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 | 2019 | C0238 | | | | port ed B | | CAN | DII | DATE | \ | CO | MMITTEE | | LOBI | BYIST | |
|--|----------------------|--------------|-----------|----------------------|---------|--------|--------------|----------------|-----------------|-------|-----------|----------|-------------|---------------------|----------------|----------|-------------|----------------|
| Name of Filing C | ommitte | e, Candida | ate or Lo | obbyist: | | JEN | INIFE | R SC | HULTZ | | | | | | | | | |
| Street Address: | | | | | | | | | | | | | | | | | | |
| City: | | | | | | | | | State: | | | | | Zip Code | e: 19 | 128 | | |
| TYPE OF REPORT | 6TH TUES | | 1. | 2ND FRIDA PRIMARY | Y PRE | - | 2. | 30 DA PRIMA | | Р | OST- | 3. | | AMENDME REPORT? | NT | Yes | No | ~ |
| (place X to the right of | 6TH TUES | | 4. | 2ND FRIDATELECTION | Y PRE | ≣- | 5. | 30 DA | | Р | OST- | 6. 2 | x | TERMINAT REPORT? | ΓΙΟΝ | Yes | √ No | |
| report type) | ANNUAL | REPORT | 7. | Year 2019 | | | | | IG MET CHECK | | | | | PAPER | | / | DISKE | TTE |
| Name of Office S | ought by | , Candidat | :e: | • | | | | | DATE | OI | F ELEC | СТІ | ON | District Number | Office Code | Par | ty Code | County Code |
| | | | | | | | | | МО | | DAY | 1 | YEAR | 1 | СРЈ | DEN | 1 | couc |
| JUDGE OF THE | COURT (| OF COMM | ON PLE | AS | | | | | 1 | 11 | | 5 | 2019 | | (SEE INS | TRUCTI | ONS FOR C | ODES) |
| Summary of | | s and | МО | DAY | YEAR | ł | | | МО | | DAY | , | YEAR | FOF | ROFFIC | E USE | ONLY | |
| Expenditures | from: | | 1 | 10 22 | 2 | 019 | Т | 0 | : | 11 | 2 | 25 | 2019 | | | | | |
| A. Amount Bro | ught Forv | ward Fron | ı Last R | eport | | | | \$ | | | | | 0.00 | | | | | |
| B. Total Monet | ary Contr | ibutions A | And Rec | eipts (From | Sche | dule | e I) | \$ | | | | | 0.00 | | | | | |
| C. Total Funds | Available | (Sum Of | Lines A | and B) | | | | \$ | | | | | 0.00 | | | | | |
| D. Total Expend | ditures (I | From Sche | edule II | I) | | | | \$ | | | | 2 | ,892.36 | | | | | |
| E. Ending Cash | Balance | (Subtract | Line D | From Line (| C) | | | \$ | | | | | 0.00 | | | | | |
| F. Value Of In- | Kind Con | tributions | Receive | ed (From S | chedu | le I | I) | \$ | | | | | 0.00 | | | | | |
| G. Unpaid Debt | s And Ob | ligations | (From S | Schedule IV |) | | | \$ | | | | | 0.00 | | , | | | |
| | | | | | AFF | ID | AVI | T SE | CTIO | N | | | | | | | | |
| PART I - If this is | s a Comm | nittee repo | ort, trea | surer sign | here. | If th | nis is | a Car | ndidate | re | port, c | and | didate sig | ın here. | | | | |
| I swear (or affirm) correct and comple | | report, incl | uding the | attached scl | hedule | s file | d on | paper | or by ele | ectr | onic me | ediu | m, are to t | he best of | my knov | vledge | and belie | ef , true |
| Sworn to and subs | cribed before day of | ore me this | | 20 | | | | | | • | | | Signature | of Person | Submitt | ing Rep | ort | |
| | _ | Signatur | ·e | | | | | - - | | • | | | | Printe | ed Name | | | |
| My Commission Ex | cpires | - | | | | | | | | - | | | | Email | | | | |
| | | мо | D/ | AY | YR | | | | | | Are | ea C | ode | Daytime | Teleph | one Nu | mber | |
| Part II- If this is | a report | of a cand | lidate's | authorized | Comn | nitte | ee, C | andid | ate sha | ıll s | sign he | ere. | | | | | | |
| I swear (or affirm) No 320) as amende | | e best of m | ıy knowle | edge and beli | ef this | poli | itical | comm | ittee has | s no | ot violat | ted a | any provisi | ions of the | act of Ju | ıne 3,1 | 937 (P.L. | . 1333, |
| Sworn to and subsc | | re me this | | | | | | | | | | | Si | ignature of | Candida | ite | | |
| | day of — | | | | | | | - | | | | | | Printed | Name | | | |
| | | Signature | | | | | | - | | _ | | | | - miceu | | | | |
| My Commission Exp | | | | | | | | | | - | | | | Email | | | | |
| | _ | МО | D | AY | YR | ł | | - | | | Area | Cod | e | Day | time Te | elephon | e Numbe | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|-----------|---------------|------------|
| JENNIFER SCHULTZ | From: | 10/22/201 | <u>.9</u> To: | 11/25/2019 |
| 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) | | | \$ | 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 | | | \$ | 0.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | this Part to itemize onl with an aggregate value | | \$2 | 250.00 |) in the | | | | |
|------------------------|--|-------------------|------------------------|--------|----------|------|-----|------------|--|
| | | | Reporting Period From: | | | То | To: | | |
| | | | | | DATE | | | AMOUNT | |
| Full Name of Contribut | ing Committee | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | \$ | 0.00 | |
| City | State | Zip Code (Plus 4) |) | | | | | | |
| | ! | I | ! | | <u> </u> | | | DAGE 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 or Candid | ate | | Reporting Period From: To: | | | | | |
|------------------------------------|-------|-------------------|----------------------------|----|------|------|----------|-------|
| | | | | | DATE | | AN | 4OUNT |
| Full Name of Contributor | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ \$ | 0.00 |
| City | State | Zip Code (Plus 4) | 1 | | | | | |

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 | • | | | Rep | orting Pe | riod | | | |
|--|---------------|-----------|--------------|---------|-----------|-------|------|---------|-------------|
| | | | | Fror | n: | | То |): | |
| | | | | | D | ATE | | A | MOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | Zi | p Code (Plus | 4) | | | | | |
| Employer Name | • | • | | | Occupa | tion | | | |
| Employer Mailing Address/Principal Pla Business | ce of | | City | | | State | | Zip Cod | le (Plus 4) |
| Enter Grand Total of Part C on Sch | edule I, Deta | iled Sumr | mary Page, | Section | on 3. | | | P | O.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 | | A | 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 | d Summary Page | Section | 4 | | | P | AGE TOTAL |
| | 2, 200 0000 | | 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 Per | iod | |
|--|----------------|------------------------------|------------|
| JENNIFER SCHULTZ | From: | <u>10/22/2019</u> To: | 11/25/2019 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | PER CONTRIBUTO | R | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR | TF) | | |
| 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 Candid | ate | | Reportin | g Period | | | |
|------------------------------------|--------------------|-----------------------|----------|-----------|------|-----------|------------|
| | | | From: | | | To: | |
| | | | | 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 S | 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 F | 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 | taile | ed | | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Car | ndidate | | Reporti | ng Period | | | | | |
|--|---|-----------------------------------|---------|--------------|--|-----|------------|--|--|
| JENNIFER SCHULTZ | | | From | 10/2 | 2/2019 | То: | 11/25/2019 | | |
| | | | | DATE | | | AMOUNT | | |
| To Whom Paid USPS | | | мо | DAY | YEAR | | | | |
| Mailing Address RIDGE AVEN | UE | | 10 | 24 | 2019 | \$ | 14.70 | | |
| City PHILADELPHIA | ADELPHIA State Zip Code (Plus 4) PA 19128 | | | | Description of Expenditure MAILING CAMPAIGN REPORT | | | | |
| To Whom Paid ASHBURNER INN | | | мо | DAY | YEAR | | | | |
| Mailing Address 8400 TORRES | SDALE AVE | | 10 | 23 | 2019 | \$ | 34.20 | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19136 | | otion of Exp | | JE | | | |
| To Whom Paid MORINA CAFE | • | | мо | DAY | YEAR | | | | |
| Mailing Address 7201 GERMA | NTOWN AVE | | 10 | 26 | 2019 | \$ | 11.45 | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19119 | | otion of Exp | | | | | |
| To Whom Paid MARIA'S RISTORANTE ON SUMM | IIT | | МО | DAY | YEAR | | | | |
| Mailing Address 8100 RIDGE | AVE. | | 11 | 5 | 2019 | \$ | 2,600.00 | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19128 | | otion of Exp | | | | | |
| To Whom Paid DOLLAR TREE | | | МО | DAY | YEAR | | | | |
| Mailing Address 8500 HENRY | AVE | | 10 | 28 | 2019 | \$ | 6.48 | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |

19128

PA

EDAY PARTY DOECORATIONS

| | | | | | | | L 12 |
|---|-------|-------------------|---|-------------|---------------|----|-----------|
| To Whom Paid SANTUCCI'S | | | мо | DAY | YEAR | | |
| Mailing Address 665 N. BROAD ST. | | | 10 | 31 | 2019 | \$ | 72.00 |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Ex | l enditure | | |
| PHILADELPHIA | РА | 19123 | Description of Expenditure DINNER MTG W/ DENNIS MONTAGUE | | | | |
| To Whom Paid GREEN EGGS CAFE | | | МО | DAY | YEAR | | |
| Mailing Address 719 N. 2ND ST. | | | 11 | 2 | 2019 | \$ | 50.00 |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | l enditure | | |
| ITILADELITIA | PA | 19123 | LUNCH MTG W/ DENNIS MONTAGUE | | | | |
| To Whom Paid FROZEN | | | мо | DAY | YEAR | | |
| Mailing Address 938 ARCH ST | | | 10 | 31 | 2019 | \$ | 14.00 |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 19107 | MTG W/ DENNIS MONTAGUE | | | | |
| To Whom Paid DOLLAR TREE STORES | | | МО | DAY | YEAR | | |
| Mailing Address 8500 HENRY AVENUE | | | 11 | 2 | 2019 | \$ | 7.00 |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 19128 | EDAY PARTY DOECORATIONS | | | | |
| To Whom Paid SAIGE | | | МО | DAY | YEAR | | |
| Mailing Address 1802 N. WARNOCK ST. | | | 11 | 3 | 2019 | \$ | 25.01 |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Ext | enditure | | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | PA | 19122 | Description of Expenditure MTG W/ DENNIS MONTAGUE | | | | |
| To Whom Paid WINNIES LE BUS | | | МО | DAY | YEAR | | |
| Mailing Address 4266 MAIN STREET | | | 11 | 4 | 2019 | \$ | 57.52 |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| THEADELINA | PA | 19127 | FIELD WORK LUNCH W/ R. MILLER | | | | |
| | | | | | | P/ | AGE TOTAL |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | \$ | 2,892.36 |