Campaign Finance Report

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

Filer Identificat	ion 201	.50218			Repo		CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST	
Number : Name of Filing (Committee, Candi	date or l	obbyist:		Filed	-	onna Bull	ock							
	PO Box 5892				THEHU	3 01 DC		OCK							
Street Address:	FO DOX JOS	21					1				1				
City:	Philadelphia						State:	PA			Zip Co	de: 19	9102		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D/ PRIM		POST-	3. X		AMENDN REPORT		Yes	No)
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	≣- 5.	30 DA ELEC		POST-	POST- 6.			ATION ?	Yes	No	· ·
report type)	ANNUAL REPOR	T 7.	Year 2020				NG METH				PAPER		\checkmark	DISK	TTE
Name of Office S	L Sought by Candid	ate:					DATE C	F ELE	СТІС	N	District Number	Office Code	Par	ty Code	County
							мо	DAY	Y	EAR	195	STH	DEN	1	51
REPRESENTAT	IVE IN THE GENE	ERAL ASS	SEMBLY				11		3	2020	 	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	2		мо	DAY	Y	EAR	FC	DR OFFIC	E USE	ONLY	
Expenditures	s from:		5 19	2	020	то	6	5 2	22	2020					
A. Amount Bro	ught Forward Fro	om Last R	leport	•		\$			98,0	095.15					
B. Total Monet	ary Contributions	s And Rec	eipts (Fron	n Sche	dule I)	\$	5			75.00					
C. Total Funds	Available (Sum (Of Lines A	and B)			\$	5		98,3	170.15					
D. Total Expen	ditures (From Sc	hedule II	II)			\$;		2,6	522.50					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)		\$	5		95,5	547.65					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II)	\$	5			0.00					
G. Unpaid Deb	ts And Obligation	s (From	Schedule I\	/)		\$	5			0.00					
				AFF	IDAV	IT SE	CTION								
PART I - If this i	s a Committee re	port, trea	asurer sign	here.	If this i	is a Ca	ndidate r	eport, c	andi	date si	gn here.				
I swear (or affirm correct and compl) that this report, in ete.	cluding th	e attached so	hedule	s filed o	n paper	or by elect	ronic me	edium	, are to	the best o	of my knov	vledge	and bel	ief , true
Sworn to and subs	scribed before me th day of	nis	20						s	Signatur	e of Perso	n Submitt	ing Rep	oort	
						_					Prin	ited Name			
My Commission E	Signat xpires	ure									Ema	il			
	мо	D	AY	YR				Are	ea Coc	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nittee,	Candid	late shall	sign he	ere.						
I swear (or affirm) No 320) as amend) that to the best of ed.	my knowl	edge and bel	ief this	politica	l comm	nittee has r	not violat	ted an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	1333,
Sworn to and subso	cribed before me thi	S								S	ignature	of Candida	ite		
	day of					_					Printe	ed Name			
	Signature	•				_					F				
My Commission Exp	bires										Ema	111			
	мо	D	AY	YR	2			Area	Code		D	aytime Te	elephon	e Numl	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pag	,-			
Name of Filing Committee or Candidate	Reporting	g Period		
Friends of Donna Bullock	From:	<u>5/19/202</u>	2 <u>0</u> To:	<u>6/22/2020</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reportir	ıg Period	(1)	\$	75.00
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 Reportir	ıg Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			1	
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reportir	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)			
TOTAL for the Reportir	ıg Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover P			\$	75.00

PAGE 3

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				porting l	Period			
Fr				om:		:		
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

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 Candidat	e		Rep	orting P	eriod				
			Fro	m:		Тс):		
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Can	didate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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 Candidat	e		Report	ing Perio	bd				
			From:			То:			
				D	ATE			AMOUN	r
Full Name				мо	DAY	YEAR			
Mailing Address							4	\$	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						1			
Enter Grand Total of Part E on Sche	lule T. Detailed	Summary Page	Section	4				PAGE TO	TAL
	ale 1, Detailed	Summary ruge,	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 Period		
Friends of Donna Bullock	From:	<u>5/19/2020</u> то:	<u>6/22/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate			Reporting	g Period			
F						То:	
				DATE		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					oorting P	Period			
					Fro	m:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(P	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Summary Page, Section 3.

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	2		Reporti	ng Period			
Friends of Donna Bullock			From	5/19	9/2020	То:	<u>6/22/2020</u>
				DATE			AMOUNT
To Whom Paid Chris Curtis			мо	DAY	YEAR		
Mailing Address 131 Cognac Dr			6	22	2020	\$	120.00
City Newark	State DE	Zip Code (Plus 4) 197025551	Descrip web ho	otion of Exp sting	penditure		
To Whom Paid Democratic Campaign Committee of Ph	niladelphia		мо	DAY	YEAR		
Mailing Address 219 Spring Garden	St		6	11	2020	\$	2,500.00
City Philadelphia	State PA	Zip Code (Plus 4) 191232925	Descrip assessi	nent	penditure	l 	
To Whom Paid PAYA			мо	DAY	YEAR		
Mailing Address 12120 Sunset Hills	Rd Ste 500		6	1	2020	\$	2.50
City Reston	State VA	Zip Code (Plus 4) 201905858		otion of Exp ant fees	penditure	1	
Enter Grand Total of Expenditures	on Page 1 Penort	Cover Page Item I	<u>.</u>				PAGE TOTAL
	on Page 1, Report	Cover Fage, Item	5.			\$	2,622.50