### **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	20120	111				eport iled B		CAI	NDII	DATE		COMM	1ITTEE	<b>✓</b>	LOBI	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	bbyist:		NE	ILSO	n for	R THE	NO	RTHEA	ST							
Street Address:																			
City:	PHILADE	LPHIA							State	e:	PA			<b>Zip Code:</b> 19114					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FR		PRE-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?	Yes	N	0	<b>\</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND FR		PRE-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N	0	<b>√</b>
report type)	ANNUAL REI	PORT	7. <b>X</b>	Year 20	)18				IG ME CHEC		_			PAPER		<b>√</b>	DISK	ETTE	
Name of Office S	ought by Car	ndidate	e:						DAT	E O	F ELE	CTIC	)N	District Number	Office Code	Par	ty Cod	e Cour	
									МО		DAY	YI	EAR			DEN	1		
										11		6	2018		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of Expenditures		nd	МО	DAY	Y	EAR		_	МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
			1	.1	27	201	8 <b>T</b>	0		12	3	31	2018						
A. Amount Bro	ught Forward	d From	Last R	eport				\$				34,3	315.37						
B. Total Moneta	ary Contribut	ions A	nd Rec	eipts (F	rom S	chedu	le I)	\$					52.55						
C. Total Funds Available (Sum Of Lines A and B) \$ 34,367.92																			
D. Total Expenditures (From Schedule III) \$ 14,202.64																			
E. Ending Cash Balance (Subtract Line D From Line C) \$ 20,165.28																			
F. Value Of In-	Kind Contribu	utions	Receive	ed (Fror	n Sch	edule 1	II)	\$					0.00						
G. Unpaid Debt	s And Obliga	tions (	From S	chedule	iV)			\$					0.00						
					A	AFFID	OAVI	T SE	CTIC	Ν									
PART I - If this is	a Committe	e repo	rt, trea	surer si	gn he	re. If t	this is	a Car	ndidat	e re	port, c	andi	date sig	n here.					
I swear (or affirm) correct and complete		rt, inclu	ding the	attached	d sched	dules fil	led on	paper	or by e	electr	onic me	edium	, are to t	he best of	my knov	rledge	and be	lief , tr	ue
Sworn to and subs	cribed before n	ne this		20						•		5	Signature	of Persor	n Submitt	ing Rep	oort		_
	- <u>-</u>	ignature						- -		•				Print	ed Name				-
My Commission Ex	cpires							_		•				Emai	I				
	мо		DA	Υ		YR					Are	a Coo	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	a candi	date's	authoriz	zed Co	ommitt	tee, C	andid	ate sł	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	y knowle	dge and	belief	this po	litical	comm	ittee h	as no	ot violat	ted ar	ıy provisi	ons of the	act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before m day of	e this		20									Si	gnature o	f Candida	te			_
				- <u>-</u>				-						Printe	d Name				-
	Signa	ature						-											_
My Commission Exp	ires													Emai	ı				
	м	10	DA	ΛΥ		YR		-			Area	Code		Da	ytime Te	lephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
NEILSON FOR THE NORTHEAST	From:	11/27/201	<u>8</u> To:	12/31/2018
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)	\$	52.55
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			\$	52.55

#### **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 Candidat	Reporting					
			From:		То	:
				DATE		AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR	
Mailing Address		_				<b>\$</b> 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 B 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.

	Fr	om:		To	):	
	•		DATE			AMOUNT
		МО	DAY	YEAR		
					\$	0.00
e Zip Code	(Plus 4)					
t	te Zip Code	te Zip Code (Plus 4)				\$

#### **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	Period						
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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					orting Pe	riod			
				Fron	n:		To	<b>)</b> :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	<b>(4)</b>					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				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	Reporting Pe	eriod	
NEILSON FOR THE NORTHEAST	From:	<u>11/27/2018</u> <b>To:</b>	12/31/2018

			D	ATE		AMOUNT	
Full Name			МО	DAY	VEAD	_	F0 FF
BENEFICIAL BANK			МО	DAY	YEAR	\$	52.55
Mailing Address			12	31	2018		
City PHILADELPHIA	State	Zip Code (Plus 4)		31	2010		
	PA	191141109					
Receipt Description 2018 ACCOUNT	INTEREST	•					

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

**PAGE TOTAL \$**52.55

#### **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	iod	
NEILSON FOR THE NORTHEAST	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 CONTRIBUTO	R	
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 Car	Reporting Period							
	From: To:							
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary 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							
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	Period		
NEILSON FOR THE NORTHEAST	From	11/27/2018	То:	12/31/2018

				DATE		AMOUNT		
To Whom Paid				DAY	YEAR			
BENEFICIAL BANK			МО	DAI	ILAK			
Mailing Address				12	2018	\$	2,650.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	191141109	HOLIDAY GIFT CARDS-WARD / STAFF				F	
To Whom Paid	мо	DAY	YEAR					
CHASE CARD SERVICES V	140	JA.	ILAK					
Mailing Address				12	2018	\$	809.74	
City WILMINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı		
	DE	198865153	SECURITY SYS					
To Whom Paid	МО	DAY	YEAR					
CHASE CARD SERVICES V	ISA		140		IZAK			
Mailing Address			12	31	2018	\$	3,250.90	
City WILMINGTON	State	Zip Code (Plus 4)	Description of Expenditure					
	DE	198865153	GIFTS / MISC EXPENSE					
To Whom Paid				DAY	YEAR			
COMMONWEALTH OF PA			МО					
Mailing Address			12	31	2018	\$	447.00	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	171200001	HOUSE	HOUSE PINS - SWEARING-IN				
To Whom Paid			мо	DAY	YEAR			
DEELEY15			140		IZAK			
Mailing Address				12	2018	\$	4,500.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>		
	PA	191012288	DONATION					
To Whom Paid				DAY	YEAR			
OUR LADY OF CALVARY C	МО							
Mailing Address				7	2018	\$	400.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	191544213	SPONSORSHIP					

To Whom Paid				DAY	YEAR		
PRINT AND SEW							
Mailing Address				6	2018	\$	1,445.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip				
	PA	191543204	SHIRTS	/ HATS			
To Whom Paid				DAY	YEAR		
THOMAS RAIKER SCHOLARSHIP FUND					ILAK		
Mailing Address			11	30	2018	\$	500.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	191143603	DONATION				
To Whom Paid				DAY	YEAR		
WHITMARSH YOUTH BB					ILAK		
Mailing Address				30	2018	\$	200.00
City LAFAYETTE HILL	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	194441302	DONATI	ON			
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							14,202.64