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 2018	3C0021			Repo Filed			CANI	DID	DATE	\	/ C	COMMITTEE LOBBYIST					
Name of Filing C	Committee, Candid	late or L	obbyist:		KENY	ΆΤ	ΤΑ, M	IALCOL	M									
Street Address:																		
City:	_							State:					Zip Cod	e: 19	9121			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE	- 2.		30 DA PRIMA		P	OST-	3.		AMENDM REPORT?	ENT	Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA		P	OST-	6.		TERMINA REPORT?	TION	Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2018					IG MET CHECK					PAPER		V	DIS	KETTE	
Name of Office S	Sought by Candida	ite:	-					DATE	OF	F ELE	СТІ	ON	District Number	Office Code	Pai	rty Co	de Cou	
								МО		DAY	,	YEAR	181	STH	DEI	М	51	
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					1	11		6	2018	3	(SEE IN	STRUCTI	ONS F	OR CODE	S)
Summary of Receipts and											YEAR	FO	R OFFI	CE USE	ONL	.Υ		
Expenditures	from:		1 1	. 2	020	T	0		3		9	2020)					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$					0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule 1	[)	\$					150.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					150.00)					
D. Total Expend	ditures (From Sch	edule II	I)				\$					400.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				(250.00)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00						
				AFF	ΊDΑ\	VIT	ſ SE	CTIOI	V									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.	If this	is is	a Car	ndidate	re	port, c	cano	didate s	gn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sc	hedules	filed (on p	aper	or by ele	ctro	onic m	ediu	ım, are to	the best of	my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me thi day of	S	20						-			Signatu	re of Person	Submit	ting Re	port		
	Signati	ıre					-		-				Print	ed Name	•			_
My Commission Ex	cpires								-				Emai					_
	мо	D	AY	YR						Are	ea C	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee	, Ca	ndid	ate sha	II s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of l	my knowle	edge and beli	ief this	politic	cal (comm	ittee has	s no	t viola	ted	any provi	sions of the	act of J	une 3,1	937 (P.L. 133	33,
Sworn to and subsc	ribed before me this	i											Signature o	f Candid	ate			-
	day of						•						Printe	i Name				_
	Signature						-											
My Commission Exp	_								_			_	Emai	1			_	_
	мо	D	AY	YR						Area	Cod	e	Da	ytime T	elephoi	ne Nu	mber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KENYATTA, MALCOLM	From:	1/1/202	<u>20</u> To:	3/9/2020
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)			\$	150.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	(2)	\$	150.00	
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 Page			\$	150.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting	Period		
KENYATTA, MALCOLM	From:	1/1/2020	То:	3/9/2020
		DATE		AMOUNT

Full Nar	me of Contributing Committee	мо	DAY	YEAR				
Malcolm for PA					DAT	TEAK		
Mailing	Mailing Address PO Box 3254				15	2020	\$	150.00
City	Philadelphia	State	Zip Code (Plus 4)	_	15	2020		
		_{DA}	10120					

PAGE TOTAL150.00

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

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		Reporting Period						
			From: To				:		
					DATE			AMOUNT	
Full Name of Contributor				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.

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	me of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
						PAGE TOTAL		
Enter Grand Total of Part C on Scheo	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			Rep	orting Pe	riod				
			From:			т	То:		
				DATE			AMOUNT		
Full Name of Contributor				МО	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip	Code (Plus 4)	
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00	
							т	0.00	

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 Peri	od				
			From:			To:			
		'			ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (P	Plus 4)						
Receipt Description	'	1					<u> </u>		
	- C		. .:	_				PAGE TOTAL	
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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							
KENYATTA, MALCOLM	From:	<u>1/1/2020</u> To:	<u>3/9/2020</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						
. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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	g Period				
			From:			То:		
			DATE					
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Schedule II, In-Kind Contributions De Section 2.			iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	g Period			
				Fro	om:		To:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor	•		•		Occu	pation			
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	ip Code(Plus 4)	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sci	nedule II, In-K	ind	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.	,								0.00

PAGE TOTAL

400.00

\$

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
KENYATTA, MALCOLM			From	From <u>1/1/2020</u> To:				
							AMOUNT	
To Whom Paid				DAY	YEAR			
Shiloh Baptist Church	МО							
Mailing Address 2040 Christian St				1	2020	\$	150.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19146	Donatio	n				
To Whom Paid			мо	DAY	YEAR			
Shiloh Baptist Church			МО		ILAK			
Mailing Address 2040 Christian St			2	27	2020	\$	250.00	
City Philadelphia State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	•		
	PA	19146	Food fo	r event				

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