

Campaign Finance Report

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

| | | | | | | | | |
|---|--------------------------|--------------------------|-------------------------|------------------------------------|-----------------------|--|---|-----------|
| Filer Identification Number : 20120111 | | Report Filed By : | | CANDIDATE | | COMMITTEE <input checked="" type="checkbox"/> | LOBBYIST | |
| Name of Filing Committee, Candidate or Lobbyist: NEILSON FOR THE NORTHEAST | | | | | | | | |
| Street Address: PO BOX 6054 | | | | | | | | |
| City: PHILADELPHIA | | | | State: PA | | Zip Code: 19114 | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE-PRIMARY | 2. | 30 DAY PRIMARY POST- | 3. X | AMENDMENT REPORT? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5. | 30 DAY ELECTION POST- | 6. | TERMINATION REPORT? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
| | ANNUAL REPORT | 7. | Year 2017 | FILING METHOD () CHECK ONE | | PAPER <input checked="" type="checkbox"/> | DISKETTE <input type="checkbox"/> | |
| Name of Office Sought by Candidate: | | | | DATE OF ELECTION | | District Number | Office Code | |
| | | | | MO | DAY | YEAR | Party Code | |
| | | | | 11 | 7 | 2017 | DEM | |
| Summary of Receipts and Expenditures from: | | | | MO | DAY | YEAR | FOR OFFICE USE ONLY | |
| | | | | 5 | 2 | 2017 | | TO |
| A. Amount Brought Forward From Last Report | | | | \$ 38,021.98 | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | \$ 3,800.00 | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | \$ 41,821.98 | | | | |
| D. Total Expenditures (From Schedule III) | | | | \$ 9,878.57 | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | \$ 31,943.41 | | | | |
| F. Value Of In-Kind Contributions Received (From Schedule II) | | | | \$ 0.00 | | | | |
| G. Unpaid Debts And Obligations (From Schedule IV) | | | | \$ 0.00 | | | | |

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period |
| NEILSON FOR THE NORTHEAST | From: <u>5/2/2017</u> To: <u>6/5/2017</u> |

| | |
|--|---------|
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | |
| TOTAL for the Reporting Period (1) | \$ 0.00 |

| | |
|--|-----------|
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | |
| Contributions Received From Political Committees (Part A) | \$ 100.00 |
| All Other Contributions (Part B) | \$ 0.00 |
| TOTAL for the Reporting Period (2) | \$ 100.00 |

| | |
|---|-------------|
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | |
| Contributions Received From Political Committees (Part C) | \$ 1,000.00 |
| All Other Contributions (Part D) | \$ 2,700.00 |
| TOTAL for the Reporting Period (3) | \$ 3,700.00 |

| | |
|--|---------|
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) | |
| TOTAL for the Reporting Period (4) | \$ 0.00 |

| | |
|---|-------------|
| Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.) | \$ 3,800.00 |
|---|-------------|

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 Candidate NEILSON FOR THE NORTHEAST | Reporting Period From: <u>5/2/2017</u> To: <u>6/5/2017</u> | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table> | | DATE | AMOUNT |
| DATE | AMOUNT | | |

| | | | | | | |
|---|--------------------|-----------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee IBC PAC | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 1901 MARKET STREET | | | 4 | 29 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19103 | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 100.00 |

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period |
| NEILSON FOR THE NORTHEAST | From: <u>5/2/2017</u> To: <u>6/5/2017</u> |

| | | | | DATE | | | AMOUNT | |
|--|--|--|----------|-----------------------------|----|-----|--------|------------|
| Full Name of Contributing Committee | | | | | MO | DAY | YEAR | \$1,000.00 |
| DUANE MORRIS LLP GOVERNMENT COMMITTEE STATE & LOCAL FUND | | | | | | | | |
| Mailing Address | | | | | 4 | 29 | 2016 | |
| 30 SOUTH 17TH STREET | | | | | | | | |
| City PHILADELPHIA | | | State PA | Zip Code (Plus 4) 191034196 | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 1,000.00 |

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

**Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)**

| | |
|---|--|
| Name of Filing Committee or Candidate NEILSON FOR THE NORTHEAST | Reporting Period From: <u>5/2/2017</u> To: <u>6/5/2017</u> |
|---|--|

| | | | | DATE | AMOUNT | | |
|---|----------|-----------------------------|----------------------|--------------------------|-------------|----------------------------|-------------|
| Full Name of Contributor | | | | MO | DAY | YEAR | |
| JAMES ANDERSON | | | | | | | \$ 2,700.00 |
| Mailing Address 100 STREET ROAD | | | | 4 | 29 | 2016 | |
| City NEW HOPE | State PA | Zip Code (Plus 4) 189389215 | | | | | |
| Employer Name ANDERSON CONSTRUCTION | | | | Occupation OWNER/PARTNER | | | |
| Employer Mailing Address/Principal Place of Business 6958 TORRESDALE AVE | | | City PHILADELPHIA | | State PA | Zip Code (Plus 4) 19135 | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 2,700.00 |

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

| | |
|---------------------------------------|--|
| Name of Filing Committee or Candidate | Reporting Period From: To: |
|---------------------------------------|--|

| | | | DATE | AMOUNT | | |
|---------------------|-------|-------------------|------|--------|------|---------|
| Full Name | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Receipt Description | | | | | | |

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

| |
|-------------------|
| PAGE TOTAL |
| \$ 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 | |
| NEILSON FOR THE NORTHEAST | | From: <u>5/2/2017</u> To: <u>6/5/2017</u> | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | |
| TOTAL for the Reporting Period (1) | | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F) | | | |
| TOTAL for the Reporting Period (2) | | \$ | 0.00 |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Period (3) | | \$ | 0.00 |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.) | | \$ | 0.00 |

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

| | |
|---------------------------------------|--|
| Name of Filing Committee or Candidate | Reporting Period From: To: |
|---------------------------------------|--|

| | | | DATE | | | AMOUNT |
|---|-------|-------------------|------|-----|------|----------------------------------|
| Full Name of Contributor | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Description of Contribution: | | | | | | |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2. | | | | | | PAGE TOTAL \$ 0.00 |

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

| | |
|---------------------------------------|------------------|
| Name of Filing Committee or Candidate | Reporting Period |
| | From: To: |

| | | | | DATE | | AMOUNT | |
|---|-------|------------------|-------|------------------|-----------------------------|--------------------|---------|
| Full Name of Contributor | | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | | |
| City | State | Zip Code(Plus 4) | | | | | |
| Employer of Contributor | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Business | | City | State | Zip Code(Plus 4) | Description of Contribution | | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | PAGE TOTAL 0.00 | |

SCHEDULE III STATEMENT OF EXPENDITURES

| | |
|--|--|
| Name of Filing Committee or Candidate | Reporting Period |
| NEILSON FOR THE NORTHEAST | From <u>5/2/2017</u> To: <u>6/5/2017</u> |

| | | | | DATE | AMOUNT | | |
|---|----------|-----------------------------|--|------|--------|------|-----------|
| To Whom Paid ST. HUBERT'S CHEERLEADERS | | | | MO | DAY | YEAR | \$ 120.00 |
| Mailing Address 7320 TORRESDALE AVE | | | | 4 | 22 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191364104 | Description of Expenditure SPONSORSHIP | | | | |
| To Whom Paid FRIENDS OF 66 A WARD | | | | MO | DAY | YEAR | \$ 400.00 |
| Mailing Address 3824 CHALFONT DR | | | | 4 | 22 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191543442 | Description of Expenditure ELECTION DAY EXPENSE | | | | |
| To Whom Paid SHRED-IT | | | | MO | DAY | YEAR | \$ 718.88 |
| Mailing Address 649 WHITEHEAD RD | | | | 4 | 23 | 2016 | |
| City LAWRENCE TOWNSHIP | State NJ | Zip Code (Plus 4) 086484449 | Description of Expenditure SHREDDING EVENT | | | | |
| To Whom Paid TORRESDALE SWIM CLUB | | | | MO | DAY | YEAR | \$ 70.00 |
| Mailing Address 446 MILL RD | | | | 4 | 23 | 2016 | |
| City BENSALEM | State PA | Zip Code (Plus 4) 190206339 | Description of Expenditure EVENT TICKETS / DONATION | | | | |
| To Whom Paid CHASE CARD SERVICES VISA | | | | MO | DAY | YEAR | \$ 62.22 |
| Mailing Address PO BOX 15153 | | | | 4 | 29 | 2016 | |
| City WILMINGTON | State DE | Zip Code (Plus 4) 198865153 | Description of Expenditure CAMPAIGN EXPENSES | | | | |
| To Whom Paid PA LEGISLATIVE SPORTSMAN CAUCUS | | | | MO | DAY | YEAR | \$ 35.00 |
| Mailing Address 123 EAST WING | | | | 4 | 29 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17120 | Description of Expenditure MEMBERSHIP DUES | | | | |

| | | | | | | |
|--|--------------------|---------------------------------------|---|------------|-------------|-------------|
| To Whom Paid STRASSHEIM GRAPHIC DESIGN | | | MO | DAY | YEAR | \$ 6,347.47 |
| Mailing Address 1500 SPRING GARDEN ST STE 225 | | | 5 | 11 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191304600 | Description of Expenditure PRINTING | | | |

| | | | | | | |
|---|--------------------|---------------------------------------|--|------------|-------------|-----------|
| To Whom Paid IBEW LOCAL 269 | | | MO | DAY | YEAR | \$ 350.00 |
| Mailing Address 670 WHITEHEAD RD | | | 4 | 20 | 2016 | |
| City LAWRENCE TOWNSHIP | State NJ | Zip Code (Plus 4) 086484440 | Description of Expenditure ADVERTISING | | | |

| | | | | | | |
|---|--------------------|-----------------------------------|---|------------|-------------|----------|
| To Whom Paid ABRAHAM LINCOLN ALUMNI ASSOCIATION | | | MO | DAY | YEAR | \$ 75.00 |
| Mailing Address INFORMATION REQUESTED | | | 5 | 11 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19136 | Description of Expenditure MEMORIAL PAVER | | | |

| | | | | | | |
|---|--------------------|---------------------------------------|---|------------|-------------|-------------|
| To Whom Paid FRIENDS OF THE 57TH WARD | | | MO | DAY | YEAR | \$ 1,500.00 |
| Mailing Address 9217 ANDOVER RD | | | 4 | 20 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191143818 | Description of Expenditure ELECTION DAY EXPENSE | | | |

| | | | | | | |
|--|--------------------|-----------------------------------|--|------------|-------------|-----------|
| To Whom Paid SAINT DOMINIC'S | | | MO | DAY | YEAR | \$ 200.00 |
| Mailing Address 8504 FRANKFORD AVENUE | | | 4 | 22 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19136 | Description of Expenditure SPONSORSHIP | | | |

| | | | | | | |
|--|--|--|--|--|--|-------------------|
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL |
| | | | | | | \$ 9,878.57 |

