 19121 | \$ 50.00<br>\$ 250.00 |

| Full Name of Contri   | ibutor  |                                       |                                 |             |           |                      |              |
|---|---|---------------------------------------|---------------------------------|-------------|-----------|----------------------|--------------|
| Marcontee Fahnbu  | lleh  |                                       |                                 | МО          | DAY       | YEAR                 |              |
| Mailing Address   | 221 South 62nd Str  | reet                                  |                                 |             |           |                      | \$<br>250.00 |
| City  |   | State                                 | Zip Code (Plus 4)               | 8           | 22        | 2017                 |              |
| <b>City</b> Philadelphia  | a   | PA                                    |                                 |             |           |                      |              |
|   |   | PA                                    | 19139                           |             |           |                      |              |
| Full Name of Contri   | ibutor  |                                       |                                 |             |           |                      |              |
| Robert E. Wright, S   |   |                                       |                                 | МО          | DAY       | YEAR                 |              |
| Mailing Address   | 907 Bell Ave  |                                       |                                 |             |           |                      | \$<br>200.00 |
| City.   |   | State                                 | Zip Code (Plus 4)               | 8           | 22        | 2017                 |              |
| <b>City</b> Yeadon  |   |                                       |                                 |             |           |                      |              |
|   |   | PA                                    | 19050                           |             |           |                      |              |
| Full Name of Contri   | ibutor  |                                       |                                 |             |           |                      |              |
| George Gossett, Jr  |   |                                       |                                 | МО          | DAY       | YEAR                 |              |
|   |   |                                       |                                 |             |           |                      |              |
| Mailing Address   | 4840 Old York Road  | d                                     |                                 |             |           |                      | \$<br>150.00 |
| <b>City</b> Philadelphia  | a   | State                                 | Zip Code (Plus 4)               | 8           | 22        | 2017                 |              |
| rinidacipini  | u   | PA                                    | 19141                           |             |           |                      |              |
|   |   |                                       |                                 |             |           |                      |              |
|   |   |                                       | I.                              |             |           |                      |              |
| Full Name of Contri   | ibutor  |                                       |                                 | МО          | DAY       | YFAR                 |              |
| Full Name of Contri<br>Noel Ann Desantis  |   |                                       |                                 | мо          | DAY       | YEAR                 |              |
|   |   | eet                                   |                                 | МО          | DAY       | YEAR                 | \$<br>125.00 |
| Noel Ann Desantis  Mailing Address  | 4010 Lauriston Stre   | eet<br><b>State</b>                   | Zip Code (Plus 4)               | <b>MO</b> 8 | DAY 22    | <b>YEAR</b> 2017     | \$<br>125.00 |
| Noel Ann Desantis   | 4010 Lauriston Stre   |                                       |                                 |             |           |                      | \$<br>125.00 |
| Noel Ann Desantis  Mailing Address  | 4010 Lauriston Stre   | State                                 | <b>Zip Code (Plus 4)</b> 19128  |             |           |                      | \$<br>125.00 |
| Noel Ann Desantis  Mailing Address  | 4010 Lauriston Strea  | State                                 |                                 |             |           |                      | \$<br>125.00 |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri  | 4010 Lauriston Strea  | State<br>PA                           |                                 | 8           | 22        | 2017                 | \$<br>125.00 |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri Carmella G. Jacqui  Mailing Address  | 4010 Lauriston Streat   | State<br>PA                           |                                 | 8           | 22        | 2017                 |              |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri  Carmella G. Jacqui  | 4010 Lauriston Streat   | State PA eet                          | 19128  Zip Code (Plus 4)        | мо          | DAY       | 2017<br>YEAR         |              |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri Carmella G. Jacqui  Mailing Address  | 4010 Lauriston Streat   | State PA eet State                    | 19128                           | мо          | DAY       | 2017<br>YEAR         |              |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri Carmella G. Jacqui  Mailing Address  | 4010 Lauriston Streat<br>a<br>ibutor<br>into<br>844 North 26th Straa                            | State PA eet State                    | 19128  Zip Code (Plus 4)        | <b>MO</b>   | 22<br>DAY | 2017<br>YEAR<br>2017 |              |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri Carmella G. Jacqui  Mailing Address  City Philadelphia   | 4010 Lauriston Streat<br>a<br>ibutor<br>into<br>844 North 26th Straa                            | State PA eet State                    | 19128  Zip Code (Plus 4)        | мо          | DAY       | 2017<br>YEAR         |              |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri Carmella G. Jacqui  Mailing Address  City Philadelphia  Full Name of Contri                                  | 4010 Lauriston Streat<br>a<br>ibutor<br>into<br>844 North 26th Straa                            | State PA  eet  State PA               | 19128  Zip Code (Plus 4)        | <b>MO</b>   | 22<br>DAY | 2017<br>YEAR<br>2017 |              |
| Noel Ann Desantis  Mailing Address  City Philadelphia  Full Name of Contri Carmella G. Jacqui  Mailing Address  City Philadelphia  Full Name of Contri Evelyn M. Craig  Mailing Address | 4010 Lauriston Street  a  ibutor into  844 North 26th Street  a  ibutor  2125 South 70th Street | State PA  eet  State PA               | 19128  Zip Code (Plus 4)        | <b>MO</b>   | 22<br>DAY | 2017<br>YEAR<br>2017 | \$<br>100.00 |
| Mailing Address  City Philadelphia  Full Name of Contri Carmella G. Jacqui  Mailing Address  City Philadelphia  Full Name of Contri Evelyn M. Craig                                     | 4010 Lauriston Street  a  ibutor into  844 North 26th Street  a  ibutor  2125 South 70th Street | State PA  eet State PA  treet Apt#312 | 19128  Zip Code (Plus 4)  19130 | мо<br>8     | 22 DAY 22 | 2017  YEAR  2017     | \$<br>100.00 |

|   |           |               |                  | FAGL II              |
|---|-----------|---------------|------------------|----------------------|
| Full Name of Contributor  |           |               | V=45             |                      |
| Noel Ann Desantis   | МО        | DAY           | YEAR             |                      |
| Mailing Address 4010 Lauriston Street   |           |               |                  | <b>\$</b> 50.00      |
| City Philadelphia State Zip Code (Plus 4)   | 8         | 22            | 2017             |                      |
| PA 19128  |           |               |                  |                      |
| Full Name of Contributor  Desaree K. Jones  | мо        | DAY           | YEAR             |                      |
| Mailing Address 5617 Washington Ave   |           |               |                  | <b>\$</b> 40.00      |
| City Philadelphia State Zip Code (Plus 4)   | 8         | 22            | 2017             |                      |
| PA 19143  |           |               |                  |                      |
| Full Name of Contributor Kristopher Dean Phipps   | мо        | DAY           | YEAR             |                      |
| Mailing Address 2011 Mt. Vernon Street  |           |               |                  | <b>\$</b> 50.00      |
| City Philadelphia State Zip Code (Plus 4)   | 8         | 25            | 2017             |                      |
| PA 19130  |           |               |                  |                      |
|   |           |               |                  |                      |
| Full Name of Contributor Diane A. Sears   | МО        | DAY           | YEAR             |                      |
| Full Name of Contributor  | МО        | DAY           | YEAR             | \$ 25.00             |
| Full Name of Contributor Diane A. Sears  Mailing Address P O Box 3885   | <b>MO</b> | <b>DAY</b> 25 | <b>YEAR</b> 2017 | <b>\$</b> 25.00      |
| Full Name of Contributor Diane A. Sears  Mailing Address P O Box 3885   |           |               |                  | \$ 25.00             |
| Full Name of Contributor Diane A. Sears  Mailing Address POBox 3885  City Philadelphia State Zip Code (Plus 4)  |           |               |                  | \$ 25.00             |
| Full Name of Contributor  Diane A. Sears  Mailing Address POBox 3885  City Philadelphia State Zip Code (Plus 4) PA 19146  Full Name of Contributor  | - 8       | DAY           | 2017<br>YEAR     | \$ 25.00<br>\$ 75.00 |
| Full Name of Contributor Diane A. Sears  Mailing Address POBox 3885  City Philadelphia State PA 19146  Full Name of Contributor Ronald L. Hooper  Mailing Address 240 South Felton Street   | - 8       | 25            | 2017             |                      |
| Full Name of Contributor Diane A. Sears  Mailing Address POBox 3885  City Philadelphia State PA 19146  Full Name of Contributor Ronald L. Hooper  Mailing Address 240 South Felton Street   | мо        | DAY           | 2017<br>YEAR     |                      |
| Full Name of Contributor Diane A. Sears  Mailing Address PO Box 3885  City Philadelphia State PA 19146  Full Name of Contributor Ronald L. Hooper  Mailing Address 240 South Felton Street  City Philadelphia State Zip Code (Plus 4)  2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  | <b>MO</b> | 25<br>DAY     | 2017 YEAR 2017   |                      |
| Full Name of Contributor Diane A. Sears  Mailing Address P O Box 3885  City Philadelphia State PA 19146  Full Name of Contributor Ronald L. Hooper  Mailing Address 240 South Felton Street  City Philadelphia State Zip Code (Plus 4) 19146  Full Name of Contributor Ronald L. Hooper  Mailing Address 240 South Felton Street  City Philadelphia State Zip Code (Plus 4) 19139 | мо        | DAY           | 2017<br>YEAR     |                      |
| Full Name of Contributor Diane A. Sears  Mailing Address POBox 3885  City Philadelphia State PA 19146  Full Name of Contributor Ronald L. Hooper  Mailing Address 240 South Felton Street  City Philadelphia State PA 19139  Full Name of Contributor   | <b>MO</b> | 25 DAY 25     | 2017 YEAR 2017   |                      |
| Full Name of Contributor Diane A. Sears  Mailing Address POBox 3885  City Philadelphia State PA 19146  Full Name of Contributor Ronald L. Hooper  Mailing Address 240 South Felton Street  City Philadelphia State PA 19139  Full Name of Contributor PA 19139  | <b>MO</b> | 25<br>DAY     | 2017 YEAR 2017   | \$ 75.00             |

|   |             |               |                      | FAGL 12              |
|---|-------------|---------------|----------------------|----------------------|
| Full Name of Contributor  |             |               |                      |                      |
| Deborah L. Canty  | МО          | DAY           | YEAR                 |                      |
| Mailing Address 441 W. Roosevelt Blvd   |             |               |                      | <b>\$</b> 50.00      |
| City Philadelphia State Zip Code (Plus  | <b>4)</b> 9 | 5             | 2017                 |                      |
| PA 19120  |             |               |                      |                      |
| Full Name of Contributor  | МО          | DAY           | YEAR                 |                      |
| Jepheth Dixon   | 1.10        |               | 12/11                |                      |
| Mailing Address 6722 Chester Ave  |             |               |                      | <b>\$</b> 125.00     |
| City Philadelphia State Zip Code (Plus  | <b>4)</b> 9 | 5             | 2017                 |                      |
| PA 19142  |             |               |                      |                      |
| Full Name of Contributor Gladys M. Brown  | МО          | DAY           | YEAR                 |                      |
| Mailing Address 2302 Ruby Road  |             |               |                      | <b>\$</b> 50.00      |
| City Harrisburg State Zip Code (Plus  | <b>4)</b> 9 | 12            | 2017                 |                      |
| PA 17104  |             |               |                      |                      |
| 17104   |             |               |                      |                      |
| Full Name of Contributor Ebony M. Walker  | МО          | DAY           | YEAR                 |                      |
| Full Name of Contributor  | МО          | DAY           | YEAR                 | \$ 50.00             |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224   |             | <b>DAY</b> 26 | <b>YEAR</b> 2017     | \$ 50.00             |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224   |             |               |                      | \$ 50.00             |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State Zip Code (Plus 4)  |             |               |                      | \$ 50.00             |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State Zip Code (Plus of PA 19118   | 12          | 26            | 2017                 | \$ 50.00<br>\$ 75.00 |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State PA 19118  Full Name of Contributor M. E. Coleman  Mailing Address 3508 Vaux Street   | 4) 12 MO    | 26            | 2017                 |                      |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State Zip Code (Plus of 19118  Full Name of Contributor M. E. Coleman  Mailing Address 3508 Vaux Street  | 4) 12 MO    | 26            | 2017<br>YEAR         |                      |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State PA 19118  Full Name of Contributor M. E. Coleman  Mailing Address 3508 Vaux Street  City Philadelphia State Zip Code (Plus Address State PA 19129                                      | 4) 12 MO    | 26            | 2017<br>YEAR         |                      |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State PA 19118  Full Name of Contributor M. E. Coleman  Mailing Address 3508 Vaux Street  City Philadelphia State Zip Code (Plus of State)  City Philadelphia State Zip Code (Plus of State) | 4) 12 MO    | 26            | 2017<br>YEAR         |                      |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State PA 19118  Full Name of Contributor M. E. Coleman  Mailing Address 3508 Vaux Street  City Philadelphia State PA 19129  Full Name of Contributor   | MO 12 MO    | 26 DAY 26     | 2017  YEAR  2017     |                      |
| Full Name of Contributor Ebony M. Walker  Mailing Address 220 E. Mermaid Lane Apt#224  City Philadelphia State PA 19118  Full Name of Contributor M. E. Coleman  Mailing Address 3508 Vaux Street  City Philadelphia State PA 19129  Full Name of Contributor Carmella G. Jacquinto                   | MO 12 MO    | 26 DAY 26     | 2017<br>YEAR<br>2017 | \$ 75.00             |

|   |                    |                                   |    |               |                  | ,                |
|---|--------------------|-----------------------------------|----|---------------|------------------|------------------|
| Full Name of Contributor  Desaree K. Jones              |                    |                                   | МО | DAY           | YEAR             |                  |
| Mailing Address 5617 Washington                         | Ave                |                                   |    |               |                  | \$ 40.00         |
| <b>City</b> Philadelphia                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 19143    | 12 | 26            | 2017             |                  |
| <b>Full Name of Contributor</b> Jordan Fletcher Barnett |                    |                                   | МО | DAY           | YEAR             |                  |
| Mailing Address 902 South Fairhill                      |                    |                                   |    |               |                  | <b>\$</b> 100.00 |
| <b>City</b> Philadelphia                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19147 | 12 | 26            | 2017             |                  |
| Full Name of Contributor Noel Ann Desantis              |                    |                                   | МО | DAY           | YEAR             |                  |
| Mailing Address 4010 Lauriston Str  City Philadelphia   | State PA           | <b>Zip Code (Plus 4)</b> 19128    | 12 | 26            | 2017             | \$ 50.00         |
| Full Name of Contributor Julian E. Settles, ESQ         |                    |                                   | МО | DAY           | YEAR             |                  |
| Mailing Address 104 Norma Road                          |                    |                                   |    |               |                  | <b>\$</b> 50.00  |
| <b>City</b> Philadelphia                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19050 | 12 | 26            | 2017             |                  |
| Full Name of Contributor Amber Racine                   |                    |                                   | МО | DAY           | YEAR             |                  |
| Mailing Address 265 E. Montana St                       | reet               |                                   |    |               |                  | <b>\$</b> 150.00 |
| City Philadelphia                                       | State              | Zip Code (Plus 4)                 | 12 | 26            | 2017             |                  |
| <b>City</b> Philadelphia                                | PA                 | 19119                             |    |               |                  |                  |
| Full Name of Contributor Amato T. Sanita                |                    | 19119                             | МО | DAY           | YEAR             |                  |
| Full Name of Contributor                                | РА                 | 19119                             | мо | <b>DAY</b> 26 | <b>YEAR</b> 2017 | <b>\$</b> 150.00 |

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

**PAGE TOTAL \$** 3,325.00

#### **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 Candida  | ne of Filing Committee or Candidate Report |          |          |    |        |      |      |          |  |  |
|--|--|----------|----------|----|--------|------|------|----------|--|--|
| MCCLINTON, JOANNA FRIENDS OF   |  |          | From:    | 1/ | 1/2017 | То:  | 12/3 | 1/2017   |  |  |
|  |  | •        |          | DA | TE     |      | АМО  | DUNT     |  |  |
| Full Name of Contributing Committee  |  |          |          | МО | DAY    | YEAR |      |          |  |  |
| PFT Committee To Support Public E  | ducation                                   |          |          |    |        |      |      |          |  |  |
| Mailing Address 1816 Chestnut Si   | treet                                      |          |          |    |        |      | \$   | 1,000.00 |  |  |
| <b>City</b> Philadelphia   | State                                      | Zip Code | (Plus 4) | 8  | 7      | 2017 |      |          |  |  |
| - типаасіріна  | PA   | 19103    |          |    |        |      |      |          |  |  |
| Full Name of Contributing Committee  | e  | •        |          | мо | DAY    | YEAR |      |          |  |  |
| Health Partners OF Philadelphia  | ·  |          |          |    |        |      |      |          |  |  |
| Mailing Address 901 Market Street STE 500  City Philadelphia State Zip Code (Plus 4) |  |          |          |    |        |      | \$   | 1,000.00 |  |  |
| <b>City</b> Philadelphia   | State                                      | Zip Code | (Plus 4) | 8  | 7      | 7    | 7    | 2017     |  |  |
|  | PA   | 19107    |          |    |        |      |      |          |  |  |
| Full Name of Contributing Committee  | e  |          |          | мо | DAY    | YEAR |      |          |  |  |
| PA OPTOMETRIC PAC  |  |          |          |    |        |      |      |          |  |  |
| Mailing Address 218 NORTH ST   |  |          |          |    |        |      | \$   | 500.00   |  |  |
| City HARRISBURG  | State                                      | Zip Code | (Plus 4) | 8  | 11     | 2017 |      |          |  |  |
|  | PA   | 17101-0  | 0000     |    |        |      |      |          |  |  |
| Full Name of Contributing Committee  | e  |          |          | мо | DAY    | YEAR |      |          |  |  |
| 1776 PAC (UFCW)  |  |          |          |    |        |      |      |          |  |  |
| Mailing Address 3031-A WALTON  | RD STE 201                                 |          |          |    |        |      | \$   | 500.00   |  |  |
| City PLYMOUTH MEETING  | State                                      | Zip Code | (Plus 4) | 8  | 11     | 2017 |      |          |  |  |
|  | PA   | 19462-0  | 000      |    |        |      |      |          |  |  |
| Full Name of Contributing Committee  | e  |          |          |    |        |      |      |          |  |  |
| LABORERS' DIST COUNCIL PAC (RE   | GIONAL)                                    |          |          | МО | DAY    | YEAR |      |          |  |  |
| Mailing Address 665 N. BROAD S   | T, 5TH FL                                  |          |          |    |        |      | \$   | 1,000.00 |  |  |
| City PHILADELPHIA  | State                                      | Zip Code | (Plus 4) | 8  | 11     | 2017 |      |          |  |  |
|  | PA   | 19123-0  | 000      |    |        |      |      |          |  |  |

| 8 16 2017  |          |
|--|----------|
| Mailing Address 150 S INDEPENDENCE MALL WEST, STE 1200 \$ 5,0  |          |
| \$ 5,0   |          |
|  | ,000.00  |
| City PHILADELPHIA State Zip Code (Plus 4) 8 10 2017  |          |
| PA 19106   |          |
| Full Name of Contributing Committee  |          |
| DIST 1199C POL ACTION FUND   |          |
| Mailing Address 1319 LOCUST STREET \$ 2,5  | ,500.00  |
| City PHILADELPHIA State Zip Code (Plus 4) 8 17 2017  |          |
| PA 191070000   |          |
| Full Name of Contributing Committee  |          |
| MAKE A DIFFERENCE PAC  |          |
| Mailing Address 6113 COBBS CREEK PKWY \$ 1,0   | ,000.00  |
| City PHILADELPHIA State Zip Code (Plus 4) 8 21 2017  |          |
| PHILADELPHIA PA 19143-0000   |          |
|  |          |
| Full Name of Contributing Committee  |          |
| Full Name of Contributing Committee  LABORERS' DIST COUNCIL PAC (REGIONAL)  MO DAY YEAR  |          |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mo DAY YEAR  Mailing Address 665 N. BROAD ST, 5TH FL \$ 4,0   | .,000.00 |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address  (CE N. DROAD ST. ST. L.E.  | ,000.00  |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mo DAY YEAR  Mo Mo DAY YEAR  4,0  | ,000.00  |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA State PA 19123-0000  Full Name of Contributing Committee  MO DAY YEAR  \$ 4,0  | ,000.00  |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA  State PA 19123-0000  Full Name of Contributing Committee  HIGHWAY LOCAL 403 AFSCME  MO DAY  YEAR  \$ 4,0  | ,000.00  |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA  State PA 19123-0000  Full Name of Contributing Committee HIGHWAY LOCAL 403 AFSCME  Mo DAY  YEAR  \$ 4,0  DAY  YEAR  \$ 1,0  | ,000.00  |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA State PA 19123-0000  Full Name of Contributing Committee HIGHWAY LOCAL 403 AFSCME  Mailing Address 3001 Walnut Street  City Philadelphia State Zip Code (Plus 4)  8 22 2017  * 4,0  * 4,0  * 4,0  * 5 4,0  * 5 4,0  * 6 5 N. BROAD ST, 5TH FL  * 4,0  * 8 22 2017  * 9 1,0  * 1,0  |          |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA State PA 19123-0000  Full Name of Contributing Committee HIGHWAY LOCAL 403 AFSCME  Mailing Address 3001 Walnut Street  State PA 19123-0000  MO DAY YEAR 4,0  Table Code (Plus 4) PA 22 2017  |          |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA State PA 19123-0000  Full Name of Contributing Committee HIGHWAY LOCAL 403 AFSCME  Mo DAY YEAR 22 2017  Full Name of Contributing Committee PA 19104  Full Name of Contributing Committee PA 19104   |          |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA State PA 19123-0000  Full Name of Contributing Committee HIGHWAY LOCAL 403 AFSCME  Mo DAY YEAR 22 2017  Full Name of Contributing Committee PA 19104  Full Name of Contributing Committee PA 19104   |          |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA State PA 19123-0000  Full Name of Contributing Committee HIGHWAY LOCAL 403 AFSCME  Mailing Address 3001 Walnut Street  City Philadelphia State PA 19104  Full Name of Contributing Committee  STUDENTS FIRST PAC  MO DAY YEAR  \$ 1,0 |          |
| LABORERS' DIST COUNCIL PAC (REGIONAL)  Mailing Address 665 N. BROAD ST, 5TH FL  City PHILADELPHIA State PA 19123-0000  Full Name of Contributing Committee HIGHWAY LOCAL 403 AFSCME  Mailing Address 3001 Walnut Street  City Philadelphia State PA 19104  Full Name of Contributing Committee  STUDENTS FIRST PAC  MO DAY YEAR  \$ 1,0 | ,000.00  |

|   |                              |                                 |           |               |                        | PAGE 16                |
|---|------------------------------|---------------------------------|-----------|---------------|------------------------|------------------------|
| Full Name of Contributing Committee   |                              |                                 | мо        | DAY           | YEAR                   |                        |
| LOCAL 0098 IBEW COPE (PHILA)  |                              |                                 | 140       |               | ILAK                   |                        |
| Mailing Address 1719 SPRING GARD  | DEN ST                       |                                 |           |               |                        | <b>\$</b> 500.00       |
| City PHILADELPHIA   | State                        | Zip Code (Plus 4)               | 8         | 25            | 2017                   |                        |
|   | PA                           | 191300000                       |           |               |                        |                        |
| Full Name of Contributing Committee   |                              |                                 | мо        | DAY           | YEAR                   |                        |
| SOUTHEAST REGIONAL COUNCIL OF   | CARPENTERS                   |                                 | MO        | DAI           | ILAK                   |                        |
| Mailing Address 91 Fieldcrest Ave 2   | State Zin Code (Plus 4)      |                                 |           |               |                        | <b>\$</b> 1,000.00     |
| City Edison   | State                        | Zip Code (Plus 4)               | 10        | 4             | 2017                   |                        |
|   | NJ                           | 08837                           |           |               |                        |                        |
| Full Name of Contributing Committee LAWPAC  | мо                           | DAY                             | YEAR      |               |                        |                        |
| Mailing Address 212 North 3rd Street STE 101  |                              |                                 |           |               |                        | <b>\$</b> 500.00       |
| <b>City</b> Harrisburg  | State                        | Zip Code (Plus 4)               | 10        | 20            | 2017                   |                        |
|   | PA                           | 17101                           |           |               |                        |                        |
|   |                              |                                 |           |               |                        |                        |
| Full Name of Contributing Committee LAWPAC  | 1                            |                                 | МО        | DAY           | YEAR                   |                        |
|   | et STE 101                   |                                 | МО        |               | YEAR                   | \$ 250.00              |
| Mailing Address 212 North 3rd Stree   | et STE 101                   | Zip Code (Plus 4)               | <b>MO</b> | <b>DAY</b> 20 | <b>YEAR</b> 2017       | \$ 250.00              |
| Mailing Address 212 North 3rd Stree   |                              | <b>Zip Code (Plus 4)</b> 17101  |           |               |                        | \$ 250.00              |
| Mailing Address 212 North 3rd Stree   | State                        |                                 |           |               |                        | \$ 250.00              |
| LAWPAC  Mailing Address 212 North 3rd Stree  City Harrisburg  Full Name of Contributing Committee   | State<br>PA                  |                                 | 10        | 20            | 2017                   | \$ 250.00<br>\$ 500.00 |
| LAWPAC  Mailing Address 212 North 3rd Street  City Harrisburg  Full Name of Contributing Committee S.R. Wojdak & Associates  Mailing Address 30 North 3rd Street  | State<br>PA                  |                                 | 10        | 20            | 2017                   |                        |
| LAWPAC  Mailing Address 212 North 3rd Street  City Harrisburg  Full Name of Contributing Committee  S.R. Wojdak & Associates  Mailing Address 30 North 3rd Street   | State<br>PA                  | 17101                           | 10<br>MO  | 20<br>DAY     | 2017<br>YEAR           |                        |
| LAWPAC  Mailing Address 212 North 3rd Street  City Harrisburg  Full Name of Contributing Committee S.R. Wojdak & Associates  Mailing Address 30 North 3rd Street  | State PA State               | 17101 Zip Code (Plus 4)         | 10<br>MO  | 20<br>DAY     | 2017<br>YEAR           |                        |
| Mailing Address 212 North 3rd Street  City Harrisburg  Full Name of Contributing Committee S.R. Wojdak & Associates  Mailing Address 30 North 3rd Street  City Harrisburg  Full Name of Contributing Committee  | State PA  State PA           | 17101 Zip Code (Plus 4)         | 10 MO     | 20 DAY 20     | 2017 YEAR 2017         |                        |
| Mailing Address 212 North 3rd Street  City Harrisburg  Full Name of Contributing Committee S.R. Wojdak & Associates  Mailing Address 30 North 3rd Street  City Harrisburg  Full Name of Contributing Committee HEALTH PARTNERS PLANS PAC  Mailing Address 901 MARKET ST, St | State PA  State PA           | 17101 Zip Code (Plus 4)         | 10 MO     | 20 DAY 20     | 2017 YEAR 2017         | \$ 500.00              |
| Mailing Address 212 North 3rd Street  City Harrisburg  Full Name of Contributing Committee S.R. Wojdak & Associates  Mailing Address 30 North 3rd Street  City Harrisburg  Full Name of Contributing Committee HEALTH PARTNERS PLANS PAC  Mailing Address 901 MARKET ST, SI | State PA  State PA  JITE 500 | 17101  Zip Code (Plus 4)  17101 | 10 MO     | 20 DAY 20 DAY | 2017  YEAR  2017  YEAR | \$ 500.00              |

|  |  |                          |                                       |           |         |                        | PAGE | 1/     |
|--|--|--------------------------|---------------------------------------|-----------|---------|------------------------|------|--------|
|  | ne of Contributing Committee   |                          |                                       | мо        | DAY     | YEAR                   |      |        |
| TROOPE   | RS ASSOCIATION   |                          |                                       |           |         |                        |      |        |
| Mailing A  | Address 3625 Vartan Way  |                          |                                       |           |         |                        | \$   | 500.00 |
| City <sub> </sub>  |  | State                    | Zip Code (Plus 4)                     | 10        | 26      | 2017                   |      |        |
| ·  | lamsbarg   | PA                       | 17110                                 |           |         |                        |      |        |
| Full Nam   | ne of Contributing Committee   |                          |                                       | мо        | DAY     | YEAR                   |      |        |
| PABAR P  | PAC (PA BAR ASSN)  |                          |                                       |           |         |                        |      |        |
| Mailing A  | Address 100 SOUTH STREET   |                          |                                       |           |         |                        | \$   | 500.00 |
| City <sub> -</sub>   | HARRISBURG   | State                    | Zip Code (Plus 4)                     | 10        | 26      | 2017                   |      |        |
| ·  | IAMUSEONG  | PA                       | 171010000                             |           |         |                        |      |        |
| Full Name of Contributing Committee  EXELON CORP PAC                                 |  |                          |                                       |           | DAY     | YEAR                   |      |        |
| EXELON CORP PAC  |  |                          |                                       |           |         |                        |      |        |
| Mailing A  | Mailing Address 101 CONSTITUTION AVE, NW, STE 400 EAST   |                          |                                       |           |         | 2017                   | \$   | 500.00 |
| City <sub>V</sub>  | WASHINGTON   | State                    | Zip Code (Plus 4)                     | 11        | 3       | 2017                   |      |        |
|  |  | DC                       | 20001                                 |           |         |                        |      |        |
|  |  |                          |                                       |           |         |                        |      |        |
| Full Nam   | ne of Contributing Committee   |                          |                                       |           |         |                        |      |        |
|  | ne of Contributing Committee NDENCE BLUE CROSS PAC (IBC  | PAC)                     |                                       | МО        | DAY     | YEAR                   |      |        |
|  | NDENCE BLUE CROSS PAC (IBC   | PAC)                     |                                       | МО        | DAY     | YEAR                   | \$   | 250.00 |
| INDEPEN Mailing A  | NDENCE BLUE CROSS PAC (IBC   | PAC)                     | Zip Code (Plus 4)                     | <b>MO</b> | DAY 3   | <b>YEAR</b> 2017       | \$   | 250.00 |
| INDEPEN Mailing A  | NDENCE BLUE CROSS PAC (IBC   | State                    | Zip Code (Plus 4)                     |           |         |                        | \$   | 250.00 |
| INDEPEN Mailing A  | NDENCE BLUE CROSS PAC (IBC   |                          | <b>Zip Code (Plus 4)</b><br>191031480 |           |         |                        | \$   | 250.00 |
| Mailing A City p   | NDENCE BLUE CROSS PAC (IBC   | <b>State</b><br>PA       |                                       |           |         |                        | \$   | 250.00 |
| Mailing A City p   | Address 1901 MARKET ST  PHILADELPHIA  The of Contributing Committee  NDENCE BLUE CROSS PAC (IBC  | <b>State</b><br>PA       |                                       | 11        | 3       | 2017                   | \$   | 250.00 |
| Mailing A  City p  Full Nam  INDEPEN  Mailing A                                      | Address 1901 MARKET ST PHILADELPHIA  The of Contributing Committee NDENCE BLUE CROSS PAC (IBC  Address 1901 MARKET ST  | <b>State</b><br>PA       |                                       | 11        | 3       | 2017                   |      |        |
| Mailing A  City p  Full Nam  INDEPEN  Mailing A                                      | Address 1901 MARKET ST  PHILADELPHIA  The of Contributing Committee  NDENCE BLUE CROSS PAC (IBC  | State PA PAC)            | 191031480                             | 11<br>MO  | DAY     | 2017<br>YEAR           |      |        |
| Mailing A  City p  Full Nam INDEPEN  Mailing A  City p                               | Address 1901 MARKET ST  PHILADELPHIA  The of Contributing Committee  NDENCE BLUE CROSS PAC (IBC  Address 1901 MARKET ST  PHILADELPHIA  | State PA PAC)            | 191031480  Zip Code (Plus 4)          | 11<br>MO  | 3 DAY 3 | 2017 YEAR 2017         |      |        |
| Mailing A  City p  Full Nam INDEPEN  Mailing A  City p                               | Address 1901 MARKET ST PHILADELPHIA  The of Contributing Committee NDENCE BLUE CROSS PAC (IBC  Address 1901 MARKET ST  | State PAC) State PAC)    | 191031480  Zip Code (Plus 4)          | 11<br>MO  | DAY     | 2017<br>YEAR           |      |        |
| Mailing A  City p  Full Nam INDEPEN  Mailing A  City p                               | Address 1901 MARKET ST PHILADELPHIA  The of Contributing Committee NDENCE BLUE CROSS PAC (IBC Address 1901 MARKET ST PHILADELPHIA  The of Contributing Committee NOTE OF CONTRIBUTION PARTITION PART | State PA  PAC)  State PA | 191031480  Zip Code (Plus 4)          | 11 MO     | 3 DAY 3 | 2017  YEAR  2017  YEAR |      |        |
| Mailing A  City P  Full Nam INDEPEN  Mailing A  City P  Full Nam LOCAL 0:  Mailing A | Address 1901 MARKET ST  PHILADELPHIA  THE OF CONTRIBUTING COMMITTEE  NDENCE BLUE CROSS PAC (IBC  Address 1901 MARKET ST  PHILADELPHIA  THE OF CONTRIBUTING COMMITTEE  1449 STEAMFITTERS UNION PARAMETERS   | State PA  PAC)  State PA | 191031480  Zip Code (Plus 4)          | 11 MO     | 3 DAY 3 | 2017 YEAR 2017         | \$   | 250.00 |

| Full Name of Contributing Committee PA OPTOMETRIC PAC         | МО                 | DAY                                    | YEAR |     |      |                  |
|---|--------------------|--|------|-----|------|------------------|
| Mailing Address 218 NORTH ST                                  |                    |  |      |     |      | <b>\$</b> 500.00 |
| City HARRISBURG   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17101-0000 | 11   | 7   | 2017 |                  |
| Full Name of Contributing Committee PECO PAC                  | МО                 | DAY                                    | YEAR |     |      |                  |
| Mailing Address 2301 MARKET ST S                              | 514-2              |  |      |     |      | \$ 500.00        |
| City PHILADELPHIA   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19103-0000 | 11   | 22  | 2017 |                  |
| Full Name of Contributing Committee HEALTH PARTNERS PLANS PAC |                    |  | МО   | DAY | YEAR |                  |
| Mailing Address 901 MARKET ST, S                              | UITE 500           |  |      |     |      | \$ 500.00        |
| City PHILADELPHIA   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19107-0000 | 12   | 26  | 2017 |                  |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

**PAGE TOTAL \$** 25,550.00

## 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.)

| ame of Filing Committee or Candidate               |                 |          | Reporting Period |            |        |       |      |       |           |                 |
|--|-----------------|----------|------------------|------------|--------|-------|------|-------|-----------|-----------------|
|  |                 |          |                  | Fror       | From:  |       |      | То:   |           |                 |
|  |                 |          |                  |            | D      | ATE   |      |       | AMOUNT    |                 |
| Full Name of Contributor                           |                 |          |                  |            | мо     | DAY   | YEAR |       |           |                 |
| Mailing<br>Address                                 |                 |          |                  |            |        |       | \$   |       | 0.00      |                 |
| City   | State           | Zi       | p Code (Plus     | <b>4</b> ) |        |       |      |       |           |                 |
| Employer Name                                      |                 | •        |                  |            | Occupa | tion  | •    | •     |           |                 |
| Employer Mailing Address/Principal Pla<br>Business | ce of           |          | City             |            |        | State |      | Zip C | ode (Plus | 4)              |
| Enter Grand Total of Part C on Scho                | edule I, Detail | led Sumr | mary Page,       | Section    | on 3.  |       |      | \$    | PAGE TO   | <b>TAL</b> 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 Co | andidate              |                  | Report  | ting Perio | bd  |      |    |          |
|--------------------------------|-----------------------|------------------|---------|------------|-----|------|----|----------|
|                                |                       |                  | From:   |            |     | То:  |    |          |
|                                |                       |                  |         | D          | ATE |      | AN | 10UNT    |
| Full Name                      |                       |                  |         | МО         | DAY | YEAR |    |          |
| Mailing Address                |                       |                  |         |            |     |      | \$ | 0.00     |
| City                           | State                 | Zip Code (       | Plus 4) |            |     |      |    |          |
| Receipt Description            | ·                     | •                |         |            |     |      |    |          |
| Enter Grand Total of Part E or | Schedule T Detaile    | d Summary Page   | Section | 4          |     |      | PA | GE TOTAL |
| Lines Grana Total of Fair 2 of | r benedule 1/ betanet | z Sammary r age, | 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 Period |                            |            |  |  |  |  |  |  |  |  |
|--|------------------|----------------------------|------------|--|--|--|--|--|--|--|--|
| MCCLINTON, JOANNA FRIENDS OF   | From:            | <u>1/1/2017</u> <b>To:</b> | 12/31/2017 |  |  |  |  |  |  |  |  |
| 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 Candida | ate                 |                       | Reporting | Reporting Period |       |     |            |  |  |
|-------------------------------------|---------------------|-----------------------|-----------|------------------|-------|-----|------------|--|--|
| Fn                                  |                     |                       |           |                  |       | 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 So   | chedule II In-Vir   | nd Contributions Deta | iled Sum  | mary Pag         |       |     | DACE TOTAL |  |  |
| Section 2.                          | iledule 11, 111-Kii | id Contributions Deta | neu Sum   | illial y Pag     | , je, |     | PAGE TOTAL |  |  |
|                                     |                     |                       |           |                  |       | \$  | 0.00       |  |  |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

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

## STATEMENT OF EXPENDITURES

| Name of Filing Committee or C   | andidate                          |                    | Panarti                    | ng Period    |           |           |            |  |  |
|---------------------------------|-----------------------------------|--------------------|----------------------------|--------------|-----------|-----------|------------|--|--|
| radine of Fining committee of C | andidate                          |                    | Keportii                   | ig Periou    |           |           |            |  |  |
| MCCLINTON, JOANNA FRIEND        | S OF                              |                    | From                       | <u>1/:</u>   | 1/2017    | То:       | 12/31/2017 |  |  |
|                                 |                                   |                    |                            | DATE         |           |           | AMOUNT     |  |  |
| To Whom Paid                    |                                   |                    | мо                         | DAY          | YEAR      |           |            |  |  |
| T D BANK                        |                                   |                    |                            |              |           |           |            |  |  |
| Mailing Address 121 South       | Board Street                      |                    | 12                         | 31           | 2017      | \$        | 120.00     |  |  |
| <b>City</b> Philadelphia        | State                             | Zip Code (Plus 4)  | Description of Expenditure |              |           |           |            |  |  |
| , maacipma                      | PA                                | 19107              |                            | y Maintene   |           |           | /17        |  |  |
| <b>To Whom Paid</b><br>T D BANK |                                   |                    |                            |              |           |           |            |  |  |
| Mailing Address 121 South       | ng Address 121 South Broad Street |                    |                            |              |           |           | 24.00      |  |  |
| <b>City</b> Philadelphia        | State                             | Zip Code (Plus 4)  | Descrip                    | tion of Exp  | enditure  |           |            |  |  |
|                                 | PA                                | 19107              | Statem                     | ents 1/1/1   | .7-12/31, | /17       |            |  |  |
| <b>To Whom Paid</b><br>Staples  |                                   |                    | мо                         | DAY          | YEAR      |           |            |  |  |
| Mailing Address 1305 West       | checter Pike                      |                    | 8                          | 18           | 2017      | \$        | 45.57      |  |  |
| <b>City</b> Havertown           | State                             | Zip Code (Plus 4)  | Descrip                    | tion of Exp  | enditure  | !         |            |  |  |
|                                 | PA                                | 19083              | Office S                   | Supplies/ ir | nk        |           |            |  |  |
| To Whom Paid                    | •                                 |                    | мо                         | DAY          | YEAR      |           |            |  |  |
| Mont Brown                      |                                   |                    |                            |              |           |           |            |  |  |
| Mailing Address 5645 Monte      | rose Street                       |                    | 1                          | 9            | 2017      | \$        | 100.00     |  |  |
| <b>City</b> Philadelphia        | State                             | Zip Code (Plus 4)  | Descrip                    | tion of Exp  | enditure  |           |            |  |  |
| ·                               | PA                                | 19143              | Christm                    | nas Toy dri  | ve/ Reim  | nbursemer | nt         |  |  |
| To Whom Paid                    | ·                                 | ·                  | МО                         | DAY          | YEAR      |           |            |  |  |
| Game Train                      |                                   |                    |                            |              |           |           |            |  |  |
| Mailing Address 9235 Acade      | emy Road                          |                    | 1                          | 9            | 2017      | \$        | 200.00     |  |  |
|                                 | Zip Code (Plus 4)                 | +                  |                            | <u> </u>     | 1         |           |            |  |  |
| <b>City</b> Philadelphia        | State                             | Lip code (i lus 4) | Descrir                    | tion of Exp  | penditure | !         |            |  |  |

19114

Toy Give Away

PΑ

| To Whom Paid C & J Catering  Mailing Address 7441-R Allentown Blvd  City Harrisburg  State Zip Code (Plus 4) 17112  Description of Catering Even  To Whom Paid Muslims 4 Humanity  Mo DAY  Mailing Address 413 South 60th Street |   |  |                       | 295.00     |  |  |
|--|---|--|-----------------------|------------|--|--|
| City Harrisburg  State PA  2ip Code (Plus 4) Description o Catering Ever  To Whom Paid Muslims 4 Humanity  Mo  DAY   | of Exp  | enditure<br>nvoice#E   |                       | 295.00     |  |  |
| To Whom Paid Muslims 4 Humanity  PA  17112  Catering Ever  MO  DAY   |   | nvoice#E   |                       |            |  |  |
| To Whom Paid Muslims 4 Humanity  Mo DAY  |   | nvoice#E   |                       |            |  |  |
| Muslims 4 Humanity  Mo DAY  Mailing Address  |   | YEAR   |                       |            |  |  |
| Mailing Address 413 South 60th Street 2  | $\overline{}$                                   |  |                       |            |  |  |
|  | 8   | 2017   | \$                    | 500.00     |  |  |
| City Philadelphia State Zip Code (Plus 4) Description o  | f Exp   | enditure   |                       |            |  |  |
| PA 19143 Sponsorship/  |   |  | ges Award             | Breakfast  |  |  |
| To Whom Paid T D BANK  MO DAY  |   | YEAR   |                       |            |  |  |
| Mailing Address 121 South Broad Street 2   | 8   | 2017   | \$                    | 8.00       |  |  |
| City Philadelphia State Zip Code (Plus 4) Description o  | f Exp   | enditure   |                       |            |  |  |
| ·  | Bank Fees for Cashier Check/ Muslims 4 Humanity |  |                       |            |  |  |
| To Whom Paid T D BANK  |   | YEAR   |                       |            |  |  |
| Mailing Address 121 South Broad Street 2   | 22  | 2017   | \$                    | 8.00       |  |  |
| City Philadelphia State Zip Code (Plus 4) Description o  | f Exp   | endit  |                       |            |  |  |
| ·  | -   | enunure  |                       |            |  |  |
| PA 19107 Bank Fees Ca  | shier   |  | Clity & Sta           | te         |  |  |
| To Whom Paid T D BANK  PA  19107  Bank Fees Ca  MO  DAY  | ashier  |  | CIity & Sta           | te         |  |  |
| To Whom Paid MO DAY  | ashier<br>22                                    | r Check (  | CIity & Sta           | te<br>8.00 |  |  |
| To Whom Paid T D BANK  Mailing Address  121 South Broad Street  2  | 22  | YEAR 2017  | \$                    |            |  |  |
| To Whom Paid T D BANK  Mo DAY  Mailing Address 121 South Broad Street 2  | 22  | YEAR 2017  | \$                    | 8.00       |  |  |
| To Whom Paid T D BANK  Mailing Address 121 South Broad Street  City Philadelphia  State  Zip Code (Plus 4)  Description o  | 22  | YEAR 2017  | \$                    | 8.00       |  |  |
| To Whom Paid T D BANK  Mailing Address 121 South Broad Street  City Philadelphia  PA  To Whom Paid  Day  Day  Day  Day   | 22  | YEAR  2017  enditure r Check f                                 | \$                    | 8.00       |  |  |
| To Whom Paid T D BANK  Mailing Address 121 South Broad Street  City Philadelphia  State PA 19107  Description of Bank Fees Ca  | 22<br>of Expashier                              | YEAR  2017  Penditure Theck for Check for Check for YEAR  2017 | \$<br>or NC100E<br>\$ | 8.00<br>sw |  |  |

|   |                  |                                   |   |                            |                                       |            | GE 26     |  |
|---|------------------|-----------------------------------|---|----------------------------|---------------------------------------|------------|-----------|--|
| <b>To Whom Paid</b><br>T D Bank   |                  |                                   |   |                            |                                       |            |           |  |
| Mailing Address 121 South Br  | road Street      |                                   | 2   | 10                         | 2017                                  | \$         | 8.00      |  |
| <b>City</b> Philadelphia  | State            | Zip Code (Plus 4)                 | Descrip   | tion of Exp                | enditure                              |            |           |  |
|   | PA               | 19107                             | Bank Fees Cashier Check William for Senate                |                            |                                       |            |           |  |
| <b>To Whom Paid</b><br>Checks Unlimited   |                  |                                   |   |                            |                                       |            |           |  |
| Tailing Address P O Box 19000   |                  |                                   |   | 8                          | 2017                                  | \$         | 66.72     |  |
| City Colorado Springs   | Colorado Springs |                                   |   |                            | enditure                              |            |           |  |
| , -   | СО               | 80935                             | Blank (   | Checks for                 | Friends o                             | f Joanna N | 1cClinton |  |
| <b>To Whom Paid</b> Tyrone Sims   |                  |                                   | МО  | DAY                        | YEAR                                  |            |           |  |
| Mailing Address 118 North Ru  | uby Street       |                                   | 5   | 18                         | 2017                                  | \$         | 125.00    |  |
| <b>City</b> Philadelphia  | State            | Zip Code (Plus 4)                 | Description of Expenditure Election Day Service 5/16/2017 |                            |                                       |            |           |  |
|   | PA               | 19139                             |   |                            |                                       |            |           |  |
| <b>To Whom Paid</b> Tyrone Sims   |                  |                                   | мо  | DAY                        | YEAR                                  |            |           |  |
| Mailing Address 118 North Ru  | uby Street       |                                   | 11  | 6                          | 2017                                  | \$         | 150.00    |  |
| <b>City</b> Philadelphia  | State            | Zip Code (Plus 4)                 | Descrip   | tion of Exp                | enditure                              |            |           |  |
|   | PA               | 19139                             | Election  | n Day Serv                 | ice 11/7/                             | 2017       |           |  |
|   |                  |                                   |   |                            |                                       |            |           |  |
| <b>To Whom Paid</b><br>Tamir Harper   |                  |                                   | МО  | DAY                        | YEAR                                  |            |           |  |
|   |                  |                                   | <b>MO</b> 5   | <b>DAY</b> 18              | <b>YEAR</b> 2017                      | \$         | 50.00     |  |
| Tamir Harper  | Ave State        | Zip Code (Plus 4)                 | 5   |                            | 2017                                  |            | 50.00     |  |
| Mailing Address 6167 Grays A  |                  | <b>Zip Code (Plus 4)</b><br>19142 | 5<br>Descrip  | 18                         | 2017<br>penditure                     |            | 50.00     |  |
| Mailing Address 6167 Grays A  | State            |                                   | 5<br>Descrip  | 18                         | 2017<br>penditure                     |            | 50.00     |  |
| Tamir Harper  Mailing Address 6167 Grays A  City Philadelphia  To Whom Paid               | State<br>PA      |                                   | 5  Descrip  | 18  otion of Exp  Day Serv | 2017<br>penditure<br>ice 5/16/        |            | 50.00     |  |
| Tamir Harper  Mailing Address 6167 Grays A  City Philadelphia  To Whom Paid  Tamir Harper | State<br>PA      |                                   | Descrip<br>Election<br>MO                                 | 18  otion of Exp Day Serv  | 2017  cenditure ice 5/16/  YEAR  2017 | \$         |           |  |

|  |                    |                                |   |                           |            | PAG   | GE 27  |  |
|--|--------------------|--------------------------------|---|---------------------------|------------|-------|--------|--|
| To Whom Paid<br>Southwest CDC                    |                    |                                | МО  | DAY                       | YEAR       |       |        |  |
| Mailing Address 6328 Pasch                       | nall Ave           |                                | 5   | 18                        | 2017       | \$    | 30.00  |  |
| <b>City</b> Philadelphia                         | State              | Zip Code (Plus 4)              | Descrip   | otion of Ex               | penditure  |       |        |  |
| Timadeipina                                      | PA                 | 19142                          | Garden  |                           |            |       |        |  |
| <b>To Whom Paid</b><br>TIIAI/Gateway To Re-entry |                    |                                | МО  | DAY                       | YEAR       |       |        |  |
| P O Box 1091                                     |                    |                                |   | 5                         | 2017       | \$    | 180.00 |  |
| ity Lansdwone State Zip Code (Plus 4)            |                    |                                |   | otion of Ex               | penditure  |       |        |  |
| Earlisaworic                                     | PA                 | 19050                          |   | nual Gala                 |            |       |        |  |
| <b>To Whom Paid</b><br>Joanna McClinton          |                    |                                | МО  | DAY                       | YEAR       |       |        |  |
| Mailing Address 6021 Wash                        | ington Ave         |                                | 5   | 3                         | 2017       | \$    | 300.00 |  |
| <b>City</b> Philadelphia                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 19143 | Description of Expenditure  April 25th 2017 Prayer Breakfast Harrisburg |                           |            |       |        |  |
| To Whom Paid YellowBird Bus Company              |                    |                                | МО  | DAY                       | YEAR       |       |        |  |
| Mailing Address 7700 State                       |                    |                                | 4   | 20                        | 2017       | \$    | 275.00 |  |
| <b>City</b> Philadelphia                         | State<br>PA        | <b>Zip Code (Plus 4)</b> 19136 |   | otion of Exp<br>uents Bus |            |       |        |  |
| To Whom Paid Sales Star Networks                 | <u>'</u>           |                                | МО  | DAY                       | YEAR       |       |        |  |
| Mailing Address 777 South                        | Wadsworth Blvd     |                                | 8   | 11                        | 2017       | \$    | 100.00 |  |
| City Lakewood                                    | State              | Zip Code (Plus 4)              |   | otion of Exp              | penditure  |       |        |  |
|  | CO                 | 80226                          | Shred   | Event                     |            |       |        |  |
| <b>To Whom Paid</b><br>Fresh Start               |                    |                                | мо  | DAY                       | YEAR       |       |        |  |
| Mailing Address 11 North 9                       | th Street          |                                | 6   | 1                         | 2017       | \$    | 200.00 |  |
| City Darby                                       | State              | Zip Code (Plus 4)              | Descrip   | tion of Ex                | penditure  |       |        |  |
| ,  | PA                 | 19023                          | Sponso  | rship For I               | _eslie Mc0 | Girth |        |  |

| o Whom Paid community Solutions, CDC          |   |  |   |   |   |                           |  |
|---|---|--|---|---|---|---------------------------|--|
|   |   |  |   |   |   |                           |  |
| Street  |   | 6  | 16  | 2017  | \$  |                           | 150.00   |
| State   | Zip Code (Plus 4)                                   | Descrip  | tion of Exc   | enditure  |   |                           |  |
| PA  | 19151   |  |   |   |   |                           |  |
| <b>To Whom Paid</b><br>Abbi Print, LLC        |   |  |   |   |   |                           |  |
| Mailing Address 321 South 60th Street         |   |  |   | 2017  | \$  |                           | 145.80   |
| City Philadelphia State Zip Code (Plus 4)     |   |  |   | enditure  |   |                           |  |
| PA  | 19143   |  |   |   |   |                           |  |
| •   |   | МО   | DAY   | YEAR  |   |                           |  |
| re  |   | 8  | 4   | 2017  | \$  |                           | 75.00  |
| Philadalphia State Zip Code (Plus 4)          |   |  |   |   |   |                           |  |
| State Philadelphia PA 2ip Code (Plus 4) 19143 |   |  |   | enunu e   |   |                           |  |
|   |   | Fundrai  | ser   | Jenuiture   |   |                           |  |
|   |   | 1  |   | YEAR  |   |                           |  |
|   |   | Fundrai  | ser   |   | \$  |                           | 300.00   |
| PA  |   | MO 8   | DAY 11  | <b>YEAR</b> 2017  | \$  |                           | 300.00   |
| PA<br>re                                      | 19143   | MO 8   | DAY   | YEAR 2017 penditure   | \$  |                           | 300.00   |
| PA Te State                                   | 19143  Zip Code (Plus 4)                            | MO 8   | DAY  11  tion of Exp  | YEAR 2017 penditure   | \$  |                           | 300.00   |
| PA Te State                                   | 19143  Zip Code (Plus 4)                            | MO 8  Descrip Tickets,                                 | DAY  11  tion of Exp / Fundraise  | YEAR 2017 Denditure   | \$  |                           | 300.00   |
| PA Te State                                   | 19143  Zip Code (Plus 4)                            | MO  8  Descrip Tickets,                                | DAY  11  tion of Exp / Fundraise  DAY   | YEAR  2017  Penditure er  YEAR  2017  | \$  |                           |  |
| PA  Pe  State  PA                             | 19143  Zip Code (Plus 4) 19460                      | MO  8  Descrip Tickets,  MO  8  Descrip                | DAY  11  tion of Exp / Fundraise  | YEAR  2017  Denditure  PER  2017  Denditure   | \$  |                           |  |
| PA  Pe  State  PA  State                      | Zip Code (Plus 4)<br>  19460<br>  Zip Code (Plus 4) | MO  8  Descrip Tickets,  MO  8  Descrip                | DAY  11  tion of Exp / Fundraise  DAY  18   | YEAR  2017  Denditure  PER  2017  Denditure   | \$  |                           |  |
| PA  Pe  State  PA  State                      | Zip Code (Plus 4)<br>  19460<br>  Zip Code (Plus 4) | MO  8  Descrip Tickets,  MO  8  Descrip Photogi        | DAY  11  Ition of Exp / Fundraise  DAY  18  Ition of Exp rapher 8/1   | YEAR  2017  Denditure  YEAR  2017  Denditure  9/2017 E  | \$  |                           |  |
| PA  Pe  State  PA  State  PA                  | Zip Code (Plus 4)<br>  19460<br>  Zip Code (Plus 4) | MO  8  Descrip Tickets,  MO  8  Descrip Photogri MO  8 | DAY  11  tion of Exp / Fundraise  DAY  18  tion of Exp rapher 8/1   | YEAR  2017  Penditure  Penditure  9/2017  YEAR  2017  YEAR  2017  | \$ Event  |                           | 150.00   |
|   | Street State PA                                     | State  | State PA    State   2ip Code (Plus 4)   Descrip Father's     MO    Street     State     Zip Code (Plus 4)   Descrip Fundris     PA     19143   Fundris     MO | Street  State PA  PA  State PA  19151  MO  DAY  Street  State PA  State PA  State PA  Description of Exp Father's Day Bloc  MO  DAY  Street  State PA  Description of Exp Fundrising Invitate  MO  DAY  MO  DAY  MO  DAY  MO  DAY | Street  State PA    Description of Expenditure Father's Day Block Party | Street  State PA    State | Street  State PA  State PA  State 19151  MO DAY  YEAR  State PA  S |

|  |                    |                                   |           |                            |                  | FAGI | 29       |
|--|--------------------|-----------------------------------|-----------|----------------------------|------------------|------|----------|
| <b>To Whom Paid</b><br>Saddiq's Water Ice          |                    |                                   |           |                            |                  |      |          |
| Mailing Address 264 South 60th Str                 | eet                |                                   | 8         | 18                         | 2017             | \$   | 200.00   |
| <b>City</b> Philadelphia                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19139 |           | otion of Exp<br>ice 8/19/2 |                  | t    |          |
| <b>To Whom Paid</b> Jamie Hollander Gourment Foods |                    |                                   |           |                            | YEAR             |      |          |
| Mailing Address 415 South York Road                |                    |                                   | 8         | 18                         | 2017             | \$   | 4,726.23 |
| City New Hope                                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18938 | 1         | otion of Exp               |                  |      |          |
| <b>To Whom Paid</b><br>Thera Milling               |                    |                                   | МО        | DAY                        | YEAR             |      |          |
| Mailing Address 307 West Earlham                   | Terrace            |                                   | 8         | 18                         | 2017             | \$   | 200.00   |
| <b>City</b> Philadelphia                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19144 | 1         | otion of Exp<br>8/2017 Ev  |                  |      |          |
| <b>To Whom Paid</b> Joanne Corson                  |                    |                                   | МО        | DAY                        | YEAR             |      |          |
| Mailing Address 4101 Haverford Ave                 |                    |                                   | 8         | 18                         | 2017             | \$   | 100.00   |
| <b>City</b> Philadelphia                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19104 | 1         | otion of Exp<br>/18/2017 [ |                  |      |          |
| <b>To Whom Paid</b><br>Angela Shakur               |                    |                                   | МО        | DAY                        | YEAR             |      |          |
| Mailing Address 2630 South 70th St                 | reet               |                                   | 8         | 20                         | 2017             | \$   | 225.00   |
| <b>City</b> Philadelphia                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19142 | 1         | otion of Exp               |                  | ent  |          |
|  |                    |                                   |           |                            |                  |      |          |
| <b>To Whom Paid</b><br>Flora Johnson               |                    |                                   | мо        | DAY                        | YEAR             |      |          |
|  | ,                  | ,                                 | <b>мо</b> | <b>DAY</b> 20              | <b>YEAR</b> 2017 | \$   | 250.00   |

|  |                    |                                   |    |                             |      | PAC        | GE 30    |
|--|--------------------|-----------------------------------|----|-----------------------------|------|------------|----------|
| <b>To Whom Paid</b><br>Marcia Hodges             |                    |                                   | МО | DAY                         | YEAR |            |          |
| Mailing Address 1110 Balley                      | Drive              |                                   | 8  | 20                          | 2017 | \$         | 300.00   |
| <b>City</b> Phoenixville                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19460 | 1  | otion of Exp                |      |            |          |
| <b>To Whom Paid</b><br>Princeton Strategies, LLC |                    |                                   | МО | DAY                         | YEAR |            |          |
| Mailing Address 13050 bustleton Ave              |                    |                                   |    | 22                          | 2017 | \$         | 3,229.52 |
| <b>City</b> Philadelphia                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19116 | 1  | otion of Exp<br>er for 8/19 |      |            |          |
| <b>To Whom Paid</b><br>NGP VAN, Inc.             |                    |                                   | МО | DAY                         | YEAR |            |          |
| Mailing Address P O Box 392                      | 2264               |                                   | 10 | 6                           | \$   | 450.00     |          |
| <b>City</b> Pittsburgh                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>15251 | 1  | otion of Exp                |      | r 3 Packag | e        |
| <b>To Whom Paid</b><br>Blue State Solutions      |                    |                                   | МО | DAY                         | YEAR |            |          |
| Mailing Address 1430 Walnu                       | t Street Ste 200   |                                   | 12 | 7                           | 2017 | \$         | 1,500.00 |
| <b>City</b> Philadelphia                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19102 | 1  | otion of Exp                |      |            |          |
| <b>To Whom Paid</b><br>Joseph Sirbak             |                    |                                   | МО | DAY                         | YEAR |            |          |
| Mailing Address 2121 Cherry                      | / Street           |                                   | 12 | 22                          | 2017 | \$         | 615.94   |
| <b>City</b> Philadelphia                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19139 | 1  | otion of Exp<br>ursement 1  |      |            |          |
| <b>To Whom Paid</b><br>Rudy Taylor               |                    |                                   | МО | DAY                         | YEAR |            |          |
|  |                    |                                   |    |                             |      |            |          |
| Mailing Address 110 North 4                      | th Street          |                                   | 9  | 8                           | 2017 | \$         | 175.00   |

|   |  |                                   |  |                            |           | PAC       | SE 31  |
|---|--|-----------------------------------|--|----------------------------|-----------|-----------|--------|
| <b>To Whom Paid</b><br>Glenn Jenkins                    |  |                                   | мо                                     | DAY                        | YEAR      |           |        |
| Mailing Address 5807 Pine S                             | treet                                      |                                   | 9                                      | 8                          | 2017      | \$        | 75.00  |
| <b>City</b> Philadelphia                                | Philadelphia  PA  Zip Code (Plus 4)  19143 |                                   |  |                            |           | k Party   |        |
| <b>To Whom Paid</b><br>Malcolm For PA                   |  |                                   | мо                                     | DAY                        | YEAR      |           |        |
| 1510 North Gratz Street                                 |  |                                   |  | 8                          | 2017      | \$        | 250.00 |
| <b>City</b> Philadelphia                                | <b>State</b><br>PA                         | <b>Zip Code (Plus 4)</b> 19121    |  | otion of Exp<br>iser /Dona |           |           |        |
| <b>To Whom Paid</b><br>Redemption Housing               |  |                                   | МО                                     | DAY                        | YEAR      |           |        |
| Mailing Address P O Box 632                             | 26   |                                   | 9                                      | 8                          | \$        | 100.00    |        |
| <b>City</b> Philadelphia                                | <b>State</b><br>PA                         | <b>Zip Code (Plus 4)</b><br>19139 | Description of Expenditure Sponsorship |                            |           |           |        |
| <b>To Whom Paid</b><br>Joanna McClinton                 |  |                                   | МО                                     | DAY                        | YEAR      |           |        |
| Mailing Address 6021 Washii                             | ngton Ave                                  |                                   | 9                                      | 8                          | 2017      | \$        | 193.91 |
| <b>City</b> Philadelphia                                | <b>State</b><br>PA                         | <b>Zip Code (Plus 4)</b><br>19143 |  | otion of Exp<br>ursement-F |           | School Su | pplies |
| <b>To Whom Paid</b><br>Friends of Yeadon Public Library | /  |                                   | МО                                     | DAY                        | YEAR      |           |        |
| Mailing Address 809 Longacr                             | re Blvd                                    |                                   | 10                                     | 4                          | 2017      | \$        | 100.00 |
| <b>City</b> Yeadon                                      | <b>State</b><br>PA                         | <b>Zip Code (Plus 4)</b><br>19050 | <b>Descrip</b><br>AD                   | otion of Exp               | penditure |           |        |
| <b>To Whom Paid</b><br>Cafe' Fresco                     |  |                                   | МО                                     | DAY                        | YEAR      |           |        |
| Mailing Address 215 North 2                             | nd Street                                  |                                   | 10                                     | 13                         | 2017      | \$        | 283.50 |
| <b>City</b> Harrisburg                                  | <b>State</b><br>PA                         | <b>Zip Code (Plus 4)</b> 17111    |  | otion of Exp<br>ion 10/17/ |           |           |        |

|   |   |                                   |                          |                                 |                         |    | GE 32            |
|---|---|-----------------------------------|--------------------------|---------------------------------|-------------------------|----|------------------|
| <b>To Whom Paid</b> Friends Of Janice Davis                   | MO DAY YEAR                             |                                   |                          |                                 |                         |    |                  |
| Mailing Address 48 North 10th                                 | h Street                                |                                   | 10                       | 20                              | 2017                    | \$ | 400.00           |
| <b>City</b> Darby   | Darby State PA  2ip Code (Plus 4) 19023 |                                   |                          |                                 | <b>enditure</b><br>iser |    |                  |
| To Whom Paid Unity Community Center                           |   |                                   |                          | DAY                             | YEAR                    |    |                  |
| lailing Address 1544 MT. Ephraim Ave                          |   |                                   |                          | 20                              | 2017                    | \$ | 260.00           |
| <b>City</b> Camden  | <b>State</b><br>NJ                      | <b>Zip Code (Plus 4)</b> 08104    | <b>Descrip</b><br>AD     | otion of Exp                    | penditure               |    |                  |
| <b>To Whom Paid</b><br>PHI BETA SIGMA FRATERNITY, I           | inc                                     |                                   | мо                       | DAY                             | YEAR                    |    |                  |
| Mailing Address P O BOX 366                                   | 54                                      |                                   | 10                       | 20                              | 2017                    | \$ | 100.00           |
| <b>City</b> Philadelphia                                      | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>19107 |                          | otion of Exp                    | enditure                |    |                  |
| <b>To Whom Paid</b><br>Krasner For DA                         |   |                                   | МО                       | DAY                             | YEAR                    |    |                  |
| Mailing Address P O Box 2253                                  | 33                                      |                                   | 10                       | 20                              | 2017                    | \$ | 150.00           |
| <b>City</b> Philadelphia                                      | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>19110 |                          | otion of Exp                    |                         |    |                  |
| To Whom Paid<br>Hope Foy                                      |   |                                   | мо                       | DAY                             | YEAR                    |    |                  |
| ,   |   |                                   |                          |                                 |                         |    |                  |
| Mailing Address 1223 South 5                                  | 59th Street                             |                                   | 10                       | 30                              | 2017                    | \$ | 269.50           |
| Mailing Address   | 59th Street State PA                    | <b>Zip Code (Plus 4)</b><br>19143 | Descrip                  | 30<br>Pition of Exp<br>prsement |                         |    | 269.50           |
| Mailing Address 1223 South 5                                  | State                                   |                                   | Descrip                  | tion of Exp                     |                         |    | 269.50           |
| Mailing Address 1223 South 5  City Philadelphia  To Whom Paid | State<br>PA                             |                                   | <b>Descrip</b><br>Reimbu | otion of Exp<br>ersement        | penditure               |    | 269.50<br>132.00 |

|   |   |                                   |   |                                    |  | PAGE |        |
|---|---|-----------------------------------|---|------------------------------------|--|------|--------|
| <b>To Whom Paid</b> Citizens To Elect Sharon O C Harris, D  | To Whom Paid<br>Citizens To Elect Sharon O C Harris, Dolores McCabe et al |                                   |   |                                    |  |      |        |
| Mailing Address 904 Longacre Blvd   |   |                                   | 11                                      | 6                                  | 2017                                   | \$   | 150.00 |
| <b>City</b> Yeadon  | State Yeadon PA 2ip Code (Plus 4) 19050                                   |                                   |   |                                    | <b>enditure</b><br>ier                 |      |        |
| To Whom Paid<br>Global Leadership Academy   | МО  | DAY                               | YEAR                                    |                                    |  |      |        |
| Mailing Address 5200 Pine Street  |   |                                   |   | 17                                 | 2017                                   | \$   | 65.00  |
| <b>City</b> Philadelphia  | <b>State</b><br>PA  | <b>Zip Code (Plus 4)</b><br>19143 | <b>Descrip</b><br>Golf Ou               | tion of Exp                        | enditure                               |      |        |
| <b>To Whom Paid</b> No More Secrets   |   |                                   | МО                                      | DAY                                | YEAR                                   |      |        |
| Mailing Address 7056 Germantown   | Ave   |                                   | 11                                      | 17                                 | 2017                                   | \$   | 100.00 |
| Y Philadelphia State Zip Code (Plus 4) PA 19119   |   |                                   |   | otion of Exp<br>ors Day of S       |  |      |        |
|   |   |                                   |   |                                    |  |      |        |
| To Whom Paid Sayre Health Center  |   |                                   | мо                                      | DAY                                | YEAR                                   |      |        |
|   | t   |                                   | <b>MO</b>                               | <b>DAY</b> 17                      | <b>YEAR</b> 2017                       | \$   | 50.00  |
| Sayre Health Center   | t State   | <b>Zip Code (Plus 4)</b> 19139    | 11 Descrip                              |                                    | 2017                                   |      | 50.00  |
| Sayre Health Center  Mailing Address 5800 Walnut Stree  | State   |                                   | 11 Descrip                              | 17                                 | 2017                                   |      | 50.00  |
| Sayre Health Center  Mailing Address 5800 Walnut Stree  City Philadelphia  To Whom Paid   | <b>State</b><br>PA  |                                   | 11  Descrip  Fall Fur                   | 17<br>Ition of Exp<br>adraiser     | 2017<br>penditure                      |      | 50.00  |
| Sayre Health Center  Mailing Address 5800 Walnut Stree  City Philadelphia  To Whom Paid PFDW Pac  | <b>State</b><br>PA  |                                   | Descrip Fall Fur                        | 17  tion of Exp draiser  DAY       | 2017 penditure  YEAR  2017             | \$   |        |
| Sayre Health Center  Mailing Address 5800 Walnut Stree  City Philadelphia  To Whom Paid PFDW Pac  Mailing Address 127 R Bates Patch                           | State PA  Road  State   | 19139  Zip Code (Plus 4)          | Descrip Fall Fur  MO  11  Descrip       | 17  Ition of Exp  Idraiser  DAY    | 2017 penditure  YEAR  2017             | \$   |        |
| Sayre Health Center  Mailing Address 5800 Walnut Stree  City Philadelphia  To Whom Paid PFDW Pac  Mailing Address 127 R Bates Patch  City Greenfield Township | State PA  Road State PA   | 19139  Zip Code (Plus 4)          | Descrip Fall Fur  MO  11  Descrip Award | 17  Ition of Expendraiser  DAY  17 | 2017  Penditure  YEAR  2017  Penditure | \$   |        |

|   |                              |                         |          |             |               | • • •     | .GL 34     |
|---|------------------------------|-------------------------|----------|-------------|---------------|-----------|------------|
| To Whom Paid                                    |                              |                         | мо       | DAY         | YEAR          |           |            |
| Beta Gamma Foundation                           |                              |                         |          |             |               |           |            |
| Mailing Address P O Box 840                     |                              |                         | 12       | 7           | 2017          | \$<br>\$  | 100.00     |
| City Lansdowne                                  | State                        | Zip Code (Plus 4)       | Descrip  | tion of Exp | enditure      | •         |            |
|   | PA                           | 19050                   | Full Pag | ge Ad       |               |           |            |
| To Whom Paid<br>MT. Zion AME                    |                              |                         | мо       | DAY         | YEAR          |           |            |
| Mailing Address 1008 Center                     | g Address 1008 Center Street |                         |          |             | 2017          | <b>\$</b> | 200.00     |
| <b>City</b> Darby                               | State                        | Zip Code (Plus 4)       | Descri   | tion of Exp | l<br>enditure | <u> </u>  |            |
| Durby   | PA                           | 19023                   |          | ıy Back Pro |               |           |            |
| To Whom Paid  National Coalition of 100 Black V | Vomen                        |                         | МО       | DAY         | YEAR          |           |            |
| Mailing Address P O Box 1310                    | 08                           |                         | 2        | 22          | 2017          | \$        | 150.00     |
| <b>City</b> Philadelphia                        | State                        | Zip Code (Plus 4)       | Descrip  | tion of Exp | enditure      |           |            |
|   | PA                           | 19101                   | Tickets  |             |               |           |            |
| <b>To Whom Paid</b> City & State                |                              |                         | МО       | DAY         | YEAR          |           |            |
| Mailing Address 325 Chestnu                     | t Street                     |                         | 2        | 22          | 2017          | \$        | 40.00      |
| <b>City</b> Philadelphia                        | State                        | Zip Code (Plus 4)       | Descrip  | tion of Exp | l<br>enditure | <u> </u>  |            |
|   | PA                           | 19106                   | Tickets  | -           |               |           |            |
| To Whom Paid T D BANK                           |                              |                         | МО       | DAY         | YEAR          |           |            |
| Mailing Address 121 South Br                    | road Street                  |                         | 2        | 22          | 2017          | <b>\$</b> | 8.00       |
| <b>City</b> Philadelphia                        | State                        | Zip Code (Plus 4)       | Descrit  | tion of Exp | enditure      | <u> </u>  |            |
| Timudelpina                                     | PA                           | 19107                   |          | ees Cashie  |               |           | re         |
| To Whom Paid T D BANK                           |                              |                         | МО       | DAY         | YEAR          |           |            |
| Mailing Address 121 South B                     | road Street                  |                         | 2        | 22          | 2017          | \$<br>\$  | 8.00       |
| <b>City</b> Philadelphia                        | State                        | Zip Code (Plus 4)       | Descri   | tion of Exp | enditure      | <u> </u>  |            |
| Типаченни                                       | PA                           | 19107                   |          | ees Cashie  |               |           |            |
| Enter Grand Total of Expendi                    | tures on Page 1. Pa          | uport Cover Page Item D |          |             |               | ı         | PAGE TOTAL |
| Linter Granu Total of Expendi                   | tures on Page 1, Re          | port Cover Page, Item D | <u> </u> |             |               | \$        | 20,392.62  |
|   |                              |                         |          |             |               |           |            |