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 91000	099			Repor		CAI	NDI	DATE		COM	AITTEE	✓ [LOB	BYIST			
Name of Filing C	ommittee, Candida	ate or L	obbyist:	Ī	RACE S	STREE	T PAC											
Street Address:	1301 N. 31ST	STREE	Γ				_											
City:	PHILADELPHIA	A					State	:	PA			Zip Code: 19121						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 DA		P	POST-	AMENDMENT Yes REPORT?								
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		P	POST-	6.		TERMINA REPORT		Yes	No	~		
report type)	ANNUAL REPORT	7.	Year 2019				NG ME					PAPER		V	DISKE	TTE		
Name of Office S	ought by Candidat	e:			<u>.</u>		DAT	ΕO	F ELE	СТІС	ON	District Number	Office Code	Pai	rty Code	County Code		
							МО		DAY		EAR		•	DEI		51		
		МО	DAY	VEAD			110	11	 	5	2019		<u></u>		ONS FOR O	ODES)		
Summary of Expenditures		МО	DAY 4 2	YEAR		го	МО	5	DAY	6	EAR 2019	FC	R OFFIC	CE USE	ONLY			
A. Amount Bro	ught Forward From	Last R				\$			<u> </u>		384.43							
B. Total Moneta	ary Contributions A	and Rec	eipts (Fron	n Sched	dule I)	\$					00.00	-						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$;			26,3	384.43							
D. Total Expend	ditures (From Sche	dule II	I)			\$,			8,5	500.00							
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				17,8	384.43]						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)	\$					0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$	}			30,0	00.00			•				
				AFF:	IDAV:	IT SE	CTIC	N										
PART I - If this is	a Committee repo	ort, trea	surer sign	here. I	f this i	s a Ca	ndidat	e re	eport, c	andi	date sig	jn here.						
I swear (or affirm) correct and comple	that this report, incluete.	uding the	attached sc	hedules	filed or	paper	or by e	lecti	ronic m	edium	, are to t	the best o	f my knov	vledge	and belie	ef , true		
Sworn to and subs	cribed before me this day of		20							5	Signature	of Perso	n Submitt	ing Re	port			
	Signatur	·e				_						Prin	ted Name	1				
My Commission Ex	·					_		•				Ema	il					
	МО	D	AY	YR				_	Are	ea Coo	de	Daytim	e Teleph	one Nu	mber			
Part II- If this is	a report of a cand	idate's	authorized	Comm	ittee, (Candid	late sh	nall :	sign he	ere.								
No 320) as amende		y knowle	edge and beli	ief this	political	comm	ittee h	as n	ot viola	ted ar	ny provis	ions of th	e act of Ju	ıne 3,1	937 (P.L	. 1333,		
Sworn to and subsc	ribed before me this day of		20								s	ignature (of Candida	ate				
						_						Printe	d Name					
My Commission Exp	Signature ires							,				Ema	il			-		
	мо	D	AY	YR		_			Area	Code		D	aytime Te	elephor	ne Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	J Period		
RACE STREET PAC	From:	4/2/201	<u>9</u> To:	5/6/2019
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)			\$	9,000.00
TOTAL for the Reporting	Period	(3)	\$	9,000.00
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			\$	9,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		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 Filling Committee of Candidate				Reporting Period From: To:				
			l		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	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary 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				Repo	orting Pe	riod			
RACE STREET PAC				Fron	n:	<u>4/2/2</u>	019 To	:	<u>5/6/2019</u>
					D/	ATE		AN	MOUNT
Full Name of Contributor RICHARD K. BARNHART					МО	DAY	YEAR		
Mailing 40 EVANS LANE Address					_			\$	9,000.00
City HAVERFORD	State PA		p Code (Plus 9041	s 4)	4	22	2019		
Employer Name PENNROSE PROPERT	IES	<u> </u>			Occupat	ion		1	
Employer Mailing Address/Principal Plac Business	ce of		City			State		Zip Cod	e (Plus 4)
1301 N. 31ST STREET			PHILADE	LPHIA		PA		19121	
Enter Grand Total of Part C on Sche	dule I, Detailed s	Sumn	mary Page,	Section	on 3.			P/	AGE TOTAL 9,000.00

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 Period	i	
RACE STREET PAC	From:	<u>4/2/2019</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	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			
			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 Scheo	dule II. In-Kind Co	ontributions Deta	iled Sum	mary Pag	ıe. F		PAGE TOTAL
Section 2.			incu buin	a. y . ag	,,,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period			
RACE STREET PAC			From	<u>4/2</u>	2/2019	То:	5/6/2019
				DATE			AMOUNT
To Whom Paid CHESCO FORWARD			МО	DAY	YEAR		
Mailing Address 707 FOLLY HILL ROAD				12	2019	\$	500.00
City KENNETT SQUARE PA 2ip Code (Plus 4) 19348			1	otion of Exp	enditure		
To Whom Paid FRIENDS OF DARRELL CLARKE			МО	DAY	YEAR		
Mailing Address 2839 W. GIRA	ARD AVE.		4	19	2019	\$	5,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130		otion of Exp	enditure	•	
To Whom Paid KENNY FOR PHILADELPHIA			МО	DAY	YEAR		
Mailing Address PO BOX 60065				19	2019	\$	3,000.00
City PHILADELPHIA PA Zip Code (Plus 4) 19102				otion of Exp	enditure		
	I	<u> </u>	-				PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

8,500.00

SCHEDULE IV 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		ng Period							
RACE STREET PAC				From:		4/2/2019	То:		5/6/2019
						DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY					МО	DAY	YEAR		
Mailing Address	354 DARLING ROA	D			4	4	2014	\$	5,000.00
City MEDIA		State Zip Code (Plus 4) PA 19063		Description of Debt LOAN TO COMMITTEE					
						DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY					МО	DAY	YEAR		
Mailing Address 354 DARLING ROAD				10	26	2017	\$	2,500.00	
City MEDIA		State PA	Zip Code (Pl 19063	ıs 4)	Description of Debt LOAN TO COMMITTEE				
						DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY					МО	DAY	YEAR		
Mailing Address	354 DARLING ROA	D			7	1	2016	\$	5,000.00
City MEDIA		State PA	Zip Code (Pl 19063	us 4)	Description of Debt LOAN TO COMMITTEE				
						DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY					МО	DAY	YEAR		
Mailing Address 354 DARLING ROAD			4	20	2016	\$	5,000.00		
City MEDIA		State PA	Zip Code (Pl	us 4)		otion of Del			

				DATE			Outstanding Balance of Debt		
Name of Creditor RICHARD K. BARNHART	МО	DAY	YEAR						
Mailing Address 40 EVANS LANE				26	2017	\$	2,500.00		
City HAVERFORD	State PA	Zip Code (Plus 4) 19041	Description of Debt LOAN TO COMMITTEE						
				DATE			Outstanding Balance of Debt		
Name of Creditor RICHARD K. BARNHART			МО	DAY	YEAR				
Mailing Address 40 EVANS	LANE		7	1	2016	\$	5,000.00		
City HAVERFORD	ERFORD State Zip Code (Plus 4) PA 19041			Description of Debt LOAN TO COMMITTEE					
							Outstanding Balance of Debt		
Name of Creditor RICHARD K. BARNHART				DAY	YEAR				
Mailing Address 40 EVANS	4	4	2014	\$	5,000.00				
City HAVERFORD	State PA	Zip Code (Plus 4) 19041	Description of Debt CONTRIBUTION						
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL 30,000.00		