### **Campaign Finance Report**

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

| Filer Identificati<br>Number :            | on 201                         | 90396       |                          |      | Rep<br>File |             |                | CAND               | DATE      |        | СОМ        | <b>4ITTEE</b>      | ✓              | LOBE         | SYIST     |                |
|---|--------------------------------|-------------|--------------------------|------|-------------|-------------|----------------|--------------------|-----------|--------|------------|--------------------|----------------|--------------|-----------|----------------|
| Name of Filing C                          | Committee, Candi               | date or L   | obbyist:                 | F    | FRIE        | ND:         | S OF           | THERES             | A BRUN    | ISON   |            |                    | <u>-</u>       |              |           |                |
| Street Address:                           | 8510 PROVI                     | DENT ST     | REET                     |      |             |             |                |                    |           |        |            |                    |                |              |           |                |
| City:                                     | PHILADELPH                     | IA          |                          |      |             |             |                | State:             | PA        |        |            | Zip Cod            | le: 19         | 9150         |           |                |
| TYPE OF<br>REPORT                         | 6TH TUESDAY<br>PRE-PRIMARY     | 1.          | 2ND FRIDAY P<br>PRIMARY  | RE-  | 2           | 2. <b>X</b> | 30 DA<br>PRIMA |                    | POST-     | 3.     |            | AMENDM<br>REPORT   |                | Yes          | No        |                |
| (place X to<br>the right of               | 6TH TUESDAY<br>PRE-ELECTION    | 4.          | 2ND FRIDAY F<br>ELECTION | PRE- | - 5         | 5.          | 30 DA<br>ELECT |                    | POST-     | 6.     |            | TERMINA<br>REPORT  |                | Yes          | No        | <b>~</b>       |
| report type)                              | ANNUAL REPOR                   | 7.          | <b>Year</b> 2019         |      |             |             |                | IG METH<br>CHECK O |           |        |            | PAPER              |                | $\checkmark$ | DISKE     | TTE            |
| Name of Office S                          | Sought by Candid               | ate:        | •                        |      |             |             |                | DATE C             | )F ELE    | СТІО   | N          | District<br>Number | Office<br>Code | Par          | ty Code   | County<br>Code |
|   |                                |             |                          |      |             |             |                | МО                 | DAY       | YE     | AR         |                    | 10000          | DEM          | <b>!</b>  | -              |
|   |                                |             |                          |      |             |             |                | 11                 |           | 5      | 2019       |                    | (SEE IN        | STRUCTIO     | ONS FOR C | ODES)          |
|   | Receipts and                   | МО          | DAY YE                   | AR   |             |             |                | МО                 | DAY       | YE     | AR         | FO                 | R OFFI         | CE USE       | ONLY      |                |
| Expenditures                              | irom:                          |             | 4 2                      | 20   | )19         | Т           | 0              | 5                  | 5         | 6      | 2019       |                    |                |              |           |                |
| A. Amount Bro                             | ught Forward Fro               | m Last R    | eport                    |      |             |             | \$             |                    |           | 3,0    | 06.68      |                    |                |              |           |                |
| B. Total Monet                            | ary Contributions              | And Rec     | eipts (From Sc           | hec  | dule        | I)          | \$             |                    |           | 2,7    | 770.47     |                    |                |              |           |                |
| C. Total Funds                            | Available (Sum C               | f Lines A   | and B)                   |      |             |             | \$             |                    |           |        |            |                    |                |              |           |                |
| D. Total Expen                            | ditures (From Sc               | nedule II   | I)                       |      |             |             | \$             | <u> </u>           |           |        |            |                    |                |              |           |                |
| E. Ending Cash                            | Balance (Subtra                | ct Line D   | From Line C)             |      |             |             | \$             | •                  |           |        |            |                    |                |              |           |                |
| F. Value Of In-                           | Kind Contribution              | s Receiv    | ed (From Sche            | dul  | e II)       | )           | \$             |                    |           |        | 0.00       |                    |                |              |           |                |
| G. Unpaid Debt                            | ts And Obligation              | s (From S   | Schedule IV)             |      |             |             | \$             |                    |           |        | 0.00       |                    |                | ,            |           |                |
|   |                                |             | А                        | FF)  | IDA         | VI          | T SE           | CTION              |           |        |            |                    |                |              |           |                |
| PART I - If this is                       |                                | •           | _                        |      |             |             |                |                    | -         |        |            |                    |                |              |           |                |
| I swear (or affirm)<br>correct and comple | ) that this report, in<br>ete. | cluding the | e attached schedi        | ules | filed       | l on        | paper (        | or by elect        | tronic m  | edium  | , are to t | he best o          | f my kno       | wledge a     | and belie | ef , true      |
| Sworn to and subs                         | cribed before me th<br>day of  | is          | 20                       |      |             |             |                |                    |           | S      | ignature   | of Perso           | n Submit       | ting Rep     | ort       |                |
|   |                                |             |                          |      |             |             | -<br>-         |                    |           |        |            | Prin               | ted Name       | •            |           |                |
| My Commission Ex                          | Signat<br>opires               | ure         |                          |      |             |             |                |                    |           |        |            | Ema                | il             |              |           |                |
|   | мо                             | D           | AY                       | YR   |             |             | _              |                    | Ar        | ea Cod | e          | Daytim             | e Teleph       | none Nui     | mber      | _              |
| Part II- If this is                       | a report of a car              | didate's    | authorized Co            | mm   | ittee       | e, C        | andida         | ate shall          | sign h    | ere.   |            |                    |                |              |           |                |
| I swear (or affirm)<br>No 320) as amende  | that to the best of<br>ed.     | my knowl    | edge and belief t        | :his | politi      | ical        | commi          | ittee has r        | not viola | ted an | y provis   | ions of th         | e act of J     | une 3,19     | 937 (P.L. | 1333,          |
| Sworn to and subsc                        | ribed before me this           | i           |                          |      |             |             |                |                    |           |        | s          | ignature o         | of Candid      | ate          |           |                |
| -   | day of<br>—— ————              |             |                          |      |             |             | -              |                    |           |        |            | Drinto             | d Name         |              |           |                |
|   | Signature                      |             |                          |      |             |             | -              |                    |           |        |            |                    |                |              |           |                |
| My Commission Exp                         | _                              |             |                          |      |             |             |                |                    |           |        |            | Ema                | il             |              |           |                |
|   | МО                             | D           | AY                       | YR   |             |             | -              |                    | Area      | Code   |            | Da                 | ytime T        | elephon      | e Numbe   | er             |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period |              |          |
|--|-----------|----------|--------------|----------|
| FRIENDS OF THERESA BRUNSON   | 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  | g Period  | (1)      | \$           | 256.47   |
| 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)   |           |          | \$           | 450.00   |
| TOTAL for the Reporting  | y Period  | (2)      | \$           | 450.00   |
| 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)   |           |          | \$           | 1,250.00 |
| TOTAL for the Reporting  | J Period  | (3)      | \$           | 1,250.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |          |              |          |
| TOTAL for the Reporting  | j Period  | (4)      | \$           | 239.00   |
|  |           |          |              |          |
| 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 |           |          | \$           | 2,195.47 |

#### **PART A**

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

\$50.01 TO \$250.00

|                           | his Part to itemize onl<br>with an aggregate val | -                 |     |         | -      |      |    |            |
|---------------------------|--|-------------------|-----|---------|--------|------|----|------------|
| Name of Filing Comm       | ittee or Candidate                               |                   | Re  | porting | Period |      |    |            |
|                           |  |                   | Fre | om:     |        | То   | :  |            |
|                           |  | 1                 |     |         | DATE   |      |    | AMOUNT     |
| Full Name of Contribution | ng Committee                                     |                   |     | МО      | DAY    | YEAR |    |            |
| Mailing Address           |  |                   |     |         |        |      | \$ | 0.00       |
| City                      | State  | Zip Code (Plus 4) | )   |         |        |      |    |            |
|                           | •  | •                 |     |         | •      | •    |    | PAGE 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 Candidate  | Name of Filing Committee or Candidate |                                   |     |    |              |         |            |          |
|--|---------------------------------------|-----------------------------------|-----|----|--------------|---------|------------|----------|
| FRIENDS OF THERESA BRUNSON             |                                       |                                   | Fro | m: | <u>4/2/2</u> | 2019 To | <b>)</b> : | 5/6/2019 |
|  |                                       |                                   |     |    | DATE         |         |            | AMOUNT   |
| Full Name of Contributor CRYSTAL LEARY |                                       |                                   |     | МО | DAY          | YEAR    |            |          |
| Mailing Address 8510 PROVIDENT S       | TREET                                 |                                   |     |    |              |         | \$         | 25.00    |
| City PHILADELPHIA                      | <b>State</b><br>PA                    | <b>Zip Code (Plus 4)</b><br>19150 |     | 4  | 11           | 2019    |            |          |
| Full Name of Contributor CRYSTAL LEARY |                                       |                                   |     | МО | DAY          | YEAR    |            |          |
| Mailing Address 8510 PROVIDENT S       | TREET                                 |                                   |     |    |              |         | \$         | 25.00    |
| City PHILADELPHIA                      | <b>State</b><br>PA                    | <b>Zip Code (Plus 4)</b><br>19150 |     | 4  | 11           | 2019    |            |          |
| Full Name of Contributor CRYSTAL LEARY |                                       |                                   |     | МО | DAY          | YEAR    |            |          |
| Mailing Address 8510 PROVIDENT S       | TREET                                 |                                   |     |    |              |         | \$         | 25.00    |
| City PHILADELPHIA                      | <b>State</b><br>PA                    | <b>Zip Code (Plus 4)</b><br>19150 |     | 4  | 11           | 2019    |            |          |
| Full Name of Contributor CRYSTAL LEARY |                                       |                                   |     | МО | DAY          | YEAR    |            |          |
| Mailing Address 8510 PROVIDENT S       |                                       |                                   |     | 4  | 11           | 2019    | \$         | 25.00    |
| <b>City</b> PHILADELPHIA               | <b>State</b><br>PA                    | <b>Zip Code (Plus 4)</b><br>19150 |     |    |              | 2023    |            |          |
| Full Name of Contributor CRYSTAL LEARY |                                       |                                   |     | МО | DAY          | YEAR    |            |          |
| Mailing Address 8510 PROVIDENT S       | TREET                                 |                                   |     |    |              |         | \$         | 25.00    |
| City PHILADELPHIA                      | <b>State</b><br>PA                    | <b>Zip Code (Plus 4)</b><br>19150 |     | 4  | 11           | 2019    |            |          |

| Mailing Address   S510 PROVIDENT STREET   State   Zip Code (Plus 4)   11   2019  | CRYSTAL LEARY  Mailing Address 8510 PROVIDENT STREET  State Zip Code (Plus 4) 4 11 2019  | 25.00 |
|--|--|-------|
| Mailing Address   S510 PROVIDENT STREET   State   S10 PROVIDENT STREET   S10 PROVIDENT ST | CRYSTAL LEARY  Mo DAY YEAR  Mailing Address 8510 PROVIDENT STREET  City PHILADELPHIA State Zip Code (Plus 4)  4 11 2019  | 25.00 |
| State   Full Name of Contributor   IRIS BRUNSON   MO   DAY   VEAR   MO   DAY   VEA | City PHILADELPHIA State Zip Code (Plus 4) 4 11 2019  | 25.00 |
| Full Name of Contributor   IRIS BRUNSON  | City PHILADELPHIA State Zip Code (Plus 4)  |       |
| PA   |  |       |
| No   |  |       |
| State   PA   | Full Name of Contributor IRIS BRUNSON  MO DAY YEAR   |       |
| FUIL Name of Contributor IRIS BRUNSON  Mailing Address XXXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  MO DAY YEAR  State PA 19126  MO DAY YEAR  13 2019  \$ 25.00  FUIL Name of Contributor IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  MO DAY YEAR  \$ 25.00  FUIL Name of Contributor IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State Zip Code (Plus 4) 13 2019  FUIL Name of Contributor MARCIA JORDAN  Mailing Address 4229 DISSTON STREET  City PHILADELPHIA  State Zip Code (Plus 4) 13 2019  FUIL Name of Contributor MARCIA JORDAN  Mailing Address 4229 DISSTON STREET  City PHILADELPHIA  State Zip Code (Plus 4) 13 2019  FUIL Name of Contributor MARCIA JORDAN  Mo DAY YEAR  \$ 50.00  FUIL Name of Contributor MARCIA JORDAN  Mo DAY YEAR  \$ 50.00   | Mailing Address XXXX 72ND AVENUE \$  | 25.00 |
| PA   |  |       |
| Mailing Address   XXXX 72ND AVENUE   XXXX 72ND AV |  |       |
| State   PA   | Full Name of Contributor IRIS BRUNSON  MO DAY YEAR   |       |
| Full Name of Contributor Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  Titl Serunson  Mo DAY YEAR  25.00  Titl Name of Contributor Marcia Jordan  Mo DAY YEAR  State PA 19126  Mo DAY YEAR  4 13 2019  \$ 25.00  Full Name of Contributor Marcia Jordan  Mo DAY YEAR  A 13 2019  \$ 25.00  Titl Name of Contributor Marcia Jordan  Mo DAY YEAR  A 13 2019  \$ 3.00  Titl Name of Contributor Marcia Jordan  Mo DAY YEAR  A 13 2019  \$ 5.00  Titl Name of Contributor Marcia Jordan  Mo DAY YEAR  A 13 2019  \$ 5.000  Titl Name of Contributor Marcia Jordan  Mo DAY YEAR  A 13 2019  \$ 5.000  Titl Name of Contributor Marcia Jordan  Mo DAY YEAR  A 13 2019  \$ 5.000   | Mailing Address XXXX 72ND AVENUE \$  | 25.00 |
| Full Name of Contributor IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA State PA 19126  City PHILADELPHIA State PA 19126  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  4 13 2019  \$ 25.00  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  4 13 2019  \$ 25.00  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  4 13 2019  \$ 5.00  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  4 13 2019  \$ 5.00  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  4 13 2019  \$ 5.000  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  4 13 2019  \$ 5.000  |  |       |
| Mo   |  |       |
| City   PHILADELPHIA   State   PA   19126   PA   13   2019   \$ 25.00   |  |       |
| Full Name of Contributor   MARCIA JORDAN   State   PA  | Full Name of Contributor IRIS BRUNSON  MO DAY YEAR   |       |
| PA   | IRIS BRUNSON  MO DAY YEAR  Mailing Address YYYY 72ND AVENUE  | 25.00 |
| MARCIA JORDAN  Mo DAY YEAR  Mailing Address 4229 DISSTON STREET  City PHILADELPHIA State PA 19120  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  \$ 25.00  Full Name of Contributor MARCIA JORDAN  Full Name of Contributor MARCIA JORDAN  State Zip Code (Plus 4) 4 13 2019  \$ 50.00  | IRIS BRUNSON  Mo DAY YEAR  Mailing Address XXXX 72ND AVENUE  \$ 13 2019  | 25.00 |
| State   Zip Code (Plus 4)   13   2019     25.00  | IRIS BRUNSON  Mo DAY YEAR  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State Zip Code (Plus 4)  4 13 2019   | 25.00 |
| Full Name of Contributor MARCIA JORDAN  Mailing Address 4229 DISSTON STREET  City PHILADELPHIA  State  Zip Code (Plus 4)  MO  DAY  YEAR  \$ 50.00  | IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  Full Name of Contributor  | 25.00 |
| Full Name of Contributor MARCIA JORDAN  Mailing Address 4229 DISSTON STREET  City PHILADELPHIA  PA 19120  Mo DAY YEAR  \$ 50.00  | IRIS BRUNSON  Mo DAY YEAR  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  *  Mo DAY YEAR  4 13 2019  *  Mo DAY YEAR  *  Mailing Address 4229 DISSTON STREET  *  *  *  *  *  *  *  *  *  *  *  *  *  |       |
| MARCIA JORDAN  Mo DAY YEAR  Mailing Address 4229 DISSTON STREET  City PHILADELPHIA  State Zip Code (Plus 4)  4 13 2019   | IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  *  Tin Code (Plus 4) 4 13 2019  \$ 13 2019   |       |
| City PHILADELPHIA State Zip Code (Plus 4) 4 13 2019 \$ 50.00   | IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Full Name of Contributor Marcia Jordan  Mo DAY YEAR  \$  \$  City PHILADELPHIA  State Zip Code (Plus 4)  19126  #  #  #  #  #  #  #  #  #  #  #  #  #  |       |
| PHILADELPHIA State Zip Code (Pids 4)   | IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA  State PA 19126  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  *  Full Name of Contributor State PA 19120  Full Name of Contributor Mailing Address 4229 DISSTON STREET  City PHILADELPHIA  State PA 19120  Full Name of Contributor  |       |
|  | IRIS BRUNSON  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA State PA 19126  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Full Name of Contributor Mailing Address 4229 DISSTON STREET  City PHILADELPHIA State PA 19120  Full Name of Contributor MARCIA JORDAN  Full Name of Contributor MARCIA JORDAN  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  ### Address 4229 DISSTON STREET  ### Address 4229 DISSTON STREET | 25.00 |
| PA 19120   | IRIS BRUNSON  Mo DAY YEAR  Mailing Address XXXX 72ND AVENUE  City PHILADELPHIA State PA 19126  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Mailing Address 4229 DISSTON STREET  City PHILADELPHIA State PA 13 2019  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  Full Name of Contributor MARCIA JORDAN  Mo DAY YEAR  State Zip Code (Plus 4) 13 2019  | 25.00 |

|   |                  |                   | _    |     |      |                 |  |
|---|------------------|-------------------|------|-----|------|-----------------|--|
| Full Name of Contributor<br>MARCIA JORDAN   |                  |                   | МО   | DAY | YEAR |                 |  |
| Mailing Address 4229 DISSTO                 | ON STREET        |                   |      |     |      | <b>\$</b> 25.00 |  |
| City PHILADELPHIA                           | State            | Zip Code (Plus 4) | 4    | 13  | 2019 |                 |  |
| FILLADELFILLA                               | PA               | 19120             |      |     |      |                 |  |
| Full Name of Contributor DAYNE COFER        |                  |                   | МО   | DAY | YEAR |                 |  |
| Mailing Address 1321 W. WIN                 | NGOHOCKING STREE | ET                |      |     |      | <b>\$</b> 25.00 |  |
| City PHILADELPHIA                           | State            | Zip Code (Plus 4) | 4    | 13  | 2019 |                 |  |
| PHILADELPHIA                                | PA               | 19140             |      |     |      |                 |  |
| Full Name of Contributor DAYNE COFER        | МО               | DAY               | YEAR |     |      |                 |  |
| Mailing Address 1321 W. WINGOHOCKING STREET |                  |                   |      |     |      | <b>\$</b> 25.00 |  |
| City PHILADELPHIA                           | State            | Zip Code (Plus 4) | 4    | 13  | 2019 |                 |  |
| THE GETTIN                                  | PA               | 19140             |      |     |      |                 |  |
| Full Name of Contributor ASHLEY JORDAN      |                  |                   | МО   | DAY | YEAR |                 |  |
| Mailing Address XXXX N. 16T                 | H STREET         |                   |      |     |      | <b>\$</b> 25.00 |  |
| City PHILADELPHIA                           | State            | Zip Code (Plus 4) | 4    | 13  | 2019 |                 |  |
| · IIIIIADELIIIIA                            | PA               | 19126             |      |     |      |                 |  |
| Full Name of Contributor ASHLEY JORDAN      |                  |                   | мо   | DAY | YEAR |                 |  |
| Mailing Address XXXX N. 16T                 | H STREET         |                   |      |     |      | <b>\$</b> 25.00 |  |
| City PHILADELPHIA                           | State            | Zip Code (Plus 4) | 4    | 13  | 2019 |                 |  |
| IIIEADELIIIA                                | PA               | 19126             |      |     |      |                 |  |
| Full Name of Contributor ASHLEY JORDAN      | МО               | DAY               | YEAR |     |      |                 |  |
| Mailing Address XXXX N. 16TH STREET         |                  |                   |      |     |      | <b>\$</b> 25.00 |  |
| City PHILADELPHIA                           | State            | Zip Code (Plus 4) | 4    | 13  | 13   | 2019            |  |
| IIIILADELIIIA                               | PA               | 19126             |      |     |      |                 |  |
|   | <u> </u>         |                   |      |     |      |                 |  |

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL \$** 450.00

#### **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 Candid                         | ame of Filing Committee or Candidate |           |              |          |        | riod         |                             |                   |          |  |
|--|--------------------------------------|-----------|--------------|----------|--------|--------------|-----------------------------|-------------------|----------|--|
| FRIENDS OF THERESA BRUNSON                                 |                                      |           |              | Fron     | n:     | <u>4/2/2</u> | <u>1/2/2019</u> <b>To</b> : |                   | 5/6/2019 |  |
|  |                                      |           |              |          | D      | ATE          |                             | АМС               | DUNT     |  |
| Full Name of Contributor THERESA BRUNSON                   |                                      |           |              |          | МО     | DAY          | YEAR                        |                   |          |  |
| Mailing 6442 N. 16TH ST                                    | REET                                 |           |              |          |        |              |                             | \$                | 750.00   |  |
| City PHILADELPHIA  | State                                | Zi        | p Code (Plus | (4)      | 4      | 20           | 2019                        |                   |          |  |
|  | PA                                   | 19        | 9126         |          |        |              |                             |                   |          |  |
| Employer Name BEACON HILLS LEGAL STAFFING                  |                                      | Occupa    | tion /       | ATTORNEY |        |              |                             |                   |          |  |
| Employer Mailing Address/Principal Place of Business  City |                                      |           |              | State    |        |              |                             | Zip Code (Plus 4) |          |  |
| 1835 MARKET STREET   |                                      |           | PHILADE      | LPHIA    |        | PA           |                             | 19109             |          |  |
| Full Name of Contributor VINCENT JORDAN                    |                                      |           |              |          | МО     | DAY          | YEAR                        |                   |          |  |
| Mailing 4229 DISTON ST                                     | REET                                 |           |              |          |        |              |                             | \$                | 500.00   |  |
| City PHILADELPHIA  | State                                | Zi        | p Code (Plus | 4)       | 4      | 1            | 2019                        |                   |          |  |
|  | PA                                   | 19        | 9120         |          |        |              |                             |                   |          |  |
| Employer Name PAPER GUY, LLC                               | ·                                    | I         |              |          | Occupa | tion F       | REGIONA                     | AL SALES I        | DIRECTOR |  |
| Employer Mailing Address/Principal<br>Business             | Place of                             |           | City         |          | l      | State        |                             | Zip Code          | (Plus 4) |  |
|  |                                      |           | PHILADE      | LPHIA    |        | PA           |                             |                   |          |  |
| Enter Grand Total of Part C on S                           | Schedule I, Deta                     | iled Sumn | nary Page,   | Section  | on 3.  |              |                             | PAC               | GE TOTAL |  |
|  |                                      |           |              |          |        |              | 4                           | \$                | 1,250.00 |  |
|  |                                      |           |              |          |        |              |                             |                   |          |  |

## 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  | ing Perio | d       |              |          |            |
|---------------------------------------|---------------------|------------|---------|-----------|---------|--------------|----------|------------|
| FRIENDS OF THERESA BRUNSON            |                     |            | From:   |           | 4/2/201 | <u>9</u> To: | 5/6/2019 |            |
|                                       |                     |            |         | D.        | ATE     |              |          | AMOUNT     |
| Full Name  NATIONBUILDER.COM          |                     |            |         | МО        | DAY     | YEAR         |          |            |
| Mailing Address                       | Mailing Address     |            |         |           |         |              | \$       | 239.00     |
| City                                  | State               | Zip Code ( | Plus 4) | 4         | 10      | 2019         | 9        |            |
| Receipt Description DEBIT RETURN      | - SERVICE CANCELL   | ED         |         |           |         |              |          |            |
| Enter Grand Total of Part E on Schedu | le I, Detailed Sumn | nary Page, | Section | 4.        |         |              |          | PAGE TOTAL |
|                                       |                     |            |         |           |         |              | \$       | 239.00     |

#### **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 |                            |                 |
|--|------------------|----------------------------|-----------------|
| FRIENDS OF THERESA BRUNSON   | From:            | <u>4/2/2019</u> <b>To:</b> | <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, 1 |                  | \$                         | 0.00            |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

| Name of Filing Committee or Candid | late                |                       | 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   | Schedule II, In-Kir | nd Contributions Deta | iled Sum | ımary Pag | ge,  |     | PAGE TOTAL |
| Section 2.                         |                     |                       |          |           |      | \$  | 0.00       |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate                          |             |        |            |         | Re    | porting   | 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    | ntion     |        |         |                    |
| Employer Mailing Address/Principal Plac<br>Business            | ce of       | City   |            | State   |       | Zip<br>4) | Code(Plus | Descri | ption ( | of Contribution    |
| Enter Grand Total of Part G on Sch<br>Summary Page, Section 3. | edule II, I | n-Kind | Contributi | ons De  | taile | ed        |           |        |         | PAGE TOTAL<br>0.00 |

## STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate                         |                    |                                   | Reporting Period  |            |        |     |          |  |
|---|--------------------|-----------------------------------|---|------------|--------|-----|----------|--|
| FRIENDS OF THERESA BRUNSON                                    |                    |                                   | From  | <u>4/2</u> | 2/2019 | То: | 5/6/2019 |  |
|   |                    |                                   |   | DATE       |        |     | AMOUNT   |  |
| To Whom Paid DAYNE COFER                                      |                    |                                   | мо  | DAY        | YEAR   |     |          |  |
| Mailing Address 1321 W. WINGOHOCKING STREET                   |                    |                                   | 4   | 1          | 2019   | \$  | 500.00   |  |
| City PHILADELPHIA   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19140 | Description of Expenditure CONSULTING FEE                 |            |        |     |          |  |
| To Whom Paid PENNSYLVANIA COMMONWEALTH COURT (EFILING SYSTEM) |                    |                                   | мо  | DAY        | YEAR   |     |          |  |
| Mailing Address   |                    |                                   | 4   | 3          | 2019   | \$  | 73.00    |  |
| City HARRISBURG   | <b>State</b><br>PA | Zip Code (Plus 4)                 | Description of Expenditure  COMMONWEALTH COURT FILING FEE |            |        |     |          |  |
| To Whom Paid  |                    | ENT CYCTEM DDA ODC)               | мо  | DAY        | YEAR   |     |          |  |

| PHILADELPHIA PARKING AUT       | PIO                |                   | ILAK                                       |              |      |    |        |
|--------------------------------|--------------------|-------------------|--|--------------|------|----|--------|
| Mailing Address                |                    |                   |  | 4            | 2019 | \$ | 39.99  |
| City PHILADELPHIA              | <b>State</b><br>PA | Zip Code (Plus 4) | <b>Descrip</b><br>PAYMEI                   | INE PAYMENT) |      |    |        |
| To Whom Paid<br>STEPHEN PINA   |                    |                   | МО   | DAY          | YEAR |    |        |
| Mailing Address                | Mailing Address    |                   |  | 1            | 2019 | \$ | 100.00 |
| City PHILADELPHIA              | <b>State</b><br>PA | Zip Code (Plus 4) | Description of Expenditure  CONSULTING FEE |              |      |    |        |
| To Whom Paid NATIONBUILDER.COM |                    |                   |  | DAY          | YEAR |    |        |

| Mailing Address |                              |  | 4 | 8           | 2019 | \$<br>239.00 |
|-----------------|------------------------------|--|---|-------------|------|--------------|
| City            | City State Zip Code (Plus 4) |  |   | tion of Exp |      |              |

|  |                    |                                   |   |  |           | FAG | L 14   |  |  |
|--|--------------------|-----------------------------------|---|--|-----------|-----|--------|--|--|
| To Whom Paid<br>SIGNAZON.COM                       | мо                 | DAY                               | YEAR  |  |           |     |        |  |  |
| Mailing Address                                    |                    |                                   | 4   | 8  | 2019      | \$  | 87.00  |  |  |
| City   |                    | Dotion of Exp                     |   | GNETS (2)                                    |           |     |        |  |  |
| To Whom Paid TRIUMPH BAPTIST CHURCH                | МО                 | DAY                               | YEAR  |  |           |     |        |  |  |
| Mailing Address 1648 W. HUN                        | TING PARK AVENUE   |                                   | 4   | 14   | 2019      | \$  | 50.00  |  |  |
| City PHILADELPHIA State Zip Code (Plus 4) PA 19140 |                    |                                   |   | otion of Exp                                 | penditure |     |        |  |  |
| To Whom Paid BEVERLY COFER                         |                    |                                   |   | DAY  | YEAR      |     |        |  |  |
| Mailing Address 1321 W. WIN                        | 4                  | 14                                | 2019  | \$   | 200.00    |     |        |  |  |
| City PHILADELPHIA                                  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19140 | Description of Expenditure CAMPAIGN PHONE CALLS |  |           |     |        |  |  |
| To Whom Paid<br>WURD RADIO STATION                 |                    |                                   | мо  | DAY  | YEAR      |     |        |  |  |
| Mailing Address 1341 N. DELA                       | WARE AVENUE SUITE  | 300                               | 4   | 19   | 2019      | \$  | 870.00 |  |  |
| City PHILADELPHIA                                  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19125 | Description of Expenditure CAMPAIGN RADIO ADS   |  |           |     |        |  |  |
| To Whom Paid<br>GO-DADDY.COM                       |                    | ·                                 | МО  | DAY  | YEAR      |     |        |  |  |
| Mailing Address                                    |                    |                                   | 4   | 24   | 2019      | \$  | 259.08 |  |  |
| City State Zip Code (Plus 4)                       |                    |                                   |   | Description of Expenditure  CAMPAIGN WEBSITE |           |     |        |  |  |
| To Whom Paid WIX.COM                               |                    |                                   |   | DAY  | YEAR      |     |        |  |  |
| Mailing Address                                    |                    |                                   |   | 24   | 2019      | \$  | 24.00  |  |  |
| City State Zip Code (Plus 4)                       |                    |                                   | 1   |  | enditure  | •   |        |  |  |

| To Whom Paid SECOND MACEDONIA BAPTIST CHU  | МО                                     | DAY   | YEAR   |                                       |   |      |        |  |  |
|--|--|---|--|---------------------------------------|---|------|--------|--|--|
| Mailing Address 1301 W. RUSCO  | MB STREET                              |   | 4  | 21                                    | 2019  | \$   | 50.00  |  |  |
| City PHILADELPHIA  | HILADELPHIA PA Zip Code (Plus 4) 19141 |   |  |                                       |   |      |        |  |  |
| To Whom Paid CHELTENHAM PRINTING COMPANY   | МО                                     | DAY   | YEAR   |                                       |   |      |        |  |  |
| Mailing Address 518 RYERS AVENUE   |  |   |  | 21                                    | 2019  | \$   | 270.00 |  |  |
| City CHELTENHAM  | CHELTENHAM PA Zip Code (Plus 4) 19012  |   |  |                                       | Description of Expenditure  CAMPAIGN LITERATURE AND MATERIALS |      |        |  |  |
| To Whom Paid<br>GREATER ST. MATTHEW'S BAPTIST  | МО                                     | DAY   | YEAR   |                                       |   |      |        |  |  |
| Mailing Address 1538 W. WINGO  | 4                                      | 28  | 2019   | \$                                    | 50.00   |      |        |  |  |
| City PHILADELPHIA  | <b>State</b><br>PA                     | <b>Zip Code (Plus 4)</b><br>19140           | Description of Expenditure DONATION          |                                       |   |      |        |  |  |
|  |  |   |  |                                       |   |      |        |  |  |
| To Whom Paid FRIENDS OF ROCHELLE BILIAL  |  |   | МО   | DAY                                   | YEAR  |      |        |  |  |
|  |  |   | мо 4   | <b>DAY</b> 30                         | <b>YEAR</b> 2019  | \$   | 20.00  |  |  |
| FRIENDS OF ROCHELLE BILIAL   | <b>State</b><br>PA                     | Zip Code (Plus 4)                           | 4 Descrip                                    |                                       | 2019<br>penditure   |      | 20.00  |  |  |
| FRIENDS OF ROCHELLE BILIAL  Mailing Address  |  | Zip Code (Plus 4)                           | 4 Descrip                                    | 30                                    | 2019<br>penditure   |      | 20.00  |  |  |
| FRIENDS OF ROCHELLE BILIAL  Mailing Address  City PHILADELPHIA  To Whom Paid   | PA                                     | Zip Code (Plus 4)                           | 4  Descrip                                   | 30<br>Ition of Exp<br>AISER - Ch      | 2019<br>Denditure   |      | 20.00  |  |  |
| FRIENDS OF ROCHELLE BILIAL  Mailing Address  City PHILADELPHIA  To Whom Paid UNITED STATES POST OFFICE   | PA                                     | Zip Code (Plus 4)  Zip Code (Plus 4)  19141 | 4  Descrip FUNDR  MO  4  Descrip             | 30  AISER - CH  DAY  30  Stion of Exp | 2019 Denditure HAMPAGN YEAR 2019 Denditure                    | IE'S |        |  |  |
| FRIENDS OF ROCHELLE BILIAL  Mailing Address  City PHILADELPHIA  To Whom Paid UNITED STATES POST OFFICE  Mailing Address 6150 N. BROAD                                  | PA STREET State                        | Zip Code (Plus 4)                           | 4  Descrip FUNDR  MO  4  Descrip OVERN       | 30  AISER - CH  DAY  30  Stion of Exp | 2019 Denditure HAMPAGN YEAR 2019 Denditure                    | IE'S | 25.50  |  |  |
| FRIENDS OF ROCHELLE BILIAL  Mailing Address  City PHILADELPHIA  To Whom Paid UNITED STATES POST OFFICE  Mailing Address 6150 N. BROAD  City PHILADELPHIA  To Whom Paid | STREET State PA                        | Zip Code (Plus 4)                           | 4  Descrip FUNDR  MO  4  Descrip OVERN REPOR | 30  AISER - CH  DAY  30  Stion of Exp | 2019 Penditure HAMPAGN YEAR 2019 Penditure ING OF C           | IE'S | 25.50  |  |  |

| To Whom Paid CHELTENHAM PRINTING COMPANY |   |                                   | мо  | DAY | YEAR       |    |          |
|--|---|-----------------------------------|---|-----|------------|----|----------|
| Mailing Address 518 RYERS AVENUE         |   |                                   | 4   | 30  | 2019       | \$ | 270.00   |
| City CHELTENHAM                          | <b>State</b><br>PA  | <b>Zip Code (Plus 4)</b><br>19012 | Description of Expenditure  CAMPAIGN LITERATURE & DATERIALS |     |            |    |          |
| To Whom Paid LEON MCMILLAN               |   |                                   | МО  | DAY | YEAR       |    |          |
| Mailing Address P.O. BOX 871             |   |                                   | 4   | 17  | 2019       | \$ | 300.00   |
| City CHESTER                             | <b>State</b><br>PA  | <b>Zip Code (Plus 4)</b><br>19016 | Description of Expenditure PAYMENT FOR CAMPAIGN LI          |     |            |    | URE      |
| Enter Grand Total of Evnens              |   |                                   |   |     | PAGE TOTAL |    |          |
| Enter Grand Total of Expend              | Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. |                                   |   |     |            | \$ | 3,467.42 |