### **Campaign Finance Report**

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

Filer Identificati Number :	on 9900	251			Rep File			CANDI	DATE		СОМ	4ITTEE	✓	LOBE	SYIST			
Name of Filing C	Committee, Candid	ate or L	obbyist:		NAR	D 1	6 DEI	M EXEC (	СОМ								_	
Street Address:	2315 W CUMI	3ERLAN	D ST															
City:	PHILADELPHI -	A						State:	PA			Zip Cod	<b>ie:</b> 19	9132-0	000			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT		Yes	No	1		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY I ELECTION	PRE-	- 5	j.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	1		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018					IG METHO				PAPER		$\checkmark$	DISKE	TTE		
Name of Office S	Sought by Candida	te:						DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County	y	
								мо	DAY	YE	AR		****	DEM	1	51		
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)		
	Receipts and	МО	DAY YE	AR			,	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY			
Expenditures	s from:		5 1	20	18	T	0	6		4	2018							
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			1,3	55.91							
B. Total Monet	ary Contributions	And Rec	eipts (From Sc	hed	lule	I)	\$			1,0	00.00							
C. Total Funds	Available (Sum O	Lines A	and B)				\$			2,3	55.91							
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,7	75.00	5.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			5	80.91							
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)	)	\$				0.00							
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00			•				
			А	FFI	[DA	VI	ΓSE	CTION										
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f thi	s is	a Can	didate re	eport, o	andio	late sig	ın here.						
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sched	ules	filed	on <sub> </sub>	paper o	or by elect	ronic m	edium,	, are to t	he best o	f my kno	wledge a	and belie	ef , true	a,	
Sworn to and subs	cribed before me this day of	5	20							s	ignature	of Perso	n Submit	ting Rep	ort		•	
	Signatu	re					-					Prin	ted Name	e			-	
My Commission Ex	cpires ————						_					Ema	il				.	
	МО	D.	AY	YR					Are	ea Cod	е	Daytim	e Teleph	none Nu	mber		╝	
Part II- If this is	a report of a can	didate's	authorized Co	mm	ittee	e, Ca	andida	ate shall	sign he	ere.								
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief t	his	politi	ical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,		
Sworn to and subsc	ribed before me this day of		20								S	ignature o	of Candid	ate			٠	
-							-					Printe	d Name				٠	
My Commission Exp	Signature						-					Ema	il				٠	
							•							_				
	МО	D	AY	YR					Area	Code		D	aytime T	elephon	e Numbe	er	1	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
WARD 16 DEM EXEC COM	From:	<u>5/1/201</u>	<u>8</u> To:	6/4/2018
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)			\$	1,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	) Period	(3)	\$	1,000.00
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			\$	1,000.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Name of Filing Comm	nittee or Candidate		Reporti	ng Period			
	From: To:				:		
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		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

## 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		Rep	oorting P	eriod			
			Fro	m:		To	<b>:</b>	
					DATE		А	MOUNT
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 Candidate	Reporting Peri	iod		
WARD 16 DEM EXEC COM	From:	5/1/2018	То:	6/4/2018

DATE AMOUNT

Full Name of Contributing Committee Genesis 1V			МО	DAY	YEAR	
Mailing Address 236 N 59th St						\$ 1,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19137	5	11	2018	

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

PAGE TOTAL 1,000.00

### 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 Candi	date			Rep	orting Pe	eriod			
				Fron	n:		To	<b>)</b> :	
			_		D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•				Occupa	tion	•	•	
Employer Mailing Address/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	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 Period		
WARD 16 DEM EXEC COM	From:	<u>5/1/2018</u> <b>To:</b>	6/4/2018
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	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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 Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									<b>\$</b>	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or 0	Candidate		Reporti	ng Period			
WARD 16 DEM EXEC COM			From	<u>5/:</u>	1/2018	То:	6/4/2018
		<u>I</u>		DATE			AMOUNT
<b>To Whom Paid</b> Andrew Smith			МО	DAY	YEAR		
Mailing Address 2252 N Wo	oodstock St		5	15	2018	\$	1,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19132		otion of Exp Election Da			
<b>To Whom Paid</b> Max's			МО	DAY	YEAR		
Mailing Address Germantown & Erie Avenue			5	14	2018	\$	650.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19140		otion of Exp			
<b>To Whom Paid</b> Leroy Brown	<u>'</u>	•	МО	DAY	YEAR		
Mailing Address 3053 W Co	olona St		5	1	2018	\$	100.00
<b>City</b> Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19132		otion of Exp			
<b>To Whom Paid</b> Citizens Bank			МО	DAY	YEAR		
Mailing Address 1500 N Br	oad St		5	31	2018	\$	25.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19132	1	otion of Exp y Bank Cha			
	I						PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

1,775.00