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 9900	251				port ed B		CANDI	NDIDATE COMMITTEE \(\square \) LOBBYIST								
Name of Filing C	Committee, Candid	ate or L	obbyist:		WAI	RD 1	L6 DEI	M EXEC (СОМ				_				
Street Address:	2315 W CUME	3ERLAN	D ST														
City:	PHILADELPHI/	Α						State:	PA			Zip Cod	ie: 19	9132			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT		Yes	No		/
(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		/
report type)	ANNUAL REPORT	7.	Year 2004					IG METHO				PAPER		\checkmark	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR			•			
								11		2	2004		(SEE IN	STRUCTI	ONS FOR C	ODES	,
	Receipts and	МО	DAY	YEAR	R			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	; тгот: 		1 1		1	Т	0	5		17	2004						
A. Amount Bro	ught Forward Fron	n Last R	.eport				\$			9	11.51						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			1,7	29.63						
C. Total Funds	Available (Sum Of	Lines A	. and B)				\$			2,6	641.14						
D. Total Expend	ditures (From Sch	edule II	I)				\$			9	26.15						
E. Ending Cash	Balance (Subtract	t Line D	From Line C)			\$			1,7	14.99						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sci	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(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 h	ere. 1	If th	is is	a Can	ididate re	eport, o	andio	late sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	luding the	attached sche	edules	s file	d on	paper o	or by elect	ronic m	edium,	, are to t	he best o	f my kno	wledge	and belie	ef , tru	16
Sworn to and subs	cribed before me this day of	\$	20							s	ignature	of Perso	n Submit	ting Rep	ort		-
	Signatu	re					-					Prin	ted Name	e			-
My Commission Ex	rpires						_					Ema	il				_
	МО	D	AY	YR					Arc	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized C	Comm	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ny knowle	edge and belief	f this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this day of		20								S	ignature o	of Candid	ate			-
	<u> </u>						-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
, ээлинээн схр							_										_
	МО	D.	AY	YR	!				Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
WARD 16 DEM EXEC COM	From:	То:	5/17/2004
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	1,729.63
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		\$	1,729.63

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.

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 From: To:					
					DATE		ı	AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0	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	date		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	ame of Filing Committee or Candidate				orting Pe					
				Fror	n:		To	То:		
					D	ATE		AN	MOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	State	Zip Cod	de (Plus	s 4)						
Employer Name	•				Occupa	tion				
Employer Mailing Address/Principal Pla Business	ice of	Ci	ty			State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P <i>i</i>	AGE 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
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 T. Detailed	l Summary Page.	Section	4.			P	AGE TOTAL
	2, 2000		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		
WARD 16 DEM EXEC COM	From:	To:	<u>5/17/2004</u>
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,		\$	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						\$	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 of	or Candidate		Reporti	ng Period			
WARD 16 DEM EXEC COM			From			То:	5/17/2004
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
CITIZENS BANK							
Mailing Address			4	30	2004	\$	12.00
City	State	Zip Code (Plus 4)	Descrip BANK F	etion of Exp	penditure		
To Whom Paid PGW			МО	DAY	YEAR		
Mailing Address			4	14	2004	\$	358.00
City	State	Zip Code (Plus 4)		otion of Exp			
To Whom Paid WATER REVENUE DEPT			мо	DAY	YEAR		
Mailing Address			4	20	2004	\$	56.15
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
To Whom Paid DEMOCRATIC CITY COMMI	ITEE		МО	DAY	YEAR		
Mailing Address			4	21	2004	\$	500.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	ı	
Futou 6000 d 7 1 1 6 7							PAGE TOTAL
Enter Grand Total of Exp	enditures on Page 1, Re	eport Cover Page, Item D).			\$	926.15