Campaign Finance Report

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

Filer Identificat Number :	ion 990	0251			Repor Filed		:	CANDI	DATE		СОМИ	1ITTEE	✓	LOBE	BYIST		
Name of Filing	Committee, Candi	date or Lo	obbyist:			-		I EXEC C	СОМ								
Street Address:	2315 W CUM	1BERLANI	D ST														
City:	PHILADELPH	IA						State:	PA			Zip Code: 19132-0000					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.) DA RIMA		POST-	3.		AMENDMENT REPORT?		Yes	N	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					0 DAY POST LECTION			OST- 6.		TERMINATION REPORT?		Yes	N	0	\checkmark
report type)	ANNUAL REPORT	T 7.	Year 2018					G METHO				PAPER		\checkmark	DISK	ETTE	
Name of Office	L Sought by Candid	ate:						DATE O	F ELEC	TIO	N	District Number	Office Code	Par	ty Cod	e Cour	
								мо	DAY	YE	AR		10000			51	
			Ī	11		6	2018	·	(SEE INS	TRUCTIO	ONS FOR	CODES	5)				
	Receipts and	мо	DAY	YEAR	1			мо	DAY	YE	AR	FC	R OFFIC	E USE	ONLY	•	
Expenditures	s from:		3 27	2	018	ГО		4	3	0	2018						
A. Amount Bro	ought Forward Fro	om Last R	eport	-			\$			9	59.91]					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 446.00																	
C. Total Funds Available (Sum Of Lines A and B) \$ 1,405.91																	
D. Total Expen	ditures (From Scl	hedule II	I)				\$				50.00]					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			1,3	55.91						
F. Value Of In-	Kind Contribution	ns Receive	ed (From S	chedu	le II)		\$				0.00	4					
G. Unpaid Deb	ts And Obligation	s (From S	chedule IV	')			\$				0.00						
				AFF	IDAV	IT S	SE	CTION									
PART I - If this i	s a Committee re	port, trea	surer sign	here. I	If this i	s a (Can	didate re	eport, ca	andid	late sig	gn here.					
I swear (or affirm correct and compl) that this report, in ete.	cluding the	attached sc	hedules	s filed or	n pap	per o	or by electi	ronic me	dium,	are to t	the best o	f my knov	/ledge	and be	lief , tr	·ue
Sworn to and sub	scribed before me th day of	is	20							Si	ignature	e of Perso	n Submitt	ing Rep	ort		-
	Signat	ure	-			_						Prin	ted Name				-
My Commission E	-	ure										Ema	il				-
	мо	DA	AY	YR					Are	a Cod	e	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a car	ndidate's	authorized	Comn	nittee, (Cane	dida	te shall :	sign he	re.							
I swear (or affirm) No 320) as amend) that to the best of ed.	my knowle	edge and beli	ef this	political	l cor	mmi	ttee has n	ot violato	ed any	y provis	ions of th	e act of Ju	ine 3,19	937 (P	L. 133	з,
Sworn to and subse	cribed before me this day of	5	20								S	ignature o	of Candida	te			-
						_						Printe	d Name				-
My Commission Ex	Signature pires	1										Ema	il				-
	мо					_			Area C	ode			aytime Te	lenhor	e Num	her	-
	no	DA	4 1	YR					Area C	Jue			ayone it	epnon	a num	501	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	-			
Name of Filing Committee or Candidate	Reportin	g Period		
WARD 16 DEM EXEC COM	<u>3/27/201</u>	<u>8</u> To:	<u>4/30/2018</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Rep	orting 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)			\$	336.00
All Other Contributions (Part B)	\$	110.00		
TOTAL for the Rep	\$	446.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Rep	orting Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From P	art E)			
TOTAL for the Rep	orting Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (A totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cor			\$	446.00

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 Candida	ate		Reportin	g Period			
WARD 16 DEM EXEC COM	From:	<u>3/27/2</u>	<u>018</u> To	:	<u>4/30/2018</u>		
				DATE			AMOUNT
Full Name of Contributing Committee Friends of Sharif Street			мо	DAY	YEAR		
Mailing Address 1621 W Jefferso	n St					\$	120.00
City Philadelphia	State PA	4)	3 27	2018			
Full Name of Contributing Committee Friends of Emilio Vazquez			мо	DAY	YEAR		
Mailing Address 200 S Broad St						\$	96.00
City Philadelphia	State PA	Zip Code (Plus 19102	4)	4 27	2018		
Full Name of Contributing Committee Friends of Danilo Burgos			мо	DAY	YEAR		
Mailing Address 1117 W Ontario	St					\$	120.00
City Philadelphia	State PA	Zip Code (Plus 19140	4)	3 27	2018		
							PAGE TOTAL
Enter Grand Total of Part A on Sch	edule I, Deta	iled Summary Page, S	ection 2.			\$	336.00

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Use this Part to ite	emize all othe 0.01 to \$250.	1 TO \$250.00 r contribution 00 in the repo	s w ortir	ith an 1g peri	aggrega iod.			°om
Name of Filing Committee or Candida	te		Rep	orting Po	eriod			
WARD 16 DEM EXEC COM	m:	<u>3/27/2</u>	2 <u>018</u> To	:	<u>4/30/2018</u>			
					DATE			AMOUNT
Full Name of Contributor Fredrick Ramirez				мо	DAY	YEAR		
Mailing Address 430 W Annsbury S	t					2010	\$	50.00
City Philadelphia	State PA	Zip Code (Plus 4) 19140		4	27	2018		
Full Name of Contributor Penrose Adv Council				мо	DAY	YEAR		
Mailing Address P.O. Box 16553				_		2010	\$	60.00
City Philadelphia	State PA	Zip Code (Plus 4) 19121		4	27	2018		
Enter Grand Total of Part A on	\$	PAGE TOTAL 110.00						

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					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

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

I

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period					
			From:			То:				
				D	ATE			AMOUNT	Г	
Full Name				мо	DAY	YEAR				
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	·						•			
Enter Grand Total of Part E on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL	
	are 1, Detailed Sum	iniai y Faye,	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		
WARD 16 DEM EXEC COM	From:	<u>3/27/2018</u> To:	<u>4/30/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period						
	From:			То:			
				DATE		АМО	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	,				
Description of Contribution:							
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candidate						Reporting Period					
					Fro	om:		То:			
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(Plus 4)							
Employer of Contributor	I					Occupat	tion	-			
Employer Mailing Address/Principal Business	Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	
				_						PAGE TOTAL	

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
WARD 16 DEM EXEC COM			From	From <u>3/27/2018</u>		То:	<u>4/30/2018</u>	
			DATE				AMOUNT	
To Whom Paid Citizens Bank			мо	DAY	YEAR			
Mailing Address 1500 N Broad St			3	30	2018	\$	25.00	
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure					
	РА	19121	Monthly Fee					
To Whom Paid			мо	DAY	YEAR			
Citizens Bank								
Mailing Address 1500 N Broad St			4	30	2018	\$	25.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
	РА	19121	Monthly Bank Fee					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
						\$	50.00	

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