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 2015	0283			Repo Filed			CANI	ונט	DATE		COM	AITTEE	Y	LUE	DI	151	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	Willia	ms fo	r S	enate		•				·				
Street Address:	P.O. Box 6313	3																
City:	Philadelphia							State:		PA			Zip Co	de: 19	143			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.		DA IMA		Р	OST-	3. X		AMENDN REPORT		Yes		No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		DA ECT	Y ION	Р	OST-	6.		TERMIN. REPORT		Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2019					IG MET					PAPER			D	ISKET	TE
Name of Office S	ought by Candida	te:						DATE	0	F ELE	CTIC	ON	District Number	Office Code	Pa	irty	Code	County Code
								МО		DAY	Y	EAR						
								1	11		5	2019		(SEE IN	STRUCT	ION	S FOR CO	DDES)
	Receipts and	МО	DAY	YEAR				МО		DAY	Y	EAR	FC	R OFFI	E US	ΕO	NLY	
Expenditures	from:		5 7	' 20	019	то			6	1	.0	2019						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				39,	973.59						
B. Total Moneta										840.00								
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B) \$ 40,813.59										813.59							
D. Total Expend	ditures (From Scho	edule II	I)				\$				5,6	505.97						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$				35,2	207.62						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)		\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$				48,0	00.00			•			
DADT I TANK I								CTIO			!"							
	s a Committee report, incl	-	_									_		f my knov	wledge	e an	d belief	, true
-	cribed before me this	;										Signature	of Perso	n Submitt	ina Re	noge	rt	
	day of		_ 20													•		
	Signatu	re											Prin	ted Name				
My Commission Ex	xpires								•				Ema	il				
	МО	D	AY	YR					_	Are	a Co	de	Daytin	e Teleph	one N	uml	ber	
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee,	Cand	lida	ate sha	II s	sign he	re.							
No 320) as amende		ny knowle	edge and beli	ief this	politic	al con	nmi	ttee has	s no	ot violat	ed ar	ny provis	ions of th	e act of J	une 3,:	193	7 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20									s	ignature	of Candida	ate			
			<u> </u>										Printe	d Name				
My Commission Exp	Signature ires					_ _			•				Ema	il				—
	мо	D	AY	YR						Area	Code		D	aytime To	elepho	ne l	Numbe	 r

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
Williams for Senate	From:	<u>5/7/201</u>	<u>9</u> To:	6/10/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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) Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	340.00
TOTAL for the Reporting) Period	(3)	\$	840.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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			\$	840.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Filing Committee of Candidate					Reporting Period From: To:				
					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 Candidate	Reporting Peri	od		
Williams for Senate	From:	<u>5/7/2019</u>	То:	6/10/2019

DATE AMOUNT

Full Name of Contributing Committee Malady & Description Management Management			МО	DAY	YEAR	
Mailing Address 604 N 3rd St						\$ 500.00
City Harrisburg	State PA	Zip Code (Plus 4) 171011114	5	20	2019	

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

PAGE TOTAL \$500.00

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			Repo	orting Pe	riod			
Williams for Senate			Fron	n:	<u>5/7/2</u>	<u>019</u> To	o: <u>6/</u>	10/2019
				D/	ATE		AMOUN	NT
Full Name of Contributor Daniel Veloric				МО	DAY	YEAR		
Mailing 10 Presidential Blvd S	Ste 215			5	20	2019	\$	340.00
City Bala Cynwyd	State PA	Zip Code (Plus 190041107	5 4)	5	20	2019		
Employer Name Veloric Asset Manager	ment LLC			Occupat	c ion	Chairma	n	
Employer Mailing Address/Principal Place Business	e of	City			State		Zip Code (Pl	us 4)
10 Presidential BlvdSte 215		Bala Cyn	wyd		PA		190041107	7
Enter Grand Total of Part C on Scheo	dule I, Detailed Su	ummary Page,	Section	on 3.			PAGE ¹	TOTAL 340.00

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			AMOUNT
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 I. Detailer	l Summary Page	Section	4				PAGE TOTAL
The state of the s	on concedere 1, betained	. Janimary rage,	50000011	••			\$	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		
Williams for Senate	From:	<u>5/7/2019</u> To:	6/10/2019
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:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	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

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reportii	ng Period			
Williams for Senate			From		7/2019	То:	6/10/2019
				DATE			AMOUNT
To Whom Paid Strassheim Graphic Design &	amp; Press Corp		мо	DAY	YEAR		
Mailing Address 1500 Sprii	ng Garden St Ste 225		5	9	2019	\$	1,076.24
City Philadelphia	State PA	Zip Code (Plus 4) 191304600	Descrip Printing	otion of Exp	enditure		
To Whom Paid VFW District 7			МО	DAY	YEAR		
Mailing Address 137 N 10t	h St		5	11	2019	\$	45.00
City Darby	State PA	Zip Code (Plus 4) 190231608		otion of Exp	enditure		
To Whom Paid AT&T			мо	DAY	YEAR		
Mailing Address 211 S Aka	rd St		5	16	2019	\$	90.60
City Dallas	State TX	Zip Code (Plus 4) 752024207	Descrip Cell Ph	otion of Exp	penditure	.	
To Whom Paid American Express			мо	DAY	YEAR		
Mailing Address PO Box 12	70		5	20	2019	\$	1,299.65
City Newark	State NJ	Zip Code (Plus 4) 071011270	1	otion of Exp e Campaign			
To Whom Paid South Philadelphia Lions Club			мо	DAY	YEAR		
Mailing Address 1109 Child	ds Ave		5	20	2019	\$	35.00

Zip Code (Plus 4)

190264004

Description of Expenditure

Advertisement

State

PΑ

City

Drexel Hill

						PAGI	- 12	
To Whom Paid Sultan Jihad Ahmad Community	Foundation		мо	DAY	YEAR			
Mailing Address 1901 W Oxfo	ord St		5	20	2019	\$	220.00	
City Philadelphia	State PA	Zip Code (Plus 4) 191213119	Descrip Tickets	tion of Exp	penditure			
To Whom Paid American Express			МО	DAY	YEAR			
Mailing Address PO Box 1270			5	22	2019	\$	600.00	
City Newark	State NJ	Zip Code (Plus 4) 071011270	1	scription of Expenditure tiple Campaign Expenses - reim.				
To Whom Paid US Post Office			МО	DAY	YEAR			
Mailing Address 63rd and Me	dia Sts.		5	31	2019	\$	3.20	
City Philadelphia	State PA	Zip Code (Plus 4) 19151	Description of Expenditure Postage					
To Whom Paid Compass Self Storage - Oregon Ave.			МО	DAY	YEAR			
Mailing Address 10 - 12 Oregon Ave			6	1	2019	\$	216.28	
City Philadelphia	State PA	Zip Code (Plus 4) 19148	Descrip Storage	otion of Exp e Fee	penditure			
To Whom Paid NGP VAN	•		МО	DAY	YEAR			
Mailing Address 1101 15th St NW Ste 500			6	1	2019	\$ \$	320.00	
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure Admin Support					
To Whom Paid Paula Wright	•		МО	DAY	YEAR			
Mailing Address 6113 Cobbs Creek Pkwy			6	7	2019	\$	1,700.00	
City Philadelphia	State PA	Zip Code (Plus 4) 191432908	1	otion of Exp es Rendere		Mar. 2019		
Enter Grand Total of Expendi	itures on Page 1 Pe	nort Cover Page Item D	_			PA	GE TOTAL	
Grand Total of Expendi	on i age 1, Re	port dotal i age, itelli D	•			\$	5,605.97	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate				Reporting Period				
Williams for Senate			From:		<u>5/7/2019</u>	То:		6/10/2019
					DATE			Outstanding Balance of Debt
Name of Creditor Chavous Consulting LLC					DAY	YEAR		
Mailing Address 100 S Broad St Ste 2220					28	2018	\$	24,000.00
City Philadelphia State Zip Code (Plus 4) Descrip						ot		
аас.ра	PA	· ·				- Servi	Rendered 2010 -	
					DATE			Outstanding Balance of Debt
Name of Creditor Chavous Consulting LLC				МО	DATE	YEAR		
	: Ste 2220			MO 5		YEAR 2019	\$	Balance of Debt
Chavous Consulting LLC Mailing Address 100 S Broad St	: Ste 2220	Zip Code (Plus	s 4)	5	DAY	2019	\$	Balance of Debt
Chavous Consulting LLC Mailing Address 100 S Broad St		Zip Code (Plu : 191101011	s 4)	5 Descrip	DAY 6	2019 ot	<u> </u>	24,000.00
Chavous Consulting LLC Mailing Address 100 S Broad St	State		s 4)	5 Descrip	DAY 6	2019 ot	<u> </u>	24,000.00
Chavous Consulting LLC Mailing Address 100 S Broad St	State PA	191101011		5 Description	DAY 6	2019 ot	<u> </u>	24,000.00 ay 2019