

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: | | | | | | | | | | | | |
| 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. | AMENDMENT REPORT? | Yes | <input checked="" type="checkbox"/> | No | | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5.X | 30 DAY ELECTION POST- | 6. | TERMINATION REPORT? | Yes | | No | <input checked="" type="checkbox"/> | |
| | ANNUAL REPORT | 7. | Year 2017 | | FILING METHOD () CHECK ONE | | PAPER | <input checked="" type="checkbox"/> | DISKETTE | | | |
| Name of Office Sought by Candidate: | | | | | | DATE OF ELECTION | | | District Number | Office Code | Party Code | County Code |
| | | | | | | MO | DAY | YEAR | DEM | | | |
| | | | | | | 11 | 7 | 2017 | (SEE INSTRUCTIONS FOR CODES) | | | |
| Summary of Receipts and Expenditures from: | | MO | DAY | YEAR | TO | MO | DAY | YEAR | FOR OFFICE USE ONLY | | | |
| | | 9 | 19 | 2017 | | 10 | 23 | 2017 | | | | |
| A. Amount Brought Forward From Last Report | | | | | | \$ 31,943.41 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | | \$ 14,125.00 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | \$ 46,068.41 | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ 29,448.58 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | \$ 16,619.83 | | | | | | |
| 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>9/19/2017</u> To: <u>10/23/2017</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) | \$ 3,250.00 |
| All Other Contributions (Part B) | \$ 575.00 |
| TOTAL for the Reporting Period (2) | \$ 3,825.00 |

| | |
|---|--------------|
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | |
| Contributions Received From Political Committees (Part C) | \$ 10,300.00 |
| All Other Contributions (Part D) | \$ 0.00 |
| TOTAL for the Reporting Period (3) | \$ 10,300.00 |

| | |
|--|---------|
| 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.) | \$ 14,125.00 |
|---|--------------|

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 | | | | Reporting Period | | | |
| NEILSON FOR THE NORTHEAST | | | | From: <u>9/19/2017</u> To: <u>10/23/2017</u> | | | |
| | | | | DATE | | AMOUNT | |

| | | | | | | |
|--|-----------------|--------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| KINSER GROUP PAC | | | 6 | 23 | 2016 | |
| Mailing Address | | | | | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19102 | | | | |

| | | | | | | |
|--|-----------------|------------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| PENNSYLVANIA COALITION NURSE PRACTITIONERS PAC | | | 6 | 23 | 2016 | |
| Mailing Address | | | | | | |
| City PITTSBURGH | State PA | Zip Code (Plus 4) 152215299 | | | | |

| | | | | | | |
|--|-----------------|------------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| CITIZENS FOR GROWING ECONOMY | | | 6 | 23 | 2016 | |
| Mailing Address | | | | | | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171080308 | | | | |

| | | | | | | |
|--|-----------------|--------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| IBC PAC | | | 6 | 23 | 2016 | |
| Mailing Address | | | | | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19103 | | | | |

| | | | | | | |
|---|-----------------|------------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| BUCHANAN INGERSOLL & ROONEY CMTE FOR EFFECTIVE GOVT | | | 6 | 23 | 2016 | |
| Mailing Address | | | | | | |
| City PITTSBURGH | State PA | Zip Code (Plus 4) 152191412 | | | | |

| | | | | | | |
|--|-----------------|------------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| PPFFA PAC FUND | | | 6 | 23 | 2016 | |
| Mailing Address | | | | | | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011529 | | | | |

| | | | | | | |
|--|-----------------|------------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| PAA - PAC | | | 6 | 23 | 2016 | |
| Mailing Address | | | | | | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171052955 | | | | |

| | | | | | | |
|---|--------------------|---------------------------------------|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee IRONWORKERS POLITICAL ACTION LEAGUE | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171095908 | | | | |
| Full Name of Contributing Committee THE PENNSYLVANIA INSURANCE PAC | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191037202 | | | | |
| Full Name of Contributing Committee BRAVO PAC | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011611 | | | | |
| Full Name of Contributing Committee MALADY & WOOTEN PAC | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011114 | | | | |
| Full Name of Contributing Committee APSCUF/CAP-PA | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011203 | | | | |
| Full Name of Contributing Committee PSEA PACE | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address | | | 6 | 22 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011346 | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 3,250.00 |

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

| | |
|---|---|
| Name of Filing Committee or Candidate NEILSON FOR THE NORTHEAST | Reporting Period From: <u>9/19/2017</u> To: <u>10/23/2017</u> |
|---|---|

| | | | | DATE | | AMOUNT | |
|---|------------------|-------------|--------------------------------|---------|-----------|--------------|------------------|
| Full Name of Contributor JM ULIANA & ASSOCIATES, LLC | | | | MO 6 | DAY 22 | YEAR 2016 | \$ 250.00 |
| Mailing Address | | | | | | | |
| City | BETHLEHEM | State PA | Zip Code (Plus 4) 180208045 | | | | |
| Full Name of Contributor LEWIS, ECKERT, ROBB & CO. (SOLE PROPRIETORSHIP) | | | | MO 6 | DAY 23 | YEAR 2016 | \$ 250.00 |
| Mailing Address | | | | | | | |
| City | PLYMOUTH MEETING | State PA | Zip Code (Plus 4) 194620311 | | | | |
| Full Name of Contributor SANDY MULLER | | | | MO 6 | DAY 23 | YEAR 2016 | \$ 75.00 |
| Mailing Address | | | | | | | |
| City | MEADOWBROOK | State PA | Zip Code (Plus 4) 190461034 | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 575.00 |

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>9/19/2017</u> To: <u>10/23/2017</u> |

| | | | | DATE | | AMOUNT | |
|--|--------------|-------|----|------|-----|--------|-------------|
| Full Name of Contributing Committee POLITICAL LABOR ACTION NOW - PLAN | | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | | 6 | 23 | 2016 | |
| City | HARRISBURG | State | PA | | | | |
| Full Name of Contributing Committee PECOPAC | | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | | 6 | 23 | 2016 | |
| City | PHILADELPHIA | State | PA | | | | |
| Full Name of Contributing Committee HEALTH PARTNERS OF PHILADELPHIA PAC | | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | | 6 | 23 | 2016 | |
| City | PHILADELPHIA | State | PA | | | | |
| Full Name of Contributing Committee IBEW LOCAL 5 PAC | | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address | | | | 6 | 23 | 2016 | |
| City | PITTSBURGH | State | PA | | | | |
| Full Name of Contributing Committee AFSCME COUNCIL 13 POLITICAL & LEGISLATIVE | | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | | 6 | 23 | 2016 | |
| City | HARRISBURG | State | PA | | | | |
| Full Name of Contributing Committee PENNSYLVANIA AFL-CIO COPE | | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | | 6 | 23 | 2016 | |
| City | HARRISBURG | State | PA | | | | |

| | | | | | | |
|--|--------------------|---------------------------------------|-----------|------------|-------------|-------------|
| Full Name of Contributing Committee IBEW LOCAL 98 COMMITTEE ON POLITICAL EDUCATION | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191303915 | | | | |
| Full Name of Contributing Committee SRW&A PAC | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191023823 | | | | |
| Full Name of Contributing Committee PFT COMMITTEE TO SUPPORT PUBLIC EDUCATION | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191034902 | | | | |
| Full Name of Contributing Committee GGR INC. PAC | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011510 | | | | |
| Full Name of Contributing Committee MID-ATLANTIC LABORERS' POLITICAL LEAGUE | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City RESTON | State VA | Zip Code (Plus 4) 201905686 | | | | |
| Full Name of Contributing Committee AQUA AMERICA, INC H2O POLITICAL ACTION COMMITTEE | | | MO | DAY | YEAR | \$ 300.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City BRYN MAWR | State PA | Zip Code (Plus 4) 190103402 | | | | |
| Full Name of Contributing Committee PA THOROUGHbred HORSEMAN'S ASSOCIATION | | | MO | DAY | YEAR | \$ 2,000.00 |
| Mailing Address | | | 6 | 23 | 2016 | |
| City BENSALEM | State PA | Zip Code (Plus 4) 190200300 | | | | |

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

PAGE TOTAL

\$ 10,300.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

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

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

| | | | DATE | AMOUNT |
|--|-------|-------------------|-------------------|---------|
| Full Name of Contributor | | | MO | DAY |
| Mailing Address | | | YEAR | \$ 0.00 |
| City | State | Zip Code (Plus 4) | | |
| Employer Name | | | Occupation | |
| Employer Mailing Address/Principal Place of Business | City | State | Zip Code (Plus 4) | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 0.00 |

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 |
| | <div style="display: flex; justify-content: space-between;"> From: To: </div> |

| | | | 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>9/19/2017</u> To: <u>10/23/2017</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>9/19/2017</u> To: <u>10/23/2017</u> |

| DATE | | | | AMOUNT |
|---|-----------------|------------------------------------|---|-------------|
| To Whom Paid | MO | DAY | YEAR | |
| FRIENDS OF 66 A WARD | | | | |
| Mailing Address | 10 | 2 | 2016 | \$ 1,000.00 |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191543442 | Description of Expenditure ELECTION DAY EXPENSE | |
| To Whom Paid | MO | DAY | YEAR | |
| NE MUSCLE CLUB | | | | |
| Mailing Address | 8 | 10 | 2016 | \$ 200.00 |
| City BENSALEM | State PA | Zip Code (Plus 4) 19120 | Description of Expenditure SPONSORSHIP | |
| To Whom Paid | MO | DAY | YEAR | |
| SCOTTISH RITE BODIES VALLEY OF PHILADELPHIA | | | | |
| Mailing Address | 10 | 8 | 2016 | \$ 150.00 |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191072598 | Description of Expenditure DONATION | |
| To Whom Paid | MO | DAY | YEAR | |
| PRINT AND SEW | | | | |
| Mailing Address | 6 | 26 | 2016 | \$ 1,794.00 |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191543204 | Description of Expenditure NEILSON SHIRTS/GEAR | |
| To Whom Paid | MO | DAY | YEAR | |
| RHAWNURST ATHLETIC ASSOCIATION | | | | |
| Mailing Address | 8 | 10 | 2016 | \$ 480.00 |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191521815 | Description of Expenditure SPONSORSHIP | |
| To Whom Paid | MO | DAY | YEAR | |
| KELLY CHANCY | | | | |
| Mailing Address | 8 | 26 | 2016 | \$ 70.00 |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191542006 | Description of Expenditure HERON CHILDREN FUND TICKETS | |

| | | | | | | |
|---|--------------------|---------------------------------------|--|------------|-------------|-------------|
| To Whom Paid FRIENDS OF JARRET GIBBONS | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | 10 | 18 | 2016 | |
| City ELLWOOD CITY | State PA | Zip Code (Plus 4) 161177220 | Description of Expenditure DONATION | | | |
| To Whom Paid ARCHBISHOP RYAN QUARTERBACK CLUB | | | MO | DAY | YEAR | \$ 325.00 |
| Mailing Address | | | 9 | 6 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191161028 | Description of Expenditure ADVERTISING | | | |
| To Whom Paid USHIRIKA FUNDI | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | 10 | 22 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191501215 | Description of Expenditure DONATION | | | |
| To Whom Paid CHASE CARD SERVICES VISA | | | MO | DAY | YEAR | \$ 1,895.68 |
| Mailing Address | | | 6 | 1 | 2016 | |
| City WILMINGTON | State DE | Zip Code (Plus 4) 198865153 | Description of Expenditure CAMPAGIN EXPENSES | | | |
| To Whom Paid CHASE CARD SERVICES VISA | | | MO | DAY | YEAR | \$ 2,413.74 |
| Mailing Address | | | 6 | 26 | 2016 | |
| City WILMINGTON | State DE | Zip Code (Plus 4) 198865153 | Description of Expenditure CAMPAGIN EXPENSES | | | |
| To Whom Paid FRIENDS OF CAROLYN COMITTA | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | 9 | 20 | 2016 | |
| City WEST CHESTER | State PA | Zip Code (Plus 4) 193802932 | Description of Expenditure DONATION | | | |
| To Whom Paid FRIENDS OF TIM MAHONEY | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | 10 | 22 | 2016 | |
| City UNIONTOWN | State PA | Zip Code (Plus 4) 154013917 | Description of Expenditure DONATION | | | |
| To Whom Paid STRASSHEIM GRAPHIC DESIGN | | | MO | DAY | YEAR | \$ 620.50 |
| Mailing Address | | | 7 | 5 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191304600 | Description of Expenditure PRINTING | | | |

| | | | | | | |
|---------------------------------------|----------|-----------------------------|--|-----|------|-------------|
| To Whom Paid | | | MO | DAY | YEAR | \$ 150.00 |
| DC21 SCHOLARSHIP PROGRAM | | | | | | |
| Mailing Address | | | 8 | 24 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191541202 | Description of Expenditure SPONSORSHIP | | | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 2,500.00 |
| PA HDCC | | | | | | |
| Mailing Address | | | 9 | 20 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011130 | Description of Expenditure DONATION | | | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 500.00 |
| PERRY WARREN FOR STATE REPRESENTATIVE | | | | | | |
| Mailing Address | | | 9 | 20 | 2016 | |
| City NEWTOWN | State PA | Zip Code (Plus 4) 189402219 | Description of Expenditure DONATION | | | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 200.00 |
| ELEPHANT FUND | | | | | | |
| Mailing Address | | | 10 | 13 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191362828 | Description of Expenditure DONATION | | | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 87.00 |
| PHILLY PRETZEL COMPANY | | | | | | |
| Mailing Address | | | 6 | 1 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191153149 | Description of Expenditure SEPTA EVENT | | | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 200.00 |
| 298 INC. | | | | | | |
| Mailing Address | | | 8 | 13 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191487393 | Description of Expenditure DONATION | | | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 276.00 |
| CHIT-CHAT (PENNYPACK HOMEWONERS) | | | | | | |
| Mailing Address | | | 8 | 31 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19136 | Description of Expenditure NEWS PAPER AD | | | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 5,692.78 |
| CHASE CARD SERVICES VISA | | | | | | |
| Mailing Address | | | 10 | 23 | 2016 | |
| City WILMINGTON | State DE | Zip Code (Plus 4) 198865153 | Description of Expenditure CAMPAGIN EXPENSES | | | |

| | | | | | | |
|--|--------------------|---------------------------------------|---|------------|-------------|-------------|
| To Whom Paid PA HDCC | | | MO | DAY | YEAR | \$ 3,000.00 |
| Mailing Address | | | 10 | 23 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171011130 | Description of Expenditure DONATION | | | |
| To Whom Paid CHASE CARD SERVICES VISA | | | MO | DAY | YEAR | \$ 1,859.43 |
| Mailing Address | | | 8 | 2 | 2016 | |
| City WILMINGTON | State DE | Zip Code (Plus 4) 198865153 | Description of Expenditure CAMPAGIN EXPENSES | | | |
| To Whom Paid FRIENDS OF LINDA WEAVER | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address | | | 9 | 20 | 2016 | |
| City ROYERSFORD | State PA | Zip Code (Plus 4) 194687402 | Description of Expenditure DONATION | | | |
| To Whom Paid TORRESDALE SWIM CLUB | | | MO | DAY | YEAR | \$ 50.00 |
| Mailing Address | | | 8 | 13 | 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 | \$ 1,260.91 |
| Mailing Address | | | 8 | 26 | 2016 | |
| City WILMINGTON | State DE | Zip Code (Plus 4) 198865153 | Description of Expenditure CAMPAGIN EXPENSES | | | |
| To Whom Paid HOLOCAUST AWARENESS MUSEUM AND EDUCATION CENTER | | | MO | DAY | YEAR | \$ 125.00 |
| Mailing Address | | | 9 | 6 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191163832 | Description of Expenditure ADVERTISING | | | |
| To Whom Paid CHASE CARD SERVICES VISA | | | MO | DAY | YEAR | \$ 1,798.54 |
| Mailing Address | | | 10 | 2 | 2016 | |
| City WILMINGTON | State DE | Zip Code (Plus 4) 198865153 | Description of Expenditure CAMPAGIN EXPENSES | | | |
| To Whom Paid PA C.O.D. HOOPTALER FUND | | | MO | DAY | YEAR | \$ 50.00 |
| Mailing Address | | | 6 | 26 | 2016 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 171052726 | Description of Expenditure DONATION | | | |

| | | | | | | |
|--|--------------------|---------------------------------------|---|------------|-------------|--|
| To Whom Paid EMERGE PA | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address | | | 6 | 26 | 2016 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 191020078 | Description of Expenditure DONATION | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL \$ 29,448.58 |

