### **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 2018	3C1215			Rep File	orted B		CANI	IDIDATE COMMITTEE LOI					LOB	BYIST	•		
Name of Filing C	ommittee, Candid	late or L	obbyist:		THO	MAS	S MIL	TON ST	ΓRE	ET								
Street Address:																		
City:	_							State:					Zip Cod	e: 19	122			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	. 2ND FRIDAY PRE- 2 PRIMARY					AY ARY	PC	OST-	3. <b>X</b>		AMENDMENT REPORT?		Yes		lo	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u> !	5.	30 DA		PC				TERMINAT REPORT?	TION	Yes	Ī	lo	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018					IG MET CHECK					PAPER		<b>V</b>	DIS	ETTE	
Name of Office S	ought by Candida	ite:	-					DATE	OF	ELE	CTI	ON	District Number	Office Code	Pa	rty Cod	e Cou	
								МО		DAY	Υ	EAR	181	STH	REI	)	1	
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					1	11		6	2018	<b> </b>	(SEE IN	STRUCTI	ONS FO	R CODES	5)
Summary of		МО	DAY	YEAR	2			МО		DAY	Y	EAR	FOI	OFFI	CE USE	ONL	1	
Expenditures	from:		5 1	2	018	Т	0		6		4	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$					0.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$				1,	325.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				1,	325.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$					0.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				1,	325.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			'			
				AFF	IDA	١٧٧	T SE	CTIO	V									
	a Committee rep	•	=						-	•		_		-				
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sc	hedules	s filed	d on	paper	or by ele	ectro	onic me	ediun	n, are to t	the best of	my knov	wledge	and be	elief , tı	rue
Sworn to and subs	cribed before me thi day of	s	20						-			Signature	e of Person	Submit	ting Re	port		_
	Signatu	ıre					- -		-				Printe	ed Name	•			-
My Commission Ex	xpires								-				Email					
	МО	D	AY	YR						Are	ea Co	de	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andid	ate sha	II s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	ny knowl	edge and beli	ief this	polit	ical	comm	ittee has	s no	t violat	ted a	ny provis	ions of the	act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me this day of		20						•			s	ignature of	Candid	ate			_
							-		-				Printed	l Name				-
My Commission Exp	Signature						-		_				Email					-
,							_											_
	МО	D	AY	YR	1					Area	Code		Da	ytime T	elephoi	ne Nun	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period									
THOMAS MILTON STREET	From:	5/1/201	<u>8</u> To:	6/4/2018						
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor										
TOTAL for the Reporting	g Period	(1)	\$	295.00						
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)	\$	80.00								
TOTAL for the Reporting	\$	80.00								
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	y Period	(3)	\$	1,000.00						
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)										
TOTAL for the Reporting	J 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			\$	1,375.00						

#### **PART A**

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

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Committee or Candidate				porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•			•	•		PAGE TOTAL

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

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	Reporting Perio	od	
THOMAS MILTON STREET	From:	<u>5/1/2018</u> <b>To:</b>	6/4/2018

DATE

**Full Name of Contributor** DAY YEAR мо MILLICENT PITTS-DICICCO **Mailing Address** 124 SALTWATER WAY 80.00 5 3 2018 State Zip Code (Plus 4) City SAVANNAH GΑ 31411

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

**PAGE TOTAL \$** 80.00

**AMOUNT** 

#### **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			
THOMAS MILTON STREET	From:	5/1/2018	То:	6/4/2018

DATE AMOUNT

Full Name of Contributing Committee REPUBLICAN CITY COMMITTEE	МО	DAY	YEAR			
Mailing Address 6318 FRANKFORD AVE				_		\$ 1,000.00
City PHILA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19135	5	3	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 Candidate			Reporting Period						
				n:		То	То:		
					ATE		AMOUNT		
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City State Zip Code (Plus 4)									
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	<b>GE TOTAL</b> 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 Candidate			Report	ting Perio	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (	Plus 4)				
Receipt Description							
Enter Grand Total of Part E on	Schedule I. Detailed	d Summary Page.	Section	4.			PAGE TOTAL
	20112111112 IJ Dotaine		22300				\$ 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								
THOMAS MILTON STREET	From:	<u>5/1/2018</u> <b>To:</b>	6/4/2018						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Candidate				Reporting Period						
	From:		То:							
				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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL			
Section 2.						\$	0.00			

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Reporting Period					
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

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