LOBBYIST

COMMITTEE <

Campaign Finance Report

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

Report

CANDIDATE

Filer Identificati Number :	ion	91000	099				Repo Filed		:	CA	NDII	DATE		СОМ	1ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee	, Candida	ate or L	obbyis	t:	F	RACE	STR	EET	PAC										
Street Address:	1301	N. 31 ST	REET																	
City:	PHILA	DELPHIA	٨							State	e:	PA			Zip Cod	l e: 19	121			
TYPE OF REPORT	6TH TUES		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.		DA RIMA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUES		4.	2ND F ELECT		PRE-	- 5.		DA ECT	Y ION	Р	OST-	6. X		TERMINA REPORT?		Yes	N	0	/
report type)	ANNUAL	REPORT	7.	Year :	2018					IG ME					PAPER		\	DISK	ETTE	
Name of Office S	Sought by	Candidat	e:	-						DAT	ΈO	F ELE	CTI	ON	District Number	Office Code	Pa	rty Cod	Code	
										МО		DAY	Y	EAR			DE	М	51	
											11		6	2018		(SEE IN	TRUCTI	ONS FOR	CODES	5)
Summary of Expenditures	•	and	МО	DA		YEAR				МО		DAY		EAR	FO	R OFFIC	E USE	ONLY	,	
				LO	23	20)18	TO			11		26	2018						
A. Amount Bro	ught Forw	ard From	ı Last R	eport					\$					59.43						
B. Total Moneta	ary Contri	butions A	And Rec	eipts (From	Sched	lule I)	\$				1,	450.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 1,509.43																				
D. Total Expenditures (From Schedule III) \$ 1,125.00																				
E. Ending Cash Balance (Subtract Line D From Line C)							\$					384.43								
F. Value Of In-	Kind Cont	ributions	Receive	ed (Fro	om Sc	hedule	e II)		\$					0.00						
G. Unpaid Debt	ts And Obl	igations	(From S	chedu	le IV))			\$				35,	000.00						
						AFFI	[DAV	IT.	SE	CTI	NC									
PART I - If this is		-	•													I	.11			
I swear (or affirm) correct and comple		eport, incit	uaing the	attacn	ea scn	eauies	Tilea o	n pap	per c	ог ву	electr	onic m	eaiun	n, are to t	ne best o	г ту кпоч	vieage	and be	iler , tr	ue
Sworn to and subs	cribed befo day of	re me this		20							,			Signature	of Perso	n Submitt	ing Re	port		_
		Signatur	·e	- '				_							Prin	ted Name	ı			
My Commission Ex	xpires -										•				Emai	I				
	M	10	D	AY .		YR						Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report	of a cand	idate's	author	rized (Comm	ittee,	Can	dida	ate s	nall s	sign h	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge an	d belie	f this p	politica	al co	mmi	ittee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ıne 3,1	937 (P	L. 133	3,
Sworn to and subsc	cribed before day of	e me this		20										s	ignature o	f Candida	ite			_
				-				_							Printe	d Name				-
My Commission Exp		ignature													Ema	il				-
	_	МО	D	AY		YR						Area	Code		Da	ytime To	elepho	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
RACE STREET PAC	From:	10/23/201	<u>8</u> To:	11/26/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	1,450.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,450.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	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 of Candidate			Reporting Period					
			Fro	From: To):	
					DATE		АМ	OUNT
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	ame of Filing Committee or Candidate Reporti		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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			Reporting Period						
			Fron	n:		То	То:		
				D	ATE		АМО	DUNT	
Full Name of Contributor					DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Place of Business City					State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	GE 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 Candidate			Report	ing Perio	d			
RACE STREET PAC			From:		10/23/201	<u>8</u> To:	11/26/2018	
				D	ATE		AMOUNT	
Full Name COMMITTEE TO ELECT JOSEPH DIGIRO	LAMO MAYOR			МО	DAY	YEAR		
Mailing Address 2411 ELFRETHS ALL	EY						\$ 1,000.00	
City BENSALEM	State PA	Zip Code (19020	Plus 4)	10	23	2018		
Receipt Description VOIDED CHECK	(#1141							
Full Name BTREC				МО	DAY	YEAR		
Mailing Address 3271 OAKFORD AVE	ī.			10	22	2010	\$ 450.00	
City TREVOSE	State PA	Zip Code (19053	Plus 4)	10	23	2018		
Receipt Description VOIDED CHECK	< #1136							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 1,450.00

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 Per	od							
RACE STREET PAC	From:	<u>10/23/2018</u> To:	11/26/2018						
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 PART 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 Candid	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 Sum	mary Pag	ле Г		PAGE TOTAL		
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL		
						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate				Reporting Period						
					From:			To:	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 Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Deta Summary Page, Section 3.				etaile	ed				PAGE TOTAL 0.00		

STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	idate		Reporti	ng Period				
RACE STREET PAC			From	From <u>10/23/2018</u> To:				
				AMOUNT				
To Whom Paid CITIZENS FOR PAT BROWNE	мо	DAY	YEAR					
Mailing Address 5661 HAMILTON BOULEVARD SUITE 1				31	2018	\$	1,000.00	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18106		ption of Exp				
To Whom Paid FRIENDS OF ROB LOUGHERY			мо	DAY	YEAR			
Mailing Address PO BOX 639			11	1	2018	\$	125.00	
City LANGHORNE	State PA	Zip Code (Plus 4) 190470639	Descri					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item I							PAGE TOTAL	

1,125.00

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	nme of Filing Committee or Candidate Re							
RACE STREET PAC			From:	<u>10</u>	/23/2018	То:	1	1/26/2018
					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 PA	Zip Code (Plu 19041	ıs 4)	Descrip LOAN T				
					DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY					DAY	YEAR		
Mailing Address 354 DARLING ROAD					4	2014	\$	5,000.00
City MEDIA	State PA	Zip Code (Plu 19063	ıs 4)		otion of Del			
					DATE			Outstanding 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)	_	otion of Del			
					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	
ty MEDIA State Zip Code (Plus 4) PA 19063				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	1	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	
State Zip Code (Plus 4) Description of Debt PA 19041 LOAN TO COMMITTEE					•			
	•	<u>.</u>		DATE			itstanding llance of Debt	
Name of Creditor MARK H. DAMBLY			МО	DAY	YEAR			
Mailing Address 354 DARLING ROAD			10	26	2017	\$	2,500.0	
City MEDIA	State PA	Zip Code (Plus 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			9	7	2018	\$	5,000.00	
City HAVERFORD	HAVERFORD State PA Zip Code (Plus 4) Description of Debt CONTRIBUTION							
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL		
Enter Grand Total of Unpa	ia Depts on Page 1	., κeport Cover Page, Iter	п G.			\$	35,000.00	