

Campaign Finance Report

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

Filer Identification Number :		20190396		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF THERESA BRUNSON													
Street Address: 6442 N. 16TH STREET													
City: PHILADELPHIA						State: PA				Zip Code: 19126			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	✓	No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes		No		✓
	ANNUAL REPORT	7.	Year 2019		FILING METHOD () CHECK ONE			PAPER	✓	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	DEM				
						11	5	2019	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		5	7	2019		6	10	2019					
A. Amount Brought Forward From Last Report						\$ 1,286.69							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 5,807.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 7,093.69							
D. Total Expenditures (From Schedule III)						\$ 6,288.70							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 834.99							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 250.00							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 957.95							

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF THERESA BRUNSON	From: <u>5/7/2019</u> To: <u>6/10/2019</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 607.00

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)	\$ 700.00
TOTAL for the Reporting Period (2)	\$ 700.00

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)	\$ 4,500.00
TOTAL for the Reporting Period (3)	\$ 4,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 5,807.00
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PART B
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 FRIENDS OF THERESA BRUNSON				Reporting Period From: <u>5/7/2019</u> To: <u>6/10/2019</u>			
				DATE		AMOUNT	

Full Name of Contributor CARTRELL WRIGHT			MO	DAY	YEAR	\$ 125.00
Mailing Address CHERRY HILL NJ			5	14	2019	
City	State	Zip Code (Plus 4)				

Full Name of Contributor JOSEPHINE M. RIGMALTEN			MO	DAY	YEAR	\$ 100.00
Mailing Address 6127 WELLINGTON COMMONS DRIVE			5	15	2019	
City ALEXANDRIA	State VA	Zip Code (Plus 4) 22310				

Full Name of Contributor STEPHANIE PARKS			MO	DAY	YEAR	\$ 100.00
Mailing Address 3395 MICHELSON DRIVE			5	16	2019	
City IRVING	State CA	Zip Code (Plus 4) 92612				

Full Name of Contributor JEANNIE Y. LANCASTER			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	18	2019	
City	State	Zip Code (Plus 4)				

Full Name of Contributor THERESA BRUNSON			MO	DAY	YEAR	\$ 275.00
Mailing Address 6442 N. 16TH STREET			5	16	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126				

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

PAGE TOTAL

\$ 700.00

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

PART D
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 FRIENDS OF THERESA BRUNSON	Reporting Period From: <u>5/7/2019</u> To: <u>6/10/2019</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
IRIS BRUNSON							
Mailing Address XXXX 72ND AVENUE				5	3	2019	\$ 3,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126					
Employer Name CITY OF PHILADELPHIA				Occupation SECRETARY/CLERK			
Employer Mailing Address/Principal Place of Business			City PHILADELPHIA		State PA	Zip Code (Plus 4)	

Full Name of Contributor				MO	DAY	YEAR	
THERESA BRUNSON							
Mailing Address 6442 N. 16TH STREET				5	18	2019	\$ 500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor				MO	DAY	YEAR	
THERESA BRUNSON							
Mailing Address 6442 N. 16TH STREET				5	21	2019	\$ 500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor THERESA BRUNSON				MO	DAY	YEAR	\$ 500.00
Mailing Address 6442 N. 16TH STREET				6	1	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 4,500.00

PART E
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:

				DATE			AMOUNT	
Full Name				MO	DAY	YEAR	\$ 0.00	
Mailing Address								
City	State	Zip Code (Plus 4)						
Receipt Description								

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
FRIENDS OF THERESA BRUNSON		From: <u>5/7/2019</u> To: <u>6/10/2019</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	250.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	250.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate FRIENDS OF THERESA BRUNSON	Reporting Period From: <u>5/7/2019</u> To: <u>6/10/2019</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
CRYSTAL LEARY							
Mailing Address 8510 PROVIDENT STREET				5	16	2019	\$ 250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19150					
Description of Contribution: PAID ALL FEES ASSOCIATED WITH FUNDRAISER OF 05/18/2019							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 250.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF THERESA BRUNSON	From <u>5/7/2019</u> To: <u>6/10/2019</u>

DATE				AMOUNT		
To Whom Paid MALIK AZIZ			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 3439 N. 17TH STREET			5	4	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19140	Description of Expenditure BALLOT PLACEMENT			
To Whom Paid MT. AIRY CHURCH OF GOD IN CHRIST			MO	DAY	YEAR	\$ 50.00
Mailing Address 6500 OGONTZ AVENUE			5	5	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126	Description of Expenditure DONATION			
To Whom Paid THANKFUL BAPTIST CHURCH			MO	DAY	YEAR	\$ 50.00
Mailing Address 1608 W. ALLEGHENY AVENUE			5	5	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19132	Description of Expenditure DONATION			
To Whom Paid NCBW - PHILADELPHIA CHAPTER			MO	DAY	YEAR	\$ 125.00
Mailing Address 35 SOUTH MILLICK STREET			5	5	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19139	Description of Expenditure PAYMENT FOR PROGRAM BOOK AD			
To Whom Paid DELTA SIGMA THETA SORORITY - PAYPAL			MO	DAY	YEAR	\$ 134.50
Mailing Address			5	6	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure PANHELLANIC COUNCIL SPRING GALA TICKETS (2)			

To Whom Paid WANDA DAVIS			MO	DAY	YEAR	
Mailing Address 6300 RACE STREET			5	7	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19150	Description of Expenditure CONSULTING FEE			
To Whom Paid LEON MCMILLAN			MO	DAY	YEAR	
Mailing Address P.O. BOX 871			5	7	2019	
City CHESTER	State PA	Zip Code (Plus 4) 19016	Description of Expenditure CAMPAIGN LITERATURE			
To Whom Paid CHAMPAIGNE'S CAFE			MO	DAY	YEAR	
Mailing Address 21 E. CHELTEN AVENUE			5	8	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19144	Description of Expenditure FOOD			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 2,429.70

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 FRIENDS OF THERESA BRUNSON				Reporting Period From: <u>5/7/2019</u> To: <u>6/10/2019</u>			
							Outstanding Balance of Debt
				DATE			
Name of Creditor CITIZEN'S BANK				MO	DAY	YEAR	
Mailing Address P.O. BOX				5	31	2019	\$ 850.00
City PROVIDENCE	State RI		Zip Code (Plus 4) 02940		Description of Debt OVERDRAFT LIABILITY & FEES		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 850.00