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 201 | 50218 | | | Rep File | ported B | | CAN | ANDIDATE | | | COM | ITTEE | ✓ | LOBI | BYIST | | |
|---|--|-------------|-----------------------|----------|-------------|----------|--------|-----------------|------------------------|---------|-------------|-------------|------------------------|----------------|--------------|--------|-----------|----------|
| Name of Filing C | ommittee, Candi | date or L | obbyist: | | Frie | nds | of Do | nna Bu | ollu | ck | | | | | | | | |
| Street Address: | PO Box 58921,Philadelphia Street Address: | | | | | | | | | | | | | | | | | |
| City: | Philadelphia | | | | | | | State: | | PA | | | Zip Code: 19102 | | | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | | | | | AY ARY | P | OST- | 3. X | | AMENDMENT REPORT? | | Yes | N | lo | \ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | E- ! | 5. | 30 DA | | P | OST- | 6. | | TERMINA REPORT? | | Yes | Ν | lo | / |
| report type) | ANNUAL REPORT | 7. | Year 2018 | | | | | NG MET CHECK | | _ | | | PAPER | | \checkmark | DISK | ETTE | |
| Name of Office S | ought by Candida | ite: | - | | | | | DATE | Ol | F ELE | CTIC | N | District Number | Office Code | Par | ty Cod | e Cou | |
| DEDDECEMENT | VE IN THE CENE | | EMBLY | | | | | МО | | DAY | YI | EAR | 195 | STH | DEN | 1 | 51 | |
| REPRESENTATI | VE IN THE GENE | KAL ASS | PEMBLY | | | | | - | 11 | | 6 | 2018 | | (SEE INS | TRUCTI | ONS FO | R CODES | 5) |
| Summary of | | МО | DAY | YEAR | ` | | | МО | | DAY | Y | EAR | FO | R OFFIC | E USE | ONL | 7 | |
| Expenditures | trom: | | 5 1 | . 2 | 018 | Т | 0 | | 6 | | 4 | 2018 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | | 70, | 543.84 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (Fron | n Sche | dule | I) | \$ | | | | 4,8 | 883.21 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | | 75, | 427.05 | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | | 8,9 | 995.25 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line | C) | | | \$ | | | | 66,4 | 131.80 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From S | chedu | le II | :) | \$ | | | | 4 | 182.45 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule I\ | /) | | | \$ | | | | | 700.00 | | , | | | | |
| | | | | AFF | IDA | ١٧٧ | T SE | CTIO | N | | | | | | | | | |
| PART I - If this is | | - | _ | | | | | | | - | | _ | | | | | | |
| I swear (or affirm) correct and comple | that this report, inc ete. | cluding the | e attached sc | hedule | s filed | d on | paper | or by ele | ectr | onic m | edium | ı, are to t | he best o | f my knov | rledge | and be | lief , tı | ue |
| Sworn to and subs | cribed before me th day of | is | 20 | | | | | | • | | 5 | Signature | of Perso | n Submitt | ing Rep | ort | | |
| | Signate | ıre | | | | | - - | | • | | | | Prin | ted Name | | | | _ |
| My Commission Ex | pires | | | | | | _ | | | | | | Ema | il | | | | |
| | МО | D | AY | YR | | | | | | Are | ea Coo | de | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized | Comn | nitte | e, C | andid | ate sha | all s | ign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of ed. | my knowl | edge and bel | ief this | polit | tical | comm | ittee ha | s no | t viola | ted ar | ny provis | ions of the | e act of Ju | ine 3,1 | 937 (P | .L. 133 | з, |
| Sworn to and subsc | | • | 20 | | | | | | Signature of Candidate | | | | | | _ | | | |
| | day of ———————————————————————————————————— | | | | | | - | | | | | | Printe | d Name | | | | - |
| | Signature | | | | | | - | | _ | | | | | | | | | _ |
| My Commission Exp | ires | | | | | | | | | | | | Ema | il | | | | |
| | МО | D | AY | YR | ł | | - | | | Area | Code | | Da | aytime Te | lephor | e Num | ber | _ |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | g Period | | | |
|--|----------|----------|---------------|----------|
| Friends of Donna Bullock | From: | 5/1/20 | <u>18</u> To: | 6/4/2018 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | Period | (1) | \$ | 25.00 |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | | | | |
| Contributions Received From Political Committees (Part A) | | | \$ | 250.00 |
| All Other Contributions (Part B) | \$ | 2,600.00 | | |
| TOTAL for the Reporting | \$ | 2,850.00 | | |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 500.00 |
| All Other Contributions (Part D) | | | \$ | 1,500.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 2,000.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting | Period | (4) | \$ | 8.21 |
| | | | | |
| 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 Page 1 | | | \$ | 4,883.21 |

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 | | |
|---------------------------------------|-----------|----------|-----|----------|
| Friends of Donna Bullock | From: | 5/1/2018 | То: | 6/4/2018 |
| | | DATE | | AMOUNT |

DATE AMOUNT

| Full Name of Contributing Committee Malady & DAC | | | МО | DAY | YEAR | |
|---|--------------------|--------------------------------|----|-----|------|-----------|
| Mailing Address 604 N 3rd | | | | | | \$ 250.00 |
| City Harrisburg | State PA | Zip Code (Plus 4) 17102 | 5 | 16 | 2018 | |

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

PAGE TOTAL \$ 250.00

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 | | | | | eporting Period | | | | |
|--|--------------------|---------------------------------------|-----|----|-----------------|-----------------|------------------|--|--|
| Friends of Donna Bullock | | | Fro | m: | 5/1/2 | 2 <u>018</u> To | <u>6/4/2018</u> | | |
| | | | | | DATE | | AMOUNT | | |
| Full Name of Contributor Joseph Bernstein | | | | МО | DAY | YEAR | | | |
| Mailing Address 2220 Fairmount Ave | е | | | | | | \$ 100.00 | | |
| City Philadelphia | State PA | Zip Code (Plus 4) 191302617 | | 6 | 1 | 2018 | | | |
| Full Name of Contributor Jay Ferraro | | | | | | | | | |
| Mailing Address 402 Hill Ave | | | | | 11 | | \$ 250.00 | | |
| City Langhorne | State PA | Zip Code (Plus 4) 190472704 | | | | 2018 | | | |
| Full Name of Contributor Linda Fisher | | | | МО | DAY | YEAR | | | |
| Mailing Address 233 S 6th St Apt 3 | 09 | | | | | | \$ 250.00 | | |
| City Philadelphia | State PA | Zip Code (Plus 4) 191063750 | | 5 | 9 | 2018 | | | |
| Full Name of Contributor Kleinbard | | | | МО | DAY | YEAR | | | |
| Mailing Address 1650 Market St FI | 46 State | Zip Code (Plus 4) | | 5 | 11 | 2018 | \$ 250.00 | | |
| City Philadelphia | PA | 191037305 | | | | | | | |
| Full Name of Contributor Dale Lintner | | | | МО | DAY | YEAR | | | |
| Mailing Address 1353 Revelation Rd | | | | | | | \$ 250.00 | | |
| City Meadowbrook | State PA | Zip Code (Plus 4) 190461021 | | 5 | 11 | 2018 | | | |

| | | | | PAGE 5 | |
|--|-----------|----------------|------------------|-------------|-------|
| Full Name of Contributor | | | | | |
| Eric D Lintner | МО | DAY | YEAR | | |
| Mailing Address 600 Cedar Hill Rd | | | | \$ 2 | 50.00 |
| City Ambler State Zip Code (Plus 4) | 5 | 11 | 2018 | | |
| PA 190021504 | | | | | |
| Full Name of Contributor | МО | DAY | YEAR | | |
| Michael Lynch | | | | | |
| Mailing Address 137 Julie Rd | | | | \$ 2 | 50.00 |
| City Pottstown State Zip Code (Plus 4) | 5 | 11 | 2018 | | |
| PA 194647212 | | | | | |
| Full Name of Contributor Warren McMichael | МО | DAY | YEAR | | |
| Mailing Address 2514 Stewart St | | | | \$ 2 | 00.00 |
| City Philadalphia State Zip Code (Plus 4) | 5 | 5 12 | | | |
| City Philadelphia State Zip Code (Plus 4) | | | | | |
| Philadelphia PA 191213703 | | | | | |
| Prilladelprila | МО | DAY | YEAR | | |
| PA 191213703 Full Name of Contributor | мо | DAY | YEAR | \$ 1 | 00.00 |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 | MO | DAY 7 | YEAR 2018 | \$ 1 | 00.00 |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 | | | | \$ 1 | 00.00 |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 City Philadelphia State Zip Code (Plus 4) | | 7 | | \$ 1 | 00.00 |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 City Philadelphia State PA 191303074 Full Name of Contributor | 5 | 7 DAY | 2018 | | 00.00 |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 City Philadelphia State PA 191303074 Full Name of Contributor Marlene Thomas Mailing Address 2901 W Girard Ave | 5 | 7 | 2018 | | |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 City Philadelphia State PA 191303074 Full Name of Contributor Marlene Thomas Mailing Address 2901 W Girard Ave | 5 мо | 7 DAY | 2018 YEAR | | |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 City Philadelphia State PA 191303074 Full Name of Contributor Marlene Thomas Mailing Address 2901 W Girard Ave City Philadelphia State Zip Code (Plus 4) 191303074 | 5 мо | 7 DAY | 2018 YEAR | | |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 City Philadelphia State PA 191303074 Full Name of Contributor Marlene Thomas Mailing Address 2901 W Girard Ave City Philadelphia State Zip Code (Plus 4) 1913031119 Full Name of Contributor | MO | 7 DAY 7 | 2018 YEAR 2018 | \$ 2 | |
| Full Name of Contributor Maryanne Schiller Mailing Address 2401 Pennsylvania Ave Apt 6B32 City Philadelphia State PA 191303074 Full Name of Contributor Marlene Thomas Mailing Address 2901 W Girard Ave City Philadelphia State Zip Code (Plus 4) 191301119 Full Name of Contributor Derrick Townes | MO | 7 DAY 7 | 2018 YEAR 2018 | \$ 2 | 00.00 |

| Full Name of Contributor William P Van Ness | | | МО | DAY | YEAR | | | | |
|---|------------|-------|------------------|------------|-----------|----|------|--|--|
| Mailing Address 4845 Cheshire Rd | | | | | \$ 250.00 | 0 | | | |
| City | Doylestown | State | Zip Code (Plus 4 | !) | 5 | 11 | 2018 | | |
| | , | PA | 189029504 | | | | | | |

PAGE TOTAL \$ 2,600.00

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

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 Per | iod | | |
|---------------------------------------|---------------|----------|-----|----------|
| Friends of Donna Bullock | From: | 5/1/2018 | То: | 6/4/2018 |

DATE AMOUNT

| Full Name of Contributing Committee ExelonPAC | | | | DAY | YEAR | |
|--|-----------------|------------------------------------|---|-----|------|-----------|
| Mailing Address 101 Constitution Ave NW Suite 400 East | | | _ | | | \$ 500.00 |
| City Washington | State DC | Zip Code (Plus 4) 200012133 | 5 | 16 | 2018 | |

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

PAGE TOTAL \$500.00

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.)

| | | <u> </u> | | | | | | | | | |
|--|-------------------------------|---------------------------|-------------------|-------------------------|-------------------|--------------------------------------|--------------|-----------|-----------------|----------|--------|
| Name of Filing Committee or Candidate Rep | | | | | orting Pe | riod | | | | | |
| Friends of Donna | a Bullock | | | | Fror | n: | <u>5/1/2</u> | 018 To | 6/4/2018 | | |
| | | | | | | DA | ATE | | | AMOUNT | Г |
| Full Name of Cont David D. Burton | tributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | 1014 Sutters Rim | | | | | | | | \$ | | 500.00 |
| City San Anto | nio | State | Zip Code (Plus 4) | | | 5 | 17 | 2018 | | | |
| | • | TX | 782582906 | | | | | | | | |
| Employer Name | ployer Name Moss Construction | | | | | Occupat | tion | ice Pre | sident | (constru | ct |
| Employer Mailing Address/Principal Place of Business City | | | | ı | State | | Zip C | ode (Plus | s 4) | | |
| 2101 N Andrews | Ave2101 N Andrews A | Andrews Ave Wilton Manors | | | | | FL | 333113946 | | | |
| Full Name of Contributor Stephen Ehrenhalt | | | | мо | DAY | YEAR | | | | | |
| Mailing Address | 6666 Lincoln Dr | | | | | | | | \$ | | 500.00 |
| City Philadelpl | hia | State | Zip (| Code (Plus | 4) | 5 | 16 | 2018 | | | |
| · | | PA | 191 | 193118 | | | | | | | |
| Employer Name | Steph-Sin Developme | nt | | | | Occupation President/Real Estate Dev | | | | | |
| Employer Mailing Business | Address/Principal Plac | e of | | City | | State Zip Code (Plus 4) | | | | | s 4) |
| 19 W Girard Ave | | | | Philadelp | hia | | PA | | 191 | 231747 | |
| Full Name of Con | tributor | | | | | | DAY | VEAD | | | |
| Lawrence Rust | | | | | | МО | DAY | YEAR | | | |
| Mailing Address | 1119 Green St | | | | | | | | \$ | | 250.00 |
| City Philadelpl | hia | State | Zip (| Code (Plus | 4) | 5 | 11 | 2018 | | | |
| | | PA | 1912 | 233313 | | | | | | | |
| Employer Name self-employed | | | | | Occupation Broker | | | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | State Zip Code (Plus 4) | | | | 5 4) | | | |
| 1119 Green St | | Philadelphia | | | PA 191233313 | | | | | | |

| Full Name of Contributor Lawrence Rust | МО | DAY | YEAR | | | |
|---|--------------------|---------------------------------------|--------------|---------------|-----------|-------------------|
| Mailing 1119 Green St Address | | | 5 | 11 | | \$ 250.00 |
| City Philadelphia | State PA | • • • • • • • • • • • • • • • • • • • | | | 2018 | |
| Employer Name self-employed | | | Occupat | | | |
| Employer Mailing Address/Principal Place of Business City | | | | State Zip Coo | | Zip Code (Plus 4) |
| 1119 Green St Philadelphia | | | PA 191233313 | | 191233313 | |

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

| PAGE TOTAL |
|----------------|
| \$ 1,500.00 |

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 Candidate | | Report | ing Perio | d | | | | |
|---------------------------------------|-------------------|---------------------------|-----------|----|---------|--------------|----|--------------------|
| Friends of Donna Bullock | | | From: | | 5/1/201 | <u>8</u> To: | | 6/4/2018 |
| | | | | D | ATE | | į | AMOUNT |
| Full Name PayPal | | | | мо | DAY | YEAR | | |
| Mailing Address 1840 Embarcad | ero Rd | | | _ | | | \$ | 8.21 |
| City Palo Alto | State CA | Zip Code (9430333 | • | 5 | 1 | 2018 | | |
| Receipt Description cash back | on credit card | | | | | | | |
| Enter Grand Total of Part E on Sch | edule I, Detailed | l Summary Page, | Section | 4. | | | \$ | PAGE TOTAL 8.21 |
| | | | | | | L | | |

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 | | |
|--|------------------|----------------------------|----------|
| Friends of Donna Bullock | From: | <u>5/1/2018</u> To: | 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) | \$ | 92.45 |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Pe | eriod (3) | \$ | 390.00 |
| 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, | | \$ | 482.45 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Ca | ndidate | | Reporting | Period | | | |
|--|-----------------------------|---------------------------------------|-------------|---------------|------------------|------|------------------|
| Friends of Donna Bullock | | | From: | <u>.</u> | 5/1/2018 | To: | 6/4/2018 |
| | | • | | DATE | | | AMOUNT |
| Full Name of Contributor Bryant McKay Jr. | | | мо | DAY | YEAR | | |
| Mailing Address 1609 N 33 | rd St Apt 1 | | 5 | 15 | 2018 | \$ | 42.45 |
| City Philadelphia | State | Zip Code (Plus 4) | 7 | | | | |
| · | PA | 191212404 | | | | | |
| Description of Contribution: | refreshments for volunt | ceers | • | | | | |
| Description of Contribution: Full Name of Contributor Bryant McKay Jr. | refreshments for volunt | reers | мо | DAY | YEAR | Γ | |
| Full Name of Contributor Bryant McKay Jr. | refreshments for volunt | ceers | MO 5 | DAY 15 | YEAR 2018 | - \$ | 50.00 |
| Full Name of Contributor Bryant McKay Jr. Mailing Address 1609 N 33 | | Zip Code (Plus 4) | 5 | | | \$ | 50.00 |
| Full Name of Contributor Bryant McKay Jr. Mailing Address 1609 N 33 | rd St Apt 1 | | 5 | | | \$ | 50.00 |
| Full Name of Contributor Bryant McKay Jr. Mailing Address 1609 N 331 City Philadelphia | rd St Apt 1 | Zip Code (Plus 4) | 5 | | | \$ | 50.00 |
| Full Name of Contributor Bryant McKay Jr. Mailing Address 1609 N 331 City Philadelphia | rd St Apt 1 State PA GOTV | Zip Code (Plus 4) 191212404 | 5 | 15 | 2018 | \$ | 50.00 PAGE TOTAL |

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

| Name of Filing Committee or Candidate | Reporting Per | riod | | |
|---------------------------------------|---------------|----------|-----|----------|
| Friends of Donna Bullock | From: | 5/1/2018 | То: | 6/4/2018 |

| | | | | | | DATE | | | | AMOUNT |
|---|-------------------|---------|----------|--------------------|-----------|---------------------|------|-----------------------------|----|-----------------|
| Full Name of Contributor Ray Boston | | | | | МО | DAY | | YEAR | | |
| Mailing Address 1735 N 31st | St | | | | | | | | \$ | 390.00 |
| City Philadelphia | State | | Zip Code | (Plus 4) | 7 5 | 15 | 15 | 2018 | | |
| | PA | | 191212 | 522 | | | | | | |
| Employer of Contributor Retired | | | | Occupation Retired | | | | | | |
| Employer Mailing Address/Princi Business | pal Place of | City | | State | | Zip Code(Plus 4) | | Description of Contribution | | of Contribution |
| 1735 N 31st St | | Philade | elphia | PA | 191212522 | | GOTV | | | |
| Enter Grand Total of Part G | on Schedule II. i | in-Kind | Contribu | tions Deta | iled | | | | | PAGE TOTAL |
| Summary Page, Section 3. | Jeneadie II, | iXiiiQ | | Deta | | | | | | 390.00 |
| | | | | | | | | | | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or C | andidate | | Reporti | ng Period | | | |
|--|---------------------|-------------------|--------------------------|-------------|----------------|----|----------|
| Friends of Donna Bullock | | | From <u>5/1/2018</u> To: | | | | 6/4/2018 |
| | | | | DATE | | | AMOUNT |
| To Whom Paid 32nd Ward | | | мо | DAY | YEAR | | |
| Mailing Address 219 Spring Garden St | | | | 3 | 2018 | \$ | 1,000.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 191232925 | GOTV | | | | |
| To Whom Paid Busy Stage Screen Printing | · | · | МО | DAY | YEAR | | |
| Mailing Address 2101 Germ | antown Ave | | 5 | 4 | 2018 | \$ | 750.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 191221423 | | s for comm | | | |
| To Whom Paid Democratic Campaign Commit | tee of Philadelphia | | мо | DAY | YEAR | | |
| Mailing Address 219 Spring | Garden St | | 5 | 3 | 2018 | \$ | 5,000.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | | | | |
| · //// | PA | 191232925 | assessi | | | | |
| To Whom Paid Dunkin Donuts | • | • | МО | DAY | YEAR | | |
| Mailing Address 1420 Cecil | B Moore Ave | | 5 | 15 | 2018 | \$ | 502.53 |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| · | PA | 191213412 | refresh | ments | | | |
| To Whom Paid JP Tees | · | | МО | DAY | YEAR | | |
| Mailing Address 2930 Richn | nond St | | 5 | 3 | 2018 | \$ | 599.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descrir | tion of Exp | enditure | l | |
| - Filliaucipilia | | | 263611 | | , c.i.u.itui C | | |

191345706

t shirts for E Day

PA

| To Whom Paid Bryant McKay Jr. | | | МО | DAY | YEAR | | |
|--------------------------------------|--------------------|---------------------------------------|---|---------------------------|-----------|----|----------------------------|
| Mailing Address 1609 N 33rd S | St Apt 1 | | 5 | 12 | 2018 | \$ | 1,000.00 |
| City Philadelphia | State PA | Zip Code (Plus 4) 191212404 | 1 - | otion of Exp reimburse | | | |
| To Whom Paid Sage Payment Solutions | | | МО | DAY | YEAR | | |
| Mailing Address 12120 Sunset | Hills Rd Ste 500 | | 5 | 2 | 2018 | \$ | 119.72 |
| City Reston | State VA | Zip Code (Plus 4) 201905858 | Description of Expenditure Merchant fees | | | | |
| To Whom Paid Sage Payment Solutions | | | мо | DAY | YEAR | | |
| Mailing Address 12120 Sunset | Hills Rd Ste 500 | | 6 | 4 | 2018 | \$ | 24.00 |
| City Reston | State VA | Zip Code (Plus 4) 201905858 | 1 - | nt Fees | penditure | | |
| Enter Grand Total of Expendit | ures on Page 1, Re | port Cover Page, Item D | | | | \$ | PAGE TOTAL 8,995.25 |

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 | | Reporti | ng Period | | | | |
|--|--------------------|---------------------------------|-----------|------------------|---------------------|------------------|------------------------------------|
| Friends of Donna Bullock | | | From: | | <u>5/1/2018</u> | То: | 6/4/2018 |
| | | | | | DATE | | Outstanding Balance of Debt |
| Name of Creditor | | | | мо | DAY | YEAR | |
| NGP Van | | | | | | | |
| Mailing Address 1101 15th St NW | Ste 500 | | | 5 | 31 | 2018 | \$ 450.00 |
| City Washington | State | Zip Code (Pl | us 4) | Descrip | tion of Del | ot | |
| | DC | 200055006 | | databa | se fee | | |
| | | | | | | | |
| | | | | | DATE | | Outstanding Balance of Debt |
| Name of Creditor Woodsphere Publishing, LLC | | | | МО | DATE | YEAR | |
| | | | | MO 5 | | YEAR 2018 | \$ Balance of Debt |
| Woodsphere Publishing, LLC | State | Zip Code (Pl | us 4) | 5 | DAY | 2018 | \$ Balance of Debt |
| Woodsphere Publishing, LLC Mailing Address 2222 Wallace St | State PA | Zip Code (Pl : 191303126 | | 5 Descrip | DAY 23 | 2018 ot | Balance of Debt |
| Woodsphere Publishing, LLC Mailing Address 2222 Wallace St City Philadelphia | PA | 191303126 | | 5 Descrip GOTV, | DAY 23 otion of Del | 2018 ot | Balance of Debt |
| Woodsphere Publishing, LLC Mailing Address 2222 Wallace St | PA | 191303126 | | 5 Descrip GOTV, | DAY 23 otion of Del | 2018 ot | Balance of Debt 250.00 ments |