# **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 :	ion 2018	0267			Repo Filed			CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
	Committee, Candid	ate or Lo	bbyist:			-	AUL	FOR G	OVENOR						
Street Address:	5031 CATHER	RINE ST													
City:	PHILADELPHI	A					5	State:	PA		Zip Co	<b>de:</b> 19	143		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		2ND FRIDA PRIMARY	Y PRE	- 2.		30 DAY POST- 3. PRIMARY				AMENDN REPORT		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION						30 DAY POS <sup>-</sup> ELECTION			OST- 6.		TERMINATION REPORT?		No	· 🗸
report type)	ANNUAL REPORT	ANNUAL REPORT 7. Year 2018						G METHO HECK OI			PAPER		$\checkmark$	DISK	TTE
Name of Office S	L Sought by Candida	te:					I	DATE O	F ELEC	ION	District Number	Office Code	Par	ty Code	County
							ľ	ю	DAY	YEAR	-1	GOV	GRI	N	•
GOVERNOR								11	6	2018	]	(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		1	мо	DAY	YEAR	FC	DR OFFIC	E USE	ONLY	
Expenditures	s from:		1 1	2	018	то		9	17	2018					
A. Amount Bro	ught Forward Froi	n Last Re	eport				\$			0.00					
B. Total Monet	ary Contributions	And Rece	ipts (Fron	1 Sche	dule I)	)	\$			518.23					
C. Total Funds Available (Sum Of Lines A and B) \$ 518.23															
D. Total Expen	ditures (From Sch	edule III	)				\$			254.07	]				
E. Ending Cash	Balance (Subtrac	t Line D F	rom Line	C)			\$			264.16					
F. Value Of In-	Kind Contribution	s Receive	d (From S	chedu	le II)		\$			315.37					
G. Unpaid Deb	ts And Obligations	(From So	chedule IV	()			\$			0.00					
				AFF	IDAV	'IT S	SEC	TION							
	s a Committee rep		-								-				
I swear (or affirm correct and compl	) that this report, inc ete.	luding the	attached sc	hedules	s filed o	n pape	er oi	r by electi	ronic med	ium, are to	the best o	of my knov	vledge	and bel	ief , true
Sworn to and subs	cribed before me this day of		20							Signatur	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re									Prin	ited Name			
My Commission E	xpires										Ema	il			
	мо	DA	Y	YR					Area	Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's a	uthorized	Comn	nittee,	Cand	ida	te shall :	sign her	e.					
I swear (or affirm) No 320) as amende	) that to the best of r ed.	ny knowled	dge and beli	ef this	politica	al com	nmit	tee has n	ot violate	d any provis	ions of th	e act of Ju	ine 3,19	937 (P.I	L. 1333,
Sworn to and subso	worn to and subscribed before me this														
			20								Printe	ed Name			
My Commission Exp	Signature bires										Ema	il			
	МО	DA	Y	YR					Area Co	de	D	aytime Te	elephon	e Numł	ber

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** GLOVER, PAUL FOR GOVENOR From: <u>1/1/2018</u> **To:** <u>9/17/2018</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 518.23 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 518.23 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 518.23 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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					
			From	n:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee			1	мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

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Use this Part to i	\$ temize all 6 50.01 to \$	PART B ER CONTR 50.01 TO \$250.0 other contribution 250.00 in the re om political con	BU 00 00 s w porti	/ith an ng peri	aggreg iod.			om
Name of Filing Committee or Candic	late		Re	porting P	eriod			
GLOVER, PAUL FOR GOVENOR			Fro	om:	<u>1/1/</u>	2018 To	<b>)</b> :	<u>9/17/2018</u>
					DATE			AMOUNT
Full Name of Contributor Orville Robinson				мо	DAY	YEAR		
Mailing Address 431 West Rittenh	nouse St						\$	8.99
City Philadelphia	<b>State</b> PA	Zip Code (Plus	4)	5	25	2018		
Full Name of Contributor Jennifer Isaacs				мо	DAY	YEAR		
Mailing Address 91 W Ashland St							\$	22.88
City Doylestown	<b>State</b> PA	Zip Code (Plus	4)	5	25	2018		
Full Name of Contributor Christian Banchs				мо	DAY	YEAR		
Mailing Address 4401 Conshohod	ken Ave						\$	92.32
City Philadelphia	<b>State</b> PA	Zip Code (Plus	4)	5	25	2018		
Full Name of Contributor James Lazzara				мо	DAY	YEAR		
Mailing Address 75 Observatory S	St						\$	8.99
City Manor	<b>State</b> PA	Zip Code (Plus	4)	5	25	2018		
Full Name of Contributor Paul Glover				мо	DAY	YEAR		
Mailing Address 608 S Mt Pleasar	nt Rd						\$	92.32
City Philadelphia	<b>State</b> PA	Zip Code (Plus	4)	5	25	2018		

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Full Name of Contributor Tom Green			мо	DAY	YEAR	
Mailing Address PO Box 102						<b>\$</b> 22.88
City Ridley Park	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19078	5	25	2018	
Full Name of Contributor Tina Rocket			мо	DAY	YEAR	
Mailing Address 2404 Griggs Ct						<b>\$</b> 8.99
City Virginia Beach	State VA	Zip Code (Plus 4) 23453	5	25	2018	
Full Name of Contributor Karen D			мо	DAY	YEAR	
Mailing Address 360 Haddon Ave, 1	Jnit 1					<b>\$</b> 22.88
City Collingswood	State NJ	<b>Zip Code (Plus 4)</b> 08108	5	25	2018	
Full Name of Contributor Maria Vukmir	<u> </u>	I	мо	DAY	YEAR	
		I	мо	DAY	YEAR	<b>\$</b> 8.99
Maria Vukmir	State	<b>Zip Code (Plus 4)</b> 60126	<b>мо</b> 5	<b>DAY</b> 25	<b>YEAR</b> 2018	<b>\$</b> 8.99
Maria Vukmir Mailing Address 1210 Degener Ave	State					<b>\$</b> 8.99
Maria Vukmir Mailing Address 1210 Degener Ave City Elmhurst Full Name of Contributor	State IL		5	25	2018	\$ 8.99 \$ 8.99
Maria Vukmir Mailing Address 1210 Degener Ave City Elmhurst Full Name of Contributor Thomas Bradburn	State IL		5	25	2018	
Maria Vukmir Mailing Address 1210 Degener Ave City Elmhurst Full Name of Contributor Thomas Bradburn Mailing Address 1052 Evergreen D	State IL State	60126 Zip Code (Plus 4)	5 MO	25 DAY	2018 YEAR	
Maria Vukmir Mailing Address 1210 Degener Ave City Elmhurst Full Name of Contributor Thomas Bradburn Mailing Address 1052 Evergreen D City Lake Ariel Full Name of Contributor	State IL State PR	60126 Zip Code (Plus 4)	<u>мо</u>	25 DAY 25	2018 YEAR 2018	

Full Name of Contributor Belinda Davis			мо	DAY	YEAR		
Mailing Address 331 E Gowe	n Ave					\$	100.00
City Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19119	6	2	2018		
Full Name of Contributor Frank Zgola			мо	DAY	YEAR		
Mailing Address 1140 Ellis H City Ithica	ollow Rd State NY	<b>Zip Code (Plus 4)</b> 14850	- 6	13	2018	\$	50.00
Full Name of Contributor Bernadette Cronin-Geller			мо	DAY	YEAR		
Mailing Address 7901 Henry City Philadelphia	Ave State PA	<b>Zip Code (Plus 4)</b> 19128	7	2	2018	\$	50.00
Full Name of Contributor Jockolyn Bowser-Bostick			мо	DAY	YEAR		
Mailing Address 726 E 25th 3			- 8	22	2018	\$	5.00
City Chester	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013			2010		
	•	•				I	PAGE TOTAL

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

518.23

\$

# 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 Candio	late		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
							-	PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detail	led 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 Candidat	2		Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	Ē
Full Name				мо	DAY	YEAR			
Mailing Address						Γ	4	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description				I					
Enter Grand Total of Part E on Sched	lule T. Detailed !	Summary Page	Section	4				PAGE TO	TAL
	ale 1, Detalled	cullina y Tuge,	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	<b>Reporting Period</b>		
GLOVER, PAUL FOR GOVENOR	From:	<u>1/1/2018</u> <b>To:</b>	<u>9/17/2018</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	ΓF)		
TOTAL for the Reporting Pe	riod (2)	\$	315.37
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		\$	315.37

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period					
GLOVER, PAUL FOR GOVENOR			From:	1	L/1/2018	То:	<u>9/17/2018</u>	
				DATE			AMOUNT	
Full Name of Contributor Chris Robinson			мо	DAY	YEAR			
Mailing Address 431 West Rittenhou	se St		4	11	2018	\$	107.40	
City Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19144						
Description of Contribution: Printing S	services							
Full Name of Contributor Timothy Runkle			мо	DAY	YEAR			
Mailing Address 211 N Poplar Street			5	10	2018	\$	6.70	
City Elizabethtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17022						
Description of Contribution: Postage					-			
Full Name of Contributor Timothy Runkle			мо	DAY	YEAR			
Mailing Address 211 N Poplar Street			7	7	2018	\$	1.27	
City Elizabethtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17022						
Description of Contribution: Postage								
Full Name of Contributor Karen Parnes			мо	DAY	YEAR			
Mailing Address 95 David Drive			7	31	2018	\$	200.00	
City Newtown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18940						
Description of Contribution: Candidate	e Filing Fee		•	-		-		

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.	PAGE TOTAL
	\$ 315.37

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### 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(I		Plus 4)								
Employer of Contributor						Occupation						
Employer Mailing Address/Principal Place of Business		City		State	State		Zip Code(Plus 4)		Description of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed									PAGE TOTAL			
Summary Page, Section 3.								0.00				

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
GLOVER, PAUL FOR GOVENOR				<u>1/</u>	<u>1/2018</u>	То:	<u>9/17/2018</u>		
		DATE		AMOUNT					
To Whom Paid Paul Glover				DAY	YEAR				
Mailing Address 608 S Mt Pleasant Rd				1	2018	\$	148.34		
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure				
	PA	19119	Printing	g services					
<b>To Whom Paid</b> Paul Glover			мо	DAY	YEAR				
Mailing Address 608 S Mt Pleasant Rd			9	14	2018	\$	105.73		
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	, penditure				
	PA	19119	Print se	ervices					
							PAGE TOTAL		
Enter Grand Total of Expenditures	on Page 1, I	Report Cover Page, Item I	<b>)</b> .			\$	254.07		