### **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 20	150218			Repo			CANDI	DIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Can	didate or L	obbyist:	i	Frien	ds	of Do	nna Bull	ock							
Street Address: PO Box 58921																
City:	Philadelphi _	a						State:	PA			Zip Co	<b>ie:</b> 19	102		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.	.Х	30 DA PRIMA		POST-	3.		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.		TERMIN/ REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPO	<b>RT</b> 7.	<b>Year</b> 2019					NG METH				PAPER		<b>/</b>	DISKE	TTE
Name of Office S	ought by Candi	date:	•					DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR	195	STH	DEM	1	51
REPRESENTATI	IVE IN THE GEN	IERAL ASS	EMBLY					11		5	2019		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		4 2	20	019	T	0	5		6	2019					
A. Amount Bro	ught Forward F	rom Last R	eport				\$			72,8	392.53					
B. Total Moneta	ary Contribution	ns And Rec	eipts (From S	Sche	dule 1	I)	\$			8,5	81.03					
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			81,4	173.56					
D. Total Expend	ditures (From S	chedule II	I)				\$			5,6	18.91					
E. Ending Cash	Balance (Subti	act Line D	From Line C)				\$			75,8	54.65	]				
F. Value Of In-	Kind Contributi	ons Receiv	ed (From Sch	edul	e II)		\$				0.00					
G. Unpaid Debt	ts And Obligation	ns (From S	Schedule IV)				\$				0.00					
			,	4FF	IDA'	VI٦	ΓSE	CTION								
PART I - If this is	s a Committee i	eport, trea	surer sign he	re. I	f this	s is	a Car	ndidate r	eport, e	candi	date sig	jn here.				
I swear (or affirm) correct and comple		including the	e attached sche	dules	filed	on Į	paper	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge a	and belie	f , true
Sworn to and subs	cribed before me day of	this	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Sign	ature					-					Prin	ted Name	<u> </u>		
My Commission Ex	cpires						_					Ema	il			
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a c	andidate's	authorized Co	omm	ittee	, Ca	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende		of my knowl	edge and belief	this	politio	cal	comm	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc		his									s	ignature o	of Candida	ate		
	day of —— ———						-					Printe	d Name			
	Signatu	re					-									
My Commission Exp	_											Ema	il			_
	мо	D	AY	YR			•		Area	Code		D	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period						
Friends of Donna Bullock	From:	4/2/2019	<u>9</u> To:	5/6/2019			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	Period	(1)	\$	15.00			
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)							
Contributions Received From Political Committees (Part A)			\$	3,250.00			
All Other Contributions (Part B)			\$	450.00			
TOTAL for the Reporting	Period	(2)	\$	3,700.00			
3. Contributions Received Over \$250.00 (From Part C and Part D)							
Contributions Received From Political Committees (Part C)			\$	4,000.00			
All Other Contributions (Part D)			\$	850.00			
TOTAL for the Reporting	Period	(3)	\$	4,850.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	Period	(4)	\$	16.03			
Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	8,581.03			

#### 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 Re			Reporting Period					
Friends of Donna Bullock			Fre	om:	4/2/20	) <u>19</u> To	:	5/6/2019
		•			DATE			AMOUNT
Full Name of Contributing Committee AFSCME Council 13				мо	DAY	YEAR		
Mailing Address 4031 Executive Pa	ouls Du							
4031 Executive Pa	ark Dr			4	0	2019	\$	250.00
<b>City</b> Harrisburg	State	Zip Code (Plus	4)	4	9	2019		
	PA	171111507						
Full Name of Contributing Committee				МО	DAY	YEAR		
Aqua America, Inc. H2O Political Action	Committee			МО	DAT	IEAR		
Mailing Address 762 W Lancaster	Ave						\$	250.00
City Bryn Mawr	State	Zip Code (Plus	4)	4	5	2019		
	PA	190103402						
Full Name of Contributing Committee					DAY	VEAD		
Buchanan Ingersoll & Doney Com	nmitee for Effective St	ate Government	t	МО	DAY	YEAR		
Mailing Address 301 Grant St Fl 2	20						\$	250.00
<b>City</b> Pittsburgh	State	Zip Code (Plus	4)	4	9	2019		
-	PA	152191412						
Full Name of Contributing Committee					DAY	VEAD		
FirstEnergy Political Action Committee				МО	DAY	YEAR		
Mailing Address 76 S Main St							\$	250.00
City Akron	State	Zip Code (Plus	4)	4	9	2019		
	ОН	443081812						
Full Name of Contributing Committee		-		мо	DAY	YEAR		
Greenlee Partners State PAC				МО	DAT	IEAR		
Mailing Address PO Box 291							\$	250.00
<b>City</b> Harrisburg	State	Zip Code (Plus	4)	4	9	2019		
j	PA	171080291						

				PAGE 4
Full Name of Contributing Committee Highmark PAC	мо	DAY	YEAR	
Mailing Address 1800 Center St				<b>\$</b> 250.00
City         Camp Hill         State         Zip Code (Plus 4)           PA         170111702	4	9	2019	
Full Name of Contributing Committee  LawPAC	мо	DAY	YEAR	
Mailing Address 800 N 3rd St				<b>\$</b> 250.00
City Harrisburg PA Zip Code (Plus 4) 171022025	4	9	2019	
Full Name of Contributing Committee PA Academy of Audiology PAC	мо	DAY	YEAR	
Mailing Address 908 N 2nd St				<b>\$</b> 250.00
City Harrisburg State Zip Code (Plus 4)	4	12	2019	
PA 171023119				
Full Name of Contributing Committee PA Medical Political Action Committee	мо	DAY	YEAR	
Full Name of Contributing Committee	мо	DAY	YEAR	<b>\$</b> 250.00
Full Name of Contributing Committee  PA Medical Political Action Committee	мо 4	DAY 9	<b>YEAR</b> 2019	\$ 250.00
Full Name of Contributing Committee PA Medical Political Action Committee  Mailing Address PO Box 8820  City Harrisburg State Zip Code (Plus 4)				\$ 250.00
Full Name of Contributing Committee  PA Medical Political Action Committee  Mailing Address PO Box 8820  City Harrisburg State PA 171058820  Full Name of Contributing Committee	мо	9 DAY	2019 YEAR	\$ 250.00 \$ 250.00
Full Name of Contributing Committee  PA Medical Political Action Committee  Mailing Address PO Box 8820  City Harrisburg State PA 171058820  Full Name of Contributing Committee  Pennsylvania SEIU COPE	4	9	2019	
Full Name of Contributing Committee  PA Medical Political Action Committee  Mailing Address PO Box 8820  City Harrisburg State PA 171058820  Full Name of Contributing Committee  Pennsylvania SEIU COPE  Mailing Address 1500 N 2nd St 2nd Floor, Suite 11  City Harrisburg State Zip Code (Plus 4)  City Harrisburg State Zip Code (Plus 4)	мо	9 DAY	2019 YEAR	
Full Name of Contributing Committee PA Medical Political Action Committee  Mailing Address PO Box 8820  City Harrisburg State PA 171058820  Full Name of Contributing Committee Pennsylvania SEIU COPE  Mailing Address 1500 N 2nd St 2nd Floor, Suite 11  City Harrisburg PA 27ip Code (Plus 4) 171022528  Full Name of Contributing Committee PA 171022528	мо 4	9 <b>DAY</b>	2019 YEAR 2019	

Full Name of Contributing Commit Political Action Committee for Pro		re in PA	МО	DAY	YEAR	
Mailing Address PO Box 108	31					<b>\$</b> 250.00
<b>City</b> Glenside	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190386081	4	9	2019	
Full Name of Contributing Commit	tee	<u> </u>	МО	DAY	YEAR	
_		<b>'</b>	<b>MO</b>	<b>DAY</b> 17	<b>YEAR</b> 2019	\$ 250.00

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

**PAGE TOTAL \$** 3,250.00

### 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 or Candidate Rep			eporting Period					
Friends of Donna Bullock Fro		Froi	m:	4/2/	2019 <b>T</b> o	5/6/2019		
					DATE		AMOUNT	
Full Name of Contributor David Dix				МО	DAY	YEAR		
Mailing Address 862 Fawn Ln							\$ 100.00	
City Hummelstown	State	Zip Code (Plus 4)		4	9	2019		
	PA	170367203						
Full Name of Contributor Gerald Jones				МО	DAY	YEAR		
Mailing Address 5229 N 15th St							\$ 200.00	
City Philadelphia	State	Zip Code (Plus 4)		4	4	2019		
	PA	191411601						
Full Name of Contributor				мо	DAY	YEAR		
Allen Rubin				М	DAI	ILAK		
Mailing Address 1518 Walnut St St	e 1200						<b>\$</b> 150.00	
<b>City</b> Philadelphia	State	Zip Code (Plus 4)		4	5	2019		
·	PA	191023407						
							PAGE TOTAL	

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

\$ 450.00

#### **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 Repor				Period				
Friends of Donna Bullock			From:	<u>4/</u>	2/2019	То:	5/6/2019	
				DA	TE		AMOUNT	
Full Name of Contributing Committee  ExelonPAC				МО	DAY	YEAR		
Mailing Address 101 Constitution Ave	NW Suite 400 East						<b>\$</b> 500.	.00
<b>City</b> Washington	State	Zip Code	e (Plus 4)	4	9	2019		
geo.	DC	200012	133					
Full Name of Contributing Committee	-	-		мо	DAY	YEAR		
IBC PAC				МО	DAI	ILAK		
Mailing Address 1901 Market St							<b>\$</b> 250.	.00
<b>City</b> Philadelphia	State	Zip Code	e (Plus 4)	4	12	2019		
	PA	191031	480					
Full Name of Contributing Committee				мо	DAY	YEAR		
IBC PAC				МО	DAI	ILAK		
Mailing Address 1901 Market St							<b>\$</b> 250.	.00
<b>City</b> Philadelphia	State	Zip Code	e (Plus 4)	4	12	2019		
	PA	191031	480					
Full Name of Contributing Committee	-	-		мо	DAY	YEAR		
PA Ophthalmology PAC								
Mailing Address 200 N 3rd St Ste 15	00						<b>\$</b> 1,000.	.00
City Harrisburg	State	Zip Code	e (Plus 4)	5	6	2019		
	PA	171011	590					
Full Name of Contributing Committee				мо	DAY	YEAR		
PAA PAC								
Mailing Address 1925 N Front St					_	00.0	<b>\$</b> 500.	.00
<b>City</b> Harrisburg	State	Zip Code	e (Plus 4)	4	9	2019		
	PA	171022	214					

Full Name of Contributing Committee PECO PAC			МО	DAY	YEAR	
Mailing Address 2301 Market St S15-1						<b>\$</b> 500.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191031338	4	17	2019	
Full Name of Contributing Committee  Z PAC Pennsylvania Society of Anesthesiologist Political Action Committee						
_		cal Action Committee	МО	DAY	YEAR	
_	sthesiologist Politi	cal Action Committee	<b>MO</b>	DAY 6	<b>YEAR</b> 2019	<b>\$</b> 1,000.00

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

**PAGE TOTAL \$** 4,000.00

## 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					
Friends of Donna Bullock			Froi	m:	<u>4/2</u>	2/2	019 <b>To</b>	5/6/2019		
				D	ATE			АМ	OUNT	
Full Name of Contributor MUSTAFA RASHED				МО	DAY		YEAR			
Mailing 1917 W Master St Address							\$	500.00		
<b>City</b> Philadelphia	Philadelphia State Zip Code (Plus 4)		s 4)	4		8	2019			
'	PA	191214917								
Employer Name Bellevue Strategies, L	LC	•		Occupat	tion	C	onsultai	nt		
Employer Mailing Address/Principal Plac Business	e of	City		•	State			Zip Code	(Plus 4)	
200 S Broad StSte 410		Philadel	ohia		PA			191023814		
Full Name of Contributor Robert Taylor Esq.				мо	DAY		YEAR			
Mailing PO Box 6349 Address								<b>\$</b>	350.00	
City Harrisburg	State	Zip Code (Plu	s 4)	5		6	2019			
	PA	171120349								
Employer Name The Cameron Compar	nies, LLC	•		Occupation Attorney/ Lobbyist			t			
Employer Mailing Address/Principal Plac Business	e of	City		•	State	e		Zip Code (Plus 4)		
PO Box 6349		Harrisbu	rg		PA			171120	)349	
Enter Grand Total of Part C on Sche	dule I. Detailed S	ummarv Page	. Sectio	on 3.				PA	GE TOTAL	
	, - otanica o	,	,	· · ·			- 1			

16.03

## 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			
Friends of Donna Bullock From:				4/2/201	<u>9</u> To:	5/6/2019		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
PayPal				1.0				
Mailing Address 1840 Embarcadero	Rd				_		\$	16.03
City Palo Alto	State	Zip Code (	Plus 4)	4	2	2019		
	CA	9430333	08					
Receipt Description cash back on	credit card							
Enter Grand Total of Part F on Sched	ule I Detailed	Summary Page	Section	4		ſ	PAGE TOTA	\L

#### **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	I						
Friends of Donna Bullock	From:	<u>4/2/2019</u> <b>To:</b>	<u>5/6/2019</u>					
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 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 Candidate			Reporting Period					
Fi			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 So	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL	
Section 2.						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
Friends of Donna Bullock	From	<u>4/2</u>	2/2019	То:	5/6/2019
		DATE			AMOUNT
To Whom Paid	MO	DAY	VFΔR		

				DATE		AMOUNT		
To Whom Paid Eatible Delights Catering				DAY	YEAR			
Mailing Address 2338 Ridge Ave			5	2	2019	\$	325.00	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191212931	Description of Expenditure food for event/ In Kind to Friends of Darrell Clarke					
To Whom Paid Friends of Darrell L. Clarke			МО	DAY	YEAR			
Mailing Address PO Box 60093			5	2	2019	\$	2,500.00	
<b>City</b> Philadelphia	<b>State</b> PA	Description of Expenditure Contribution						
To Whom Paid Friends of Jannie L. Blackwell				DAY	YEAR			
Mailing Address City Hall, Room 408			5	2	2019	\$	2,500.00	
<b>City</b> Philadelphia	State Zip Code (Plus 4) PA 19107			Description of Expenditure Contribution				
To Whom Paid Little Amps Coffee			МО	DAY	YEAR			
Mailing Address 133 State St			4	9	2019	\$	48.66	
<b>City</b> Harrisburg	State         Zip Code (Plus 4)           PA         171011027			ription of Expenditure for event				
To Whom Paid Minuteman Press				DAY	YEAR			
Mailing Address 2715 S Front St			5	2	2019	\$	209.65	
<b>City</b> Philadelphia	State         Zip Code (Plus 4)           PA         191484838			otion of Exp g/ envelop				

				МО	DAY	YEAR	
Mailing Address 12120 Sunset Hills Rd Ste 500				5	2	2019	\$ 35.60
<b>ity</b> Reston	<b>State</b> VA		Zip Code (Plus 4) 201905858	<b>Descrip</b> Mercha	nt Fees	enditure	
nter Grand Tota	l of Expenditures on Page	: 1, Report Co	ver Page, Item D.	ı			\$ <b>PAGE TOTAL</b> 5,618.91
						·	