#### **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 201	90146			Repo		CA	NDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist:		JACQU	INTO,	CARI	1ELL	A CON	иміт	TEE TO	ELECT	_				
Street Address:	PO BOX 563	14															
City:	PHILADELPH	IA					State	e:	PA			Zip Cod	<b>ie:</b> 19	9130-6	314		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.	30 D PRIM	AY IARY	Р	POST-	3.		AMENDM REPORT		Yes	No		<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5. <b>X</b>		AY CTION	Р	OST-	6.		TERMINA REPORT		Yes	No		<b>\</b>
report type)	ANNUAL REPOR	Г 7.	<b>Year</b> 2019				FILING METHOD ( ) CHECK ONE					PAPER DISKETTE					
Name of Office S	ought by Candid	ate:					DAT	ΕO	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Coun	
							МО		DAY	YE	AR						•
								11		5	2019		(SEE IN	ISTRUCTI	ONS FOR C	CODES	)
•	Receipts and	МО	DAY Y	'EAR			МО	DAY YEAR FOR OFFICE USE ONLY						ONLY			
Expenditures	from:		6 11	20	019	ГО		10	7	21	2019						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$	5			9,3	305.37						
B. Total Monet	ary Contributions	And Rec	eipts (From S	Sche	dule I)	\$	\$			3,5	00.00						
C. Total Funds Available (Sum Of Lines A and B)							5			12,8	305.37						
D. Total Expenditures (From Schedule III)									7,7	70.76							
E. Ending Cash Balance (Subtract Line D From Line C)						9	5			5,0	34.61						
F. Value Of In-	Kind Contribution	ıs Receiv	ed (From Sch	edul	e II)	9	5	0.00									
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			9	5				0.00			1			
			,	AFF.	IDAV	IT SI	CTI	NC									
PART I - If this is	a Committee re	port, trea	surer sign he	ere. I	f this i	s a Ca	ndida	te re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, in	cluding the	attached sche	dules	filed o	ı paper	or by	electi	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue.
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Rep	oort		
	Signat	ure				_						Prin	ted Nam	e			
My Commission Ex	rpires					_		•				Ema	il				_
	МО	D	AY	YR					Are	ea Cod	e	Daytim	e Telepi	hone Nu	mber		
Part II- If this is	a report of a car	ididate's	authorized C	omm	ittee,	Candio	date si	hall :	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belief	this	politica	l comn	nittee l	nas no	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me thi	5	20								S	ignature o	of Candid	late			_
						_						Printe	d Name				-
My Commission Exp	Signature					_						Ema	il				-
,						_											₋┃
	МО	D.	AY	YR					Area	Code		D	aytime T	elephor	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period						
JACQUINTO, CARMELLA COMMITTEE TO ELECT	From:	6/11/201	<u>9</u> To:	10/21/2019				
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	(2)	\$	0.00					
3. Contributions Received Over \$250.00 (From Part C and Part D)								
Contributions Received From Political Committees (Part C)			\$	3,000.00				
All Other Contributions (Part D)			\$	500.00				
TOTAL for the Reporting	) Period	(3)	\$	3,500.00				
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			\$	3,500.00				

#### **PART A**

### CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporti				
			From:		То	:	
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		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	

## 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 Filling 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 Pe	eriod		
JACQUINTO, CARMELLA COMMITTEE TO ELECT	From:	6/11/2019	То:	10/21/2019

DATE AMOUNT

Full Name of Contributing Committee  Committee for a Better Tomorrow	МО	DAY	YEAR			
Mailing Address 128 S Broad st, suite 2200						\$ 3,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19109	10	1	2019	

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

**PAGE TOTAL** 3,000.00

### 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 of Candidate	кер	Reporting Period							
JACQUINTO, CARMELLA COMMITTEE	TO ELECT			Froi	m:	6/11/2	:019 To	019 <b>To:</b> 10/21/20	
					D	ATE		АМО	UNT
Full Name of Contributor					мо	DAY	YEAR		
James E Beasley									
Mailing 1125 Walnut Street				10 9		2010	\$	500.00	
<b>City</b> Philadelphia	State	Zi	p Code (Plus	<b>(4)</b>	] 10	9	2019	'	
	PA	19	9107						
Employer Name Self Employed		•			Occupat	tion /	Account	ant	
Employer Mailing Address/Principal Pla Business	ace of		City			State		Zip Code (	Plus 4)
1125 Walnut Street			Philadelp	hia		PA		19107	
Enter Grand Total of Part C on Sch	edule I, Deta	iled Sumn	nary Page,	Section	on 3.			PAG	E TOTAL
	,		, 3,					\$	500.00

## 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 Period							
			From:			To:				
				D	ATE		AM	OUNT		
Full Name				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (	Plus 4)							
Receipt Description	•	•		•	•	•	_			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL		
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	d								
JACQUINTO, CARMELLA COMMITTEE TO ELECT	From:	<u>6/11/2019</u> <b>To:</b>	10/21/2019							
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 PART 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						<b>\$</b>	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					
				Fro	om:		То:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	State	Zip Code(Plus 4)								
Employer of Contributor					Occupa	tion				
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (	Contributions De	etaile	ed				PAGE TOTAL 0.00	

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
JACQUINTO, CARMELLA COMMITTEE TO ELECT			From	<u>6/1</u>	1/2019	То:	10/21/2019
				DATE			AMOUNT
<b>To Whom Paid</b> Strassheim Graphic Design			мо	DAY	YEAR		
Mailing Address 1500 Spring Garden Street suite 225			10	6	2019	\$	30.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	Description of Expenditure ticket				
To Whom Paid Strassheim Graphic Design			МО	DAY	YEAR		
Mailing Address 1500 Spring Garden Street suite 225			10	5	2019	\$	30.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	Description of Expenditure Ticket				
<b>To Whom Paid</b> Strassheim Graphic Design			МО	DAY	YEAR		
Mailing Address 1500 Spring Garden Street suite 225			9	28	2019	\$	100.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	Description of Expenditure  Donation				
To Whom Paid Strassheim Graphic Design			мо	DAY	YEAR		
Mailing Address 1500 Spring Garden Street suite 225			10	4	2019	\$	7,610.76
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	Description of Expenditure Literature				
Enter Grand Total of Expendi							PAGE TOTAL

7,770.76