#### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Name of Filing Co					LII	ed B	y :						·			
Name of Filing Committee, Candidate or Lobbyist: RACE STREET PAC																
Street Address:	1301 N. 31ST	STREE	Γ													
City:	ity: PHILADELPHIA State:									PA <b>Zip Code:</b> 19121						
	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	ND FRIDAY PRE- 2. RIMARY				Y F ARY	POST-	OST- 3.		AMENDMENT REPORT?		Yes	No	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pre	≣-	5. <b>X</b>	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	<b>~</b>
	ANNUAL REPORT	7.	<b>Year</b> 2019					IG METHO				PAPER		<b>\</b>	DISKE	TTE
Name of Office So	ought by Candidat	te:	-					DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR		10000	DEN	1	51
								11		5	2019		(SEE IN	STRUCTI	ONS FOR (	CODES)
Summary of R		МО	DAY	YEAR	ł			мо	DAY	YE	AR	FO	R OFFIC	E USE	ONLY	
Expenditures	from:		9 17	2	019	T	0	10	:	21	2019					
A. Amount Brou	ght Forward Fron	n Last R	eport			·	\$			2,8	34.43					
B. Total Moneta	ry Contributions A	And Rec	eipts (From	Sche	dule	e I)	\$			25,0	00.00					
C. Total Funds A	Available (Sum Of	Lines A	and B)				\$			27,8	34.43					
D. Total Expend	itures (From Sche	edule II	I)				\$			16,7	50.00					
E. Ending Cash I	Balance (Subtract	Line D	From Line	C)			\$			11,0	84.43					
F. Value Of In-K	(ind Contributions	Receive	ed (From S	chedu	le II	I)	\$				0.00					
G. Unpaid Debts	And Obligations	(From S	Schedule IV	)			\$			30,0	00.00					
								CTION								
PART I - If this is I swear (or affirm)	•	•	-						•				f my knov	vledae	and beli	ef . true
correct and complet		_					•	•					•			
Sworn to and subsc	ribed before me this day of		20							s	ignature	of Persoi	n Submitt	ing Rep	oort	
	Signatu	re	<u></u>				_					Print	ted Name	1		
My Commission Exp	pires						_					Emai	I			
	МО	D/	AY	YR					Are	ea Cod	е	Daytim	e Teleph	one Nu	mber	
Part II- If this is a	report of a cand	lidate's	authorized	Comn	nitte	ee, Ca	andida	ate shall	sign he	ere.						
I swear (or affirm) t No 320) as amended		ny knowle	edge and beli	ef this	poli	itical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of Ju	ıne 3,1	937 (P.L	. 1333,
Sworn to and subscri											Si	ignature o	f Candida	ite		
	day of — ————						-		Printed Name							_
My Commission Expir	Signature						-					Emai	il			
	мо	D/	AY	YR	<u> </u>				Area	Code		Da	ytime To	elephor	ie Numb	 er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
RACE STREET PAC	From:	9/17/201	<u>9</u> To:	10/21/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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)			\$	25,000.00
TOTAL for the Reporting	Period	(3)	\$	25,000.00
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			\$	25,000.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2		) in the			
Name of Filing Committee or Candidate				From:			:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>!</b>	<b>I</b>	!		<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 Candida	ite		Rep	oorting P	eriod				
					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	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	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				orting Pe	riod				
RACE STREET PAC			Fror	n:	9/17/2	<u>019</u> To	To: <u>10/21/2019</u>		
				D/	ATE		АМ	IOUNT	
Full Name of Contributor ALLEN J. CHAPMAN				мо	DAY	YEAR			
Mailing 3415 INDEPENDENCE	DRIVE						\$	25,000.00	
City BIRMINGHAM	State AL	Zip Code (Plus 35209	s 4)	9	24	2019			
Employer Name CAPSTONE BUILDING	CORP.			Occupat	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)	
3415 INDEPENDENCE DRIVE		BIRMING	SHAM		AL		35209		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			P <i>A</i>	25,000.00	

## 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	••			\$	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 Perio	d	
RACE STREET PAC	From:	<u>9/17/2019</u> <b>To:</b>	<u>10/21/2019</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 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			
					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

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reporti	ng Period			
RACE STREET PAC			From	9/1	7/2019	То:	10/21/2019
				DATE			AMOUNT
<b>To Whom Paid</b> BETH NAUGHTON BECK FOR JU	JDGE		мо	DAY	YEAR		
Mailing Address 323 WEST F	FRONT STREET		9	26	2019	\$	1,000.00
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
PA 19063				IBUTION			
To Whom Paid BUCKS COUNTY REPUBLICAN O	МО	DAY	YEAR				
Mailing Address 115 N. BRO	Mailing Address 115 N. BROAD STREET				2019	\$	5,000.00
City DOYLESTOWN	Descrip	tion of Exp	enditure	<u> </u>			
	PA	18901		IBUTION			
To Whom Paid CHESCO FORWARD			мо	DAY	YEAR		
Mailing Address 1533 JOHNI	NY'S WAY		9	26	2019	\$	1,000.00
City WEST CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
	PA	19382	_	IBUTION			
To Whom Paid CHESCO FORWARD			МО	DAY	YEAR		
Mailing Address 609 LINDA	VISTA AVENUE		10	16	2019	\$	500.00
City JENKINTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 19046				IBUTION			
To Whom Paid DELAWARE COUNTY REPUBLIC	CAN FINANCE COMMITT	EE	МО	DAY	YEAR		
Mailing Address 323 WEST FRONT STREET			9	26	2019	\$	2,000.00
City MEDIA	State	Zip Code (Plus 4)	Descrin	tion of Exp	enditure	l .	
HEDIA							

19063

CONTRIBUTION

PA

To Whom Paid FRIENDS OF PETER SCHWEYER			мо	DAY	YEAR		
Mailing Address P.O. BOX 11466			10	18	2019	\$	250.00
City HARRISBURG	State PA	<b>Zip Code (Plus 4)</b> 17108	Description of Expenditure CONTRIBUTION				
To Whom Paid MIDDLETOWN TOWNSHIP REPUBLICAN COMMITTEE			МО	DAY	YEAR		
Mailing Address PO BOX 445			9	26	2019	\$	2,000.00
City LIMA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19037	Description of Expenditure CONTRIBUTION				
To Whom Paid MONTCO VICTORY			МО	DAY	YEAR		
Mailing Address 21 E. AIRY STREET			10	3	2019	\$	5,000.00
City NORRISTOWN	State PA	<b>Zip Code (Plus 4)</b> 19401	Description of Expenditure CONTRIBUTION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	<b>PAGE TOTAL</b> 16,750.00

## 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:	<u>9</u>	)/17/201 <u>9</u>	То:	1	0/21/2019
						DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY			мо	DAY	YEAR				
Mailing Address 354 DARLING ROAD			4	4	2014	\$	5,000.00		
City MEDIA		State Zip Code (Plus 4) PA 19063			Description of Debt LOAN TO COMMITTEE				
					Outstanding DATE Balance of De				
Name of Creditor  MARK H. DAMBLY  Mailing Address			МО	DAY	YEAR				
Mailing Address 354 DARLING ROAD			4	20	2016	\$	5,000.00		
City MEDIA		<b>State</b> PA	Zip Code (Plu 19063	ıs 4)	Description of Debt LOAN TO COMMITTEE				
				Outstanding DATE Balance of Debt					
Name of Creditor MARK H. DAMBLY			МО	DAY	YEAR				
Mailing Address 354 DARLING ROAD			7	1	2016	\$	5,000.00		
City MEDIA		<b>State</b> PA	<b>Zip Code (Plu</b> 19063	ıs 4)	Description of Debt LOAN TO COMMITTEE				
			Outstanding DATE Balance of D						
Name of Creditor MARK H. DAMBLY					МО	DAY	YEAR		
Mailing Address 354 DARLING ROAD			10	26	2017	\$	2,500.00		
City MEDIA		<b>State</b> PA	Zip Code (Plu 19063	ıs 4)		otion of Del			

		DATE					Outstanding Balance of Debt	
Name of Creditor RICHARD K. BARNHART			мо	DAY	YEAR			
Mailing Address 40 EVANS LANE			4	4	2014	<b>*</b>	5,000.00	
City HAVERFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 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 L	ANE		7	1	2016	<b>,</b>	5,000.00	
City HAVERFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 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			10	26	2017	-     \$	2,500.00	
City HAVERFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19041	Description of Debt LOAN TO COMMITTEE					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	<b>PAGE TOTAL</b> 30,000.00	