### **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	50043				port ed B		CANDI	ANDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Candi	date or L	obbyist:	•	FRIE	END	S OF I	MARTINA	WHIT	Έ							
Street Address:	PO BOX 1604	<b>41</b>															
City:	PHILADELPH:	ΙΑ						State:	PA			<b>Zip Code:</b> 19114					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.						Y F ARY				AMENDM REPORT?		Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	:- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	<b>/</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018					IG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	ty
								МО	DAY	YE	AR						
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
•	Receipts and	МО	DAY	/EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		11 27	20	018	Т	0	12	(	31	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			35,2	299.73						
B. Total Monet	ary Contributions	And Rec	eipts (From S	Sche	dule	ı)	\$				25.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			35,3	324.73						
D. Total Expend	ditures (From Sch	edule II	I)				\$			9	56.00						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)	)			\$			34,3	68.73						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	nedu	le II	[)	\$				0.00						
G. Unpaid Debt	ts And Obligation	(From S	Schedule IV)				\$				0.00			•			
				AFF	IDA	٩VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	[f thi	is is	a Can	didate re	eport, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	cluding the	e attached sche	dules	filed	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , tru	ıe,
Sworn to and subs	cribed before me th day of	is	20							s	ignature	of Perso	n Submit	ting Rep	ort		_
	Signat	ıre					-					Prin	ted Name	e			-
My Commission Ex	cpires						_					Ema	il				_
	мо	D	AY	ΥR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	omn	nitte	e, C	andida	ate shall	ll sign here.								
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	polit	tical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,19	937 (P.L.	. 1333	,
Sworn to and subsc	ribed before me this	•	20								Si	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
M. C	Signature						-					Ema	il				-
My Commission Exp	oires 						_										
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephon	e Numbe	er	1

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF MARTINA WHITE	From:	11/27/201	<u>l8</u> <b>To:</b>	12/31/2018
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)			\$	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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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			\$	25.00

#### **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	ittee or Candidate		Re	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.

**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 Fining Committee of Canadate				Reporting Period From: To:				
			l		DATE			AMOUNT
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 Candi	ame of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				DA	TE		Α	MOUNT		
Full Name of Contributing Commit	tee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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	me of Filing Committee or Candidate				Reporting Period					
		From: To:					То:			
				D	ATE		А	MOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name		•		Occupa	tion		•			
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	, Secti	on 3.			P \$	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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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 Peri	od	
FRIENDS OF MARTINA WHITE	From:	<u>11/27/2018</u> <b>To:</b>	12/31/2018
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, 1		\$	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 Candidate					Reporting	Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl )	us	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 Candid	ate		Reporti	ng Period				
FRIENDS OF MARTINA WHITE			From	11/2	7/2018	То:	12/31/2018	
		•		DATE			AMOUNT	
<b>To Whom Paid</b> TD BANK			МО	DAY	YEAR			
Mailing Address 700 E STREET RO	DAD		11	30	2018	\$	12.00	
City FEASTERVILLE-TREVOSE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19053		Description of Expenditure BANK CHARGES				
To Whom Paid NEWS PAPER MEDIA GROUP			мо	DAY	YEAR			
Mailing Address TWO EXECUTIVE	CAMPUS SUITE 4	00	12	19	2018	\$	700.00	
City CHERRY HILL  State  NJ  08002				otion of Exp		2		
<b>To Whom Paid</b> TD BANK			МО	DAY	YEAR			
Mailing Address 701 E STREET RO	OAD		12	31	2018	\$	12.00	
City FEASTERVILLE-TREVOSE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19053		otion of Exp CHARGES	penditure	:		
To Whom Paid USPS			мо	DAY	YEAR			
Mailing Address 10380 DRUMMOI	ND RD.		12	26	2018	\$	82.00	
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19154		tion of Exp L SERVICE		2		
To Whom Paid ARISTOTLE			мо	DAY	YEAR			
Mailing Address 205 PENNSYLVAI	NIA AVE., SE		12	31	2018	\$ \$	150.00	
City WASHINGTON State Zip Code (Plus 4) DC 20003				otion of Exp ROGRAM	penditure			
Fatou Count T 1 1 C T			<u>'</u>				PAGE TOTAL	
Enter Grand Total of Expenditure	es on Page 1, Re	port Cover Page, Item [	J.			\$	956.00	