Campaign Finance Report

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

Filer Identification 9100099 Number:						Report CANDIDA		IDATE		СОМ	ITTEE	✓	LOBB	YIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		RACE	ST	REET	PAC		_			-			
Street Address:	1301 N. 31	STREET														
City:	PHILADELPH	IA						State:	PA			Zip Cod	le: 19	9121		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	2	.х	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- ELECTION 5. 30 DAY PO ELECTION					POST-	POST- 6.			ATION ?	Yes	No	\	
report type)	ANNUAL REPOR	7.	Year 2018 FILING METHOD () CHECK ONE							PAPER		\checkmark	DISKE	TTE		
Name of Office S	Sought by Candid	ate:						DATE	OF ELE	CTIC)N	District Number	Office Code	Part	y Code	County Code
								МО	DAY	Y	EAR	Ivamber	Couc	DEM		51
								1	1	6	2018		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY Y	EAR			_	МО	DAY	Υ	EAR	FO	R OFFI	CE USE	ONLY	
			3 27	20)18	T	0	,	4	30	2018					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				709.43					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	ched	dule 1	I)	\$				0.00					
C. Total Funds	Available (Sum C	of Lines A	and B)				\$				709.43					
D. Total Expend	ditures (From Sc	hedule II	I)				\$				0.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			-	709.43					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	e II))	\$				0.00					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$			30,	00.00			1		
			Д	\FF	IDA'	VI٦	ΓSE	CTION								
PART I - If this is			_													
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sched	lules	filed	on p	paper o	or by elec	tronic n	nediun	ı, are to t	the best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me th	is	20							:	Signature	of Perso	n Submit	ting Rep	ort	
	Signat	ura	_				-					Prin	ted Name	e		—
My Commission Ex	_	uic										Ema	il			
	мо	D	AY	YR			-		Aı	rea Co	de	Daytim	e Telepi	none Nur	nber	
Part II- If this is	a report of a car	ndidate's	authorized Co	mm	ittee	e, Ca	andida	ate shal	l sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politio	cal	commi	ittee has	not viola	ated a	ny provis	ions of the	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc		5									S	ignature o	of Candid	ate		
	day of		_ 20				-					pi	d Ne			
	Signature						•					Printe	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR		_			Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary 1 age				
Name of Filing Committee or Candidate	Reporting	J Period		
RACE STREET PAC	From:	<u>3/27/201</u>	<u>.8</u> To:	4/30/2018
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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
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 Reporting	Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Nume of Fining Comm	intec of cumulate			om:	renou	То	:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL	
\$ 0.00	

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 Filling Committee of Candidate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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.)

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Reporting Period					
			Fror	n:		To) :			
				D	ATE		А	MOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name		•		Occupa	tion		•			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 3.			\$	PAGE TOTAL 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 Fotal 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 Perio	d	
RACE STREET PAC	From:	3/27/2018 To :	4/30/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Candidat	ame of Filing Committee or Candidate Re									
	Fn					From: To:				
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL			
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai 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	ame of Filing Committee or Candidate					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					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Reporti						
	From			То:			
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure		
-							PAGE TOTAL
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Reporting			ng Period						
RACE STREET PAC			From:	<u>3</u>	<u>8/27/2018</u>	То:		4/30/2018	
					DATE			Outstanding Balance of Debt	
Name of Creditor RICHARD K. BARNHART			мо	DAY	YEAR				
Mailing Address 40 EVANS LANE				4	4	2014	\$	5,000.00	
City HAVERFORD	State Zip Code (Plus 4) PA 19041		Description of Debt LOAN TO COMMITTEE						
					DATE	Outstanding Balance of Debt			
Name of Creditor MARK H. DAMBLY				МО	DAY	YEAR			
Mailing Address 354 DARLING ROAD			4	4	2014	\$	5,000.00		
City MEDIA	State PA	Zip Code (Plu 19063	ıs 4)	Description of Debt LOAN TO COMMITTEE					
					Outstanding DATE Balance of Debt				
Name of Creditor MARK H. DAMBLY			МО	DAY	YEAR				
Mailing Address 354 DARLING ROA	D			4	20	2016	\$	5,000.00	
City MEDIA	State PA	Zip Code (Plu 19063	ıs 4)	Description of Debt LOAN TO COMMITTEE					
			DATE				Outstanding Balance of Debt		
Name of Creditor MARK H. DAMBLY				МО	DAY	YEAR			
Mailing Address 354 DARLING ROAD			7	1	2016	\$	5,000.00		
City MEDIA	State PA	Zip Code (Plu 19063	ıs 4)	Description of Debt LOAN TO COMMITTEE					

				DATE			Outstanding Balance of Debt	
Name of Creditor RICHARD K. BARNHART			МО	DAY	YEAR			
Mailing Address 40 EVANS LANE			7	1	2016	\$	5,000.00	
City HAVERFORD	State PA	Zip Code (Plus 4) 19041	Description of Debt LOAN TO COMMITTEE					
				DATE			Outstanding Balance of Debt	
Name of Creditor RICHARD K. BARNHART			МО	DAY	YEAR			
Mailing Address 40 EVANS	LANE		10	26	2017	\$	2,500.00	
City HAVERFORD	State PA	Zip Code (Plus 4) 19041	Description of Debt LOAN TO COMMITTEE					
DATE						Outstanding Balance of Debt		
Name of Creditor MARK H. DAMBLY			МО	DAY	YEAR			
Mailing Address 354 DARLING ROAD			10	26	2017	\$	2,500.00	
City MEDIA	State PA	Zip Code (Plus 4) 19063	Description of Debt LOAN TO COMMITTEE					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	PAGE TOTAL 30,000.00	