Campaign Finance Report

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

Filer Identificat	ion	2019	0105			Repor		CA	NDI	DATE	со	MMITTEE	✓	LOB	BYIST	Ľ	
Number :		o Condid	-	ahhuist.		Filed											
Name of Filing (•		-		SULMA	IN, D			JS UF							
Street Address:	1500) WALNUT	i si, si	E 2000													
City:	PHIL	ADELPHIA	4					State	e:	PA		Zip Co	de: 19	102-3	510		
TYPE OF REPORT	6TH TUE	-	1.	2ND FRIDA PRIMARY	AY PRE	- 2. X		DAY MARY	F	POST-	3.		AMENDMENT REPORT?		N	0	\checkmark
(place X to the right of	6TH TUE		4.	2ND FRIDA	AY PRE	≣- 5.		DAY CTION	F	POST- 6.			TERMINATION REPORT?		N	0	\checkmark
report type)	ANNUAL	. REPORT	7.	Year 2019)			ILING METHOD () CHECK ONE			PAPER	PAPER			ETTE		
Name of Office	Sought by	y Candidat	te:					DAT					Office r Code	Pa	ty Code	Cou Cod	
		o= 00144						мо		DAY	YEAR	1					
JUDGE OF THE	COURT	OF COMM	ON PLE	AS - PHILA	ADELPI	AIA			11		5 201	.9	(SEE INSTRUCTIONS FOR CODI				5)
Summary of	Receipt	s and	мо	DAY	YEAR	Ł		мо		DAY	YEAR	F	OR OFFIC	CE USE	ONLY		
Expenditures	s from:			1 1	1 2	019	Ю		5		6 20:	19					
A. Amount Bro	ught For	ward Fron	n Last R	st Report \$ 0.00							0						
B. Total Monetary Contributions And Receipts (From Schedule I								\$			500.0	0					
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$			500.0	0					
D. Total Expen	ditures (From Sche	edule II	I)				\$			100.0	0					
E. Ending Cash	Balance	(Subtract	t Line D	From Line	C)			\$			400.0	0					
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	Schedu	le II)		\$			4,902.4	4					
G. Unpaid Deb	ts And Ol	oligations	(From S	Schedule I	V)			\$			0.0	0					
					AFF	IDAV	IT S	ECTIO	ΟN								
PART I - If this i	s a Comn	nittee repo	ort, trea	surer sign	here.	If this i	s a C	andida	te re	eport, ca	andidate	sign here					
I swear (or affirm correct and compl		report, incl	uding the	e attached so	chedule	s filed or	i pape	er or by e	elect	ronic me	dium, are t	o the best	of my knov	wledge	and bel	ief , tı	ue
Sworn to and sub	scribed bef day of	ore me this	;	20							Signat	ure of Pers	on Submitt	ting Re	port		-
	_						_					Pri	nted Name	•			-
My Commission E	xpires	Signatu	re									Em	ail				-
		мо	D	AY	YR					Area	a Code	Dayti	me Teleph	ione Nu	mber		-
Part II- If this is	a report	t of a cand	lidate's	authorized	l Comn	nittee, (Candi	idate sl	hall	sign he	re.						
I swear (or affirm) No 320) as amend		ne best of m	ıy knowle	edge and bel	lief this	political	com	imittee h	nas n	ot violate	ed any pro	visions of t	he act of J	une 3,1	937 (P.	L. 133	з,
Sworn to and subse		ore me this										Signature	of Candida	ate			-
	day of						_					Print	ed Name				-
		Signature					_						- 11				_
My Commission Ex	pires											Em	ail				
	-	мо	D	AY	YR	1	_			Area C	ode	I	Daytime T	elephor	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** SULMAN, DAN FRIENDS OF From: <u>1/1/2019</u> **To:** <u>5/6/2019</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)** 0.00 All Other Contributions (Part B) \$ **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)** 0.00 500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 500.00 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 \$ 500.00 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					
			Fro	om:		То	:		
					DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						
							ſ	PAGE TOTAL	

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

0.00

\$

Use this Part to ite	emize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s w ortir	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candidat	e			orting P	eriod			
			Fro	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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 Cand	idate		Reporting	Period				
			From:			То:		
				DA	TE		А	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	Schedule I, Detail	ed 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	Name of Filing Committee or Candidate					Reporting Period				
SULMAN, DAN FRIENDS OF			Fron	n:	<u>1/1/2</u>	<u>019</u> To	Fo: <u>5/6/2019</u>			
				D/	ATE		AMOUNT			
Full Name of Contributor Janice M. Sulman				мо	DAY	YEAR				
Mailing 1500 Walnut Street - Address	Suite 2000						\$ 500.00			
City Philadelphia	State PA	Zip Code (Plus	5 4)	3	14	2019				
Employer Name Self-employed				Occupation Attorney						
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)			
1500 Walnut Street - Suite 2000		Philadelp	hia		РА		19102			
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Sectio	on 3.			PAGE TOTAL			
	-	, ,,				5	\$ 500.00			

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 Candidate			Report	orting Period					
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description						ł	I		
Enter Grand Total of Part E on Sched	ule T. Detailed Sun	nmary Page	Section	4				PAGE TOT	AL
		, i uge,	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	Reporting Period		
SULMAN, DAN FRIENDS OF	From:	<u>1/1/2019</u> To:	<u>5/6/2019</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 PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	4,902.44
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		\$	4,902.44

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate				Reporting Period					
			From:			То:				
				DATE		АМС	DUNT			
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL			
					4	5	0.00			

PAGE 10

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				
SULMAN, DAN FRIENDS OF					Fro	m:		<u>1/1/201</u>	<u>19</u> To:	<u>5/6/2019</u>
								DATE		AMOUNT
Full Name of Contributor Daniel R. Sulman						мо		DAY	YEAR	
Mailing Address 509 W. Mount Pleas	ant Avenue									\$ 5.00
City Philadelphia	State PA	Zip Code(Plus 4) 19119					2	25	2019	
Employer of Contributor Self-emplo	byed					Occu	ıpat	ion A	ttorney	
Employer Mailing Address/Principal Place of City State							Zip (4)	Code(Plus	Descri	ption of Contribution
1500 Walnut Street - Suite 2000 Philadelphia PA						1	191	02		nt to Philadelphia g Authority
Full Name of Contributor Daniel R. Sulman						мо		DAY	YEAR	
Mailing Address 509 W. Mount Pleas	ant Avenue									\$ 4.00
City Philadelphia	State PA		Zip Code(I 19119	Plus 4)			2	25	2019	
Employer of Contributor Self-emplo	yed		1			Occu	ıpat	ion A	ttorney	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip Code(Plus Descr 4)			Descri	ption of Contribution
1500 Walnut Street - Suite 2000		Philade	elphia	PA		1	191	02		nt to Philadelphia g Authority
Full Name of Contributor Daniel R. Sulman						мо		DAY	YEAR	
Mailing Address 509 W. Mount Pleas	ant Avenue									\$ 5.00
City Philadelphia	State PA		Zip Code(I 19119	Plus 4)			2	28	2019	
Employer of Contributor Self-emplo	yed					Occupation Attorney			1	
Employer Mailing Address/Principal Place of City Business			State			Zip (4)	Code(Plus	Descri	ption of Contribution	
Ison Walnut Street - Suite 2000PhiladelphiaPA					191	02	Payme	nt to Philadelphia a Authority		

					-			-		
Full Name of Contributor					мо	DAY	YEAR			
Daniel R. Sulman					MO					
Mailing Address 509 W. Mount Pleas	sant Avenue	2						\$ 4.25		
City Philadelphia	State		Zip Code(Plus 4)	2	28	2019			
	PA		19119							
Employer of Contributor Self-employ	oyed		•		Occupation Attorney					
Employer Mailing Address/Principal Pla Business	ce of	City		State	Zip 4)	Code(Plus	Descri	ption of Contribution		
1500 Walnut Street - Suite 2000	Philadelphia PA			191	.02		nt to Philadelphia 9 Authority			
Full Name of Contributor Daniel R. Sulman					мо	DAY	YEAR			
Mailing Address 509 W. Mount Pleas	sant Avenue	2				10	2010	\$ 6.50		
City Philadelphia	State		Zip Code(Plus 4)	3	19	2019			
	PA		19119							
Employer of Contributor Self-emplo	byed		1		Occupa	l tion /	l Attorney			
Employer Mailing Address/Principal Pla Business	ce of	City		State	Zip 4)	Code(Plus	Descri	Description of Contribution		
1500 Walnut Street - Suite 2000		Philade	elphia	РА	191	.02	Payment to Philadelphia Parking Authority			
Full Name of Contributor Daniel R. Sulman					мо	DAY	YEAR			
Mailing Address 509 W. Mount Pleas	sant Avenue	2						\$ 1,000.00		
City Philadelphia	State		Zip Code(Plus 4)	3	4	2019			
	PA		19119							
Employer of Contributor Self-emplo	byed		-		Occupation Attorney					
Employer Mailing Address/Principal Pla Business	ployer Mailing Address/Principal Place of City State siness			State	Zip Code(Plus 4) Description of Contribution			otion of Contribution		
1500 Walnut Street - Suite 2000 Philadelphia PA				РА	191	.02		nt to Mariel Martin for ign Work		

Full Name of Contributor						DAY	VEAD			
Daniel R. Sulman					мо	DAY	YEAR			
Mailing Address 509 W. Mount Pleas	ant Avenue	!						\$ 1,000.00		
City Philadelphia	State		Zip Code(Plus 4)	3	8	2019			
	PA		19119							
Employer of Contributor Self-emplo	oyed		•		Occupa	Occupation Attorney				
Employer Mailing Address/Principal Pla Business	ce of	City		State	Zip 4)	Code(Plus	Descri	otion of Contribution		
1500 Walnut Street - Suite 2000		Philadelphia PA			191	.02		nt to Mariel Martin for ign Work		
Full Name of Contributor Daniel R. Sulman					мо	DAY	YEAR			
Mailing Address 509 W. Mount Pleas	ant Avenue	2				10	2010	\$ 1,500.00		
City Philadelphia	State		Zip Code(Plus 4)	3	18	2019			
	PA		19119							
Employer of Contributor Self-emplo	byed		1		Occupa	tion	Attorney			
Employer Mailing Address/Principal Pla Business	ce of	City		State	Zip 4)	Code(Plus	Descri	Description of Contribution		
1500 Walnut Street - Suite 2000		Philade	elphia	РА	191	.02	Payment to Mariel Martin for Campaign Work			
Full Name of Contributor Daniel R. Sulman					мо	DAY	YEAR			
Mailing Address 509 W. Mount Pleas	ant Avenue							\$ 68.00		
City Philadelphia	State		Zip Code(Plus 4)	3	11	2019			
	PA		19119							
Employer of Contributor Self-emplo	yed				Occupation Attorney					
Employer Mailing Address/Principal Pla Business	oloyer Mailing Address/Principal Place of City State			State	Zip Code(Plus 4) Description of Contributio			ption of Contribution		
1500 Walnut Street - Suite 2000 Philadelphia PA				PA	191	.02		nt to AMTRAK for ortation		

								-			
Full Name of Contributor											
Daniel R. Sulman					мо	DAY	YEAR				
Mailing Address 509 W. Mount Plea	isant Avenue	9						\$ 3.00			
City Philadelphia	State		Zip Code(Plus 4)	3	3	2019				
i maacipma	PA		19119								
Employer of Contributor Self-emp	oyed		•		Occupa	Occupation Attorney					
Employer Mailing Address/Principal Pl Business	ace of	City		State	Zip	Code(Plus	Descri	ption of Contribution			
1500 Walnut Street - Suite 2000	2000 Philadelphia PA			19	102		nt to Philadelphia g Authority				
Full Name of Contributor Daniel R. Sulman					мо	DAY	YEAR				
Mailing Address 509 W. Mount Plea	isant Avenue	2	_			26	2019	\$ 18.30			
City Philadelphia	State		Zip Code(Plus 4)	3	20	2019				
	PA		19119								
Employer of Contributor Self-emp	oyed		l		Occupa	ition /	Attorney	I			
Employer Mailing Address/Principal Pl Business	ace of	City		State	Zip 4)	Zip Code(Plus 4) Description of Co					
1500 Walnut Street - Suite 2000		Philade	elphia	РА	19	19102 Payment to Dunkin' Do					
Full Name of Contributor					мо	DAY	YEAR				
Daniel R. Sulman											
Mailing Address 509 W. Mount Plea	isant Avenue	9						\$ 73.00			
City Philadelphia	State		Zip Code(Plus 4)	4	1	2019				
	PA		19119								
Employer of Contributor Self-employed					Occupa	tion	Attorney	1			
Employer Mailing Address/Principal Pl Business	ress/Principal Place of City Sta		State	 Zip 4)	Zip Code(Plus 4)		Description of Contribution				
			elphia	PA	19	102	Payme of Peni fees)	nt to Commonwealth nsylvania (court filing			

Full Name of Contributor Daniel R. Sulman					мо		DAY	YEAR			
Daniel R. Suiman											
Mailing Address 509 W. Mount Pleasant Avenue									\$ 93.28		
City Dhiladelphia	State		Zip Code(Plus 4)		4	1	2019			
City Philadelphia	PA	19119									
Employer of Contributor Self-employed				Occu	Occupation Attorney						
Employer Mailing Address/Princip Business	al Place of	City		State		Zip Code(Plus 4)			ption of Contribution		
1500 Walnut Street - Suite 2000		Philade	elphia	PA	1	19102 Payment to Cheltenham Printing					
Full Name of Contributor					мо		DAY	YEAR			
Daniel R. Sulman							DAT	TEAR			
Mailing Address 509 W. Mount	t Pleasant Avenue	e							\$ 200.00		
City Philadelphia	State	Zip Code		Plus 4)		3	6	2019			
	PA		19119								
Employer of Contributor Self-	employed		1		Occu	pat	ion /	Attorney	L		
Employer Mailing Address/Princip Business	al Place of	City		State		Zip Code(Plus 4) Description of Contri			ption of Contribution		
			Philadelphia PA			19102			Payment to 8th Ward Democratic Executive Committee		
Full Name of Contributor											
Daniel R. Sulman					мо		DAY	YEAR			
Mailing Address 509 W. Mount	t Pleasant Avenue	e							\$ 160.76		
City Philadelphia	State	ate Zi		Zip Code(Plus 4)		3	6	2019			
	РА		19119								
Employer of Contributor Self-	employed		1		Occu	pat	ion /	Attorney	1		
Employer Mailing Address/Princip Business	ployer Mailing Address/Principal Place of City		State			Zip Code(Plus 4)		Description of Contribution			
1500 Walnut Street - Suite 2000		Philade	Philadelphia PA			19102			Payment to 9th Ward Democratic Executive Committee		

Full Name of Contributor					мо					
Daniel R. Sulman						DAY	YEAR			
Mailing Address 509 W. Mount Pleasant Avenue								\$ 33.27		
City Philadelphia	State		Zip Code(Plus 4)	3	7	2019			
	PA 19119									
Employer of Contributor Self-employed					Occupa	tion /	Attorney			
Employer Mailing Address/Principal Plac Business	e of	City		State	Zip 4)	Code(Plus	Descri	otion of Contribution		
1500 Walnut Street - Suite 2000		Philade	elphia	PA	191	.02	Payme Grill	Payment to 1518 Bar and Grill		
Full Name of Contributor Daniel R. Sulman					мо	DAY	YEAR			
Mailing Address 509 W. Mount Pleasant Avenue						11	2010	\$ 200.00		
City Philadelphia	State		Zip Code(Plus 4)		3	11	2019			
	PA		19119							
Employer of Contributor Self-emplo	yed		1		Occupation Attorney					
Employer Mailing Address/Principal Plac Business	e of	City		State	Zip 4)	Code(Plus	Descri	otion of Contribution		
1500 Walnut Street - Suite 2000		Philade	elphia	РА	191	.02	Payment to Pennsylvania Department of State			
Full Name of Contributor Daniel R. Sulman					мо	DAY	YEAR			
Mailing Address 509 W. Mount Pleasant Avenue								\$ 11.00		
City Philadelphia	State		Zip Code(Plus 4)	3	1	2019			
	PA		19119							
Employer of Contributor Self-employed				Occupation Attorney						
Employer Mailing Address/Principal Plac Business				State	Zip 4)	Code(Plus	Description of Contribution			
1500 Walnut Street - Suite 2000 Philadelphia PA				РА	191	19102 Payment to U.S. Postal Service (postage stamps)				

City Philadelphia State Zip Code(Plus 4) 3 9 2019 \$ 2.50 Employer of Contributor Self-employed City Philadelphia City State 2ip Code(Plus 4) 19119 Description of Contribution Employer of Contributor Self-employed City Philadelphia PA 2ip Code(Plus 4) 19102 Description of Contribution Full Name of Contributor Data in R. Sulman Mo DAY YEAR YEAR Mailing Address 509 W. Mount Pleasant Avenue Zip Code(Plus 4) 3 1 2019 \$ 53.98 City Philadelphia State Zip Code(Plus 4) 3 1 2019 \$ 53.98 City Philadelphia State Zip Code(Plus 4) 3 1 2019 \$ 53.98 Employer Mailing Address Sog W. Mount Pleasant Avenue Occupation Attorney \$ 53.98 Employer Mailing Address Sog W. Mount Pleasant Avenue PA 19102 Description of Contributon Payment to Staples (supplies) \$ 50.00 State										
City Philadelphia State PA Zip Code(Plus 4) 19119 3 9 2019 \$ 2.50 Employer of Contributor Business Self-employed Occupation Attorney Employer Mailing Address/Principal Place of Business City Philadelphia State Philadelphia State PA State Philadelphia Description of Contributor Payment to U.S. Postal Service (service charge for money orders) Full Name of Contributor Daniel R. Sulman Mo DAY YEAR PA 2019 \$ Mailing Address 509 W. Mount Pleasant Avenue Zip Code(Plus 4) 19119 3 1 2019 \$ Employer of Contributor Daniel R. Sulman State PA Zip Code(Plus 4) 19119 3 1 2019 \$ \$ Employer of Contributor Susiness Self-employed City Philadelphia State PA Zip Code(Plus 4) 19102 Description of Contribution Payment to Staples (supplies) Pa 2019 \$ \$ Full Name of Contributor Daniel R. Sulman Mo DAY YEAR 4) 2019 \$ \$ Full Name of Contributor Daniel R. Sulman State Zip Code(Plus 4) 19119 3 1 2019 \$ \$							DAY	YEAR		
City PA 2ip Code(Plus 4) 1 <th1< th=""> <th1< th=""> <th1< th=""></th1<></th1<></th1<>	Mailing Address 509 W. Mount Pleasant Avenue								\$ 2.50	
PA 1919 Occupation Attorney Employer of Contributor Self-employed State Zip Code(Plus 4) Description of Contribution Payment to U.S. Postal Service (service charge for money orders) Full Name of Contributor Data Zip Code(Plus 4) Description of Contribution Payment to U.S. Postal Service (service charge for money orders) PA VEAR Mailing Address State Zip Code(Plus 4) Description of Contribution Payment to U.S. Postal Service (service charge for money orders) PA VEAR Mailing Address State Zip Code(Plus 4) 19119 3 1 2019 \$53.98 Employer of Contributor Self-employed City State PA Zip Code(Plus 4) 19102 Description of Contribution Payment to Staples (supplies) Payment to Staples (supplies) Employer of Contributor Daniel R. Sulman State Philadelphia State PA Zip Code(Plus 4) 19102 Description of Contribution Payment to Staples (supplies) Full Name of Contributor Daniel R. Sulman State PA Zip Code(Plus 4) 19102 3 1 2019 \$0.00 City Philadelphia State PA Zip Code(Plus 4) 19102 3 1 2019 \$0.00 City P	City Philadelphia	State		Zip Code(Plus 4)	3	9	2019		
Attorney Attorney Employer Mailing Address/Principal Place of Business City State Zip Code(Plus 4) Description of Contribution Payment to U.S. Postal Service (service charge for money orders) Full Name of Contributor Daniel R. Sulman Mo DAY YEAR Mailing Address 509 W. Mount Pleasant Avenue Zip Code(Plus 4) 19119 3 1 2019 State City Philadelphia State Zip Code(Plus 4) 19119 3 1 2019 State Employer of Contributor Daniel R. Sulman State Zip Code(Plus 4) 19119 3 1 2019 State Employer of Contributor Business State Zip Code(Plus 4) 19102 3 1 Description of Contribution Payment to Staples Employer of Contributor Business State Zip Code(Plus 4) 19102 Mo Description of Contribution Payment to Staples Full Name of Contributor Daniel R. Sulman State Zip Code(Plus 4) 19119 3 1 2019 50.00 City Philadelphia State Zip Code(Plus 4) 19102 3 1 2019 50.00 Full Name of Contributor Daniel R. Sulman State Zip Code(Plus	i macapina	PA	19119							
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Full Name of Contributor Daniel R. Sulman MO DAY YEAR Miling Address 509 W. Mount Pleasant Avenue All the problem of Contributor Self-employed All the problem of Contributor Self-employed State Zip Code(Plus 4) 19119 3 1 2019 \$ 53.98 Employer of Contributor Self-employed State Zip Code(Plus 4) 19102 Attorney Description of Contribution Payment to Staples (supplies) Full Name of Contributor Daniel R. Sulman Philadelphia PA State Zip Code(Plus 4) 19102 Description of Contribution Payment to Staples (supplies) Full Name of Contributor Daniel R. Sulman State Zip Code(Plus 4) 19119 3 1 2019 \$ 50.00 City Philadelphia PA 19119 All 19102 Description of Contribution Payment to Staples (supplies) \$ 50.00 City Philadelphia State Zip Code(Plus 4) 19119 3 1 2019 \$ 50.00 Employer of Contributor Self-employed Occupation Attorney \$ 50.00 \$ 50.00 City Philadelphia State Zip Code(Plus 4) 19119 3 1 2019 \$ 50.00 Employer of Contributor <td< td=""><td>Employer Mailing Address/Principal Plac Business</td><td>e of</td><td>City</td><td></td><td>State</td><td></td><td>Code(Plus</td><td>Descri</td><td>ption of Contribution</td></td<>	Employer Mailing Address/Principal Plac Business	e of	City		State		Code(Plus	Descri	ption of Contribution	
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1500 Walnut Street - Suite 2000 Philadelphia PA			PA	191	19102 Payment to 18th I Ward				
Enter Grand Total of Part G on Schedul	le II. In-Kin	d Contribut	ions Deta	iled			PAGE TOTAL		
Summary Page, Section 3.							4,902.44		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
SULMAN, DAN FRIENDS OF	From	<u>1/</u>	<u>1/2019</u>	То:	<u>5/6/2019</u>		
			DATE	AMOUNT			
To Whom Paid Friends of the 21st Ward	мо	DAY	YEAR				
Mailing Address 539 Gates Street	3	16	2019	\$	100.00		
City Philadelphia	State PA	Description of Expenditure Event Expense					
				PAGE TOTAL			
Enter Grand Total of Expenditures	on Page 1, Report C	over Page, Item I				\$	100.00