#### **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 2018   | 30132     |                       |            | Repor<br>Filed |            | CAI   | NDI | DATE   |       | COM              | AITTEE               | <b>V</b>       | LUB     | 51131     |                |
|--------------------------------|---|-----------|-----------------------|------------|----------------|------------|-------|-----|--------|-------|------------------|----------------------|----------------|---------|-----------|----------------|
| Name of Filing C               | ommittee, Candid  | late or L | obbyist:              |            | AHMAD          | , NIN      | A FOR | PA  |        |       |                  |                      |                |         |           |                |
| Street Address:                | 405 EAST GO   | )WEN A\   | /ENUE                 |            |                |            |       |     |        |       |                  |                      |                |         |           |                |
| City:                          | PHILADELPHI   | A         |                       |            |                |            | State | :   | PA     |       |                  | Zip Co               | <b>de:</b> 19  | 9119    |           |                |
| TYPE OF<br>REPORT              | 6TH TUESDAY<br>PRE-PRIMARY                                  | 1.        | 2ND FRIDA<br>PRIMARY  | Y PRE-     | 2. <b>X</b>    | 30 DA      |       | P   | POST-  | 3.    |                  | AMENDMENT<br>REPORT? |                | Yes     | No        |                |
| (place X to<br>the right of    | 6TH TUESDAY<br>PRE-ELECTION                                 | 4.        | 2ND FRIDA<br>ELECTION | Y PRE      | - 5.           | 30 DA      |       | P   | POST-  | 6.    |                  | TERMINA<br>REPORT    |                | Yes     | No        | <b>\</b>       |
| report type)                   | /pe) ANNUAL REPORT 7. Year 2020 FILING METHOD ( ) CHECK ONE |           |                       |            |                |            |       |     | PAPER  |       | $  \checkmark  $ | DISKE                | TTE            |         |           |                |
| Name of Office S               | ought by Candida  | ite:      |                       |            | -              |            | DAT   | ΕO  | F ELEC | CTIO  | N                | District<br>Number   | Office<br>Code | Pai     | ty Code   | County<br>Code |
| AUDITOR GENE                   | -RAI  |           |                       |            |                |            | МО    |     | DAY    | YE    | AR               | -1                   | AUD            | DEN     | 1         | 51             |
|                                |   |           |                       |            |                |            |       | 11  |        | 3     | 2020             |                      | (SEE IN        | STRUCTI | ONS FOR O | CODES)         |
| Summary of Expenditures        | Receipts and  | МО        | DAY                   | YEAR       |                |            | МО    |     | DAY    | YE    | AR               | FC                   | OR OFFI        | CE USE  | ONLY      |                |
|                                |   |           | 3 10                  | 20         | 020 7          | ГО         |       | 5   | 1      | 8     | 2020             |                      |                |         |           |                |
| A. Amount Bro                  | ught Forward Fro  | m Last R  | eport                 |            |                | \$         |       |     |        |       | 047.32           |                      |                |         |           |                |
| B. Total Moneta                | ary Contributions   | And Rec   | eipts (Fron           | 1 Sche     | dule I)        | \$         |       |     |        | 352,3 | 347.34           |                      |                |         |           |                |
| C. Total Funds                 | Available (Sum O  | f Lines A | and B)                |            |                | \$         |       |     | 4      | 416,3 | 394.66           |                      |                |         |           |                |
| D. Total Expend                | ditures (From Sch   | edule II  | <b>I</b> )            |            |                | \$         |       |     | 3      | 396,4 | 89.27            |                      |                |         |           |                |
| E. Ending Cash                 | Balance (Subtrac  | t Line D  | From Line             | C)         |                | \$         |       |     |        | 19,9  | 05.39            |                      |                |         |           |                |
| F. Value Of In-                | Kind Contribution   | s Receiv  | ed (From S            | chedul     | le II)         | \$         |       |     | 0.00   |       |                  |                      |                |         |           |                |
| G. Unpaid Debt                 | s And Obligations   | (From S   | Schedule IV           | <b>'</b> ) |                | \$         |       |     | 9      | 986,2 | 268.86           |                      |                |         |           |                |
|                                |   |           |                       | AFF        | IDAV:          | T SE       | CTIC  | N   |        |       |                  |                      |                |         |           |                |
| I swear (or affirm)            | that this report, inc                                       | -         | _                     |            |                |            |       |     | -      |       | _                |                      | of my kno      | wledge  | and belie | ef , true      |
| correct and comple             | cribed before me thi  | s         |                       |            |                |            |       |     |        |       | ·:               | of Davas             | Cubacit        | tina Da |           |                |
|                                | day of  |           |                       |            |                | _          |       |     |        |       | ngnature         | e or Perso           | n Submit       | ting Ke | ort       |                |
|                                | Signatu   | ıre       |                       |            |                | _          |       |     |        |       |                  | Prin                 | ited Name      | •       |           |                |
| My Commission Ex               | · —   |           |                       |            |                | _          |       | •   |        |       |                  | Ema                  |                |         |           |                |
|                                | МО  |           | AY                    | YR         |                |            |       |     |        | a Cod | le               | Daytin               | ne Teleph      | one Nu  | mber      |                |
|                                | a report of a can<br>that to the best of                    |           |                       |            | •              |            |       |     |        |       | v provis         | ions of th           | e act of J     | une 3.1 | 937 (P.L  | . 1333.        |
| No 320) as amende              | ed.   | •         |                       |            |                |            |       |     |        |       | , , ,            |                      |                |         | (- 1-     |                |
| Sworn to and subsc             | ribed before me this<br>day of                              |           | 20                    |            |                |            |       |     |        |       | s                | ignature             | of Candid      | ate     |           |                |
|                                |   |           |                       |            |                | _          |       |     |        |       |                  | Printe               | ed Name        |         |           |                |
| My Commission Exp              | Signature<br>ires   |           |                       |            |                | - <b>-</b> |       |     |        |       |                  | Ema                  | nil            |         |           |                |
|                                | МО  | D         | AY                    | YR         |                | _          |       |     | Area   | Code  |                  | D                    | aytime T       | elephor | ne Numb   | er             |

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Detailed Sammary 1 ag  | -         |          |              |            |
|--|-----------|----------|--------------|------------|
| Name of Filing Committee or Candidate  | Reporting | J Period |              |            |
| AHMAD, NINA FOR PA   | From:     | 3/10/202 | <u>0</u> To: | 5/18/2020  |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |          |              |            |
| TOTAL for the Reporting  | ) Period  | (1)      | \$           | 896.00     |
| 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)   |           |          | \$           | 6,218.00   |
| TOTAL for the Reporting  | Period    | (2)      | \$           | 6,218.00   |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |          |              |            |
| Contributions Received From Political Committees (Part C)  |           |          | \$           | 37,000.00  |
| All Other Contributions (Part D)   |           |          | \$           | 305,233.34 |
| TOTAL for the Reporting  | Period    | (3)      | \$           | 342,233.34 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |          |              |            |
| TOTAL for the Reporting  | ) Period  | (4)      | \$           | 3,000.00   |
|  |           |          |              | _          |
| 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 |           |          | \$           | 352,347.34 |

#### **PART A**

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

\$50.01 TO \$250.00

|                                       | this Part to itemize only with an aggregate valu |                  |     |         |        |      |               |            |
|---------------------------------------|--|------------------|-----|---------|--------|------|---------------|------------|
| Name of Filing Committee or Candidate |  |                  | Re  | porting | Period |      |               |            |
|                                       |  |                  | Fre | om:     |        | То   | :             |            |
|                                       |  | <u> </u>         |     |         | DATE   |      |               | AMOUNT     |
| Full Name of Contributi               | ing Committee                                    |                  |     | МО      | DAY    | YEAR |               |            |
| Mailing Address                       |  |                  |     |         |        |      | \$            | 0.00       |
| City                                  | State  | Zip Code (Plus 4 | )   |         |        |      |               |            |
|                                       | •  | ·                |     |         | •      | •    | $\overline{}$ | DACE 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          |                    |                                       |     |    | porting Period |                 |    |           |  |
|--|--------------------|---------------------------------------|-----|----|----------------|-----------------|----|-----------|--|
| AHMAD, NINA FOR PA                             |                    |                                       | Fro | m: | 3/10/2         | 2020 <b>T</b> o | ): | 5/18/2020 |  |
|  |                    |                                       |     |    | DATE           |                 |    | AMOUNT    |  |
| Full Name of Contributor Kimberly S Adams      |                    |                                       |     | МО | DAY            | YEAR            |    |           |  |
| Mailing Address 66 Symphony Cir                |                    |                                       |     |    |                |                 | \$ | 100.00    |  |
| City East Stroudsburg                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>183018055 |     | 4  | 27             | 2020            |    |           |  |
| <b>Full Name of Contributor</b><br>Ted Agoos   |                    |                                       |     | МО | DAY            | YEAR            |    |           |  |
| Mailing Address 829 Beechwood Dr               |                    |                                       |     |    |                |                 | \$ | 100.00    |  |
| City Lower Merion                              | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190832617 |     | 4  | 30             | 2020            |    |           |  |
| Full Name of Contributor Salahuddin Ahmed      |                    |                                       |     | МО | DAY            | YEAR            |    |           |  |
| Mailing Address 138 Chaucer Pl                 |                    |                                       |     |    |                |                 | \$ | 250.00    |  |
| City Cherry Hill                               | <b>State</b><br>NJ | <b>Zip Code (Plus 4)</b> 080033537    |     | 5  | 14             | 2020            |    |           |  |
| Full Name of Contributor                       |                    |                                       |     | мо | DAY            | YEAR            |    |           |  |
| Arlene & Carl Bennett                          |                    |                                       |     |    |                |                 |    |           |  |
| Mailing Address 369 E Gowen Ave                |                    |                                       |     | 3  | 29             | 2020            | \$ | 250.00    |  |
| <b>City</b> Philadelphia                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191191023 |     | 3  | 29             | 2020            |    |           |  |
| Full Name of Contributor<br>Leslie H. Benoliel |                    |                                       |     | МО | DAY            | YEAR            |    |           |  |
| Mailing Address 515 E Mount Pleasa             | int Ave            |                                       |     |    |                |                 | \$ | 250.00    |  |
| <b>City</b> Philadelphia                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191191233 |     | 4  | 29             | 2020            |    |           |  |

| Mailing Address  |  |                                 |             |  |         |               |                  | PAGI |        |
|--|--|---------------------------------|-------------|--|---------|---------------|------------------|------|--------|
| Mailing Address   711 N 19th St   State   Zip Code (Pius 4)   191302029  | Full Name of Contr   | ibutor                          |             |  | МО      | DAY           | VEAD             |      |        |
| State   PA   | Katherine Black  |                                 |             |  | MO      | DAT           | TEAR             |      |        |
| Full Name of Contributor   Ratherine Black   State   Zip Code (Plus 4)   191302029   | Mailing Address  | 711 N 19th St                   |             |  |         |               |                  | \$   | 30.00  |
| Full Name of Contributor   Note   N   | <b>City</b> Philadelphi  | a                               | State       | Zip Code (Plus 4)                      | 3       | 10            | 2020             |      |        |
| Mod   DAY   YEAR   Full Name of Contributor   Natalic Catin St. Louis   State   Zip Code (Plus 4)   19130227   PA   2020   P   |  |                                 | PA          | 191302029                              |         |               |                  |      |        |
| State  | Full Name of Contributor Katherine Black   |                                 |             |  |         | DAY           | YEAR             |      |        |
| Full Name of Contributor   Natalile Catin-St. Louis   Nate   State   PA   191302029   Nate   Nate   Natalile Catin-St. Louis      | Mailing Address  | 711 N 19th St                   |             |  |         |               |                  | \$   | 50.00  |
| PA   | <b>City</b> Philadelphi  | a                               | State       | Zip Code (Plus 4)                      | 4       | 21            | 2020             |      |        |
| Mailing Address   104 Mill Rd   State   PA   190833716   PA   190833716   PA   2020   PA   PA   2020   PA   PA   PA   190833716   PA   PA   PA   190833716   PA   PA   PA   PA   PA   PA   PA   P  |  | ~                               | PA          | 191302029                              |         |               |                  |      |        |
| State   PA   | <b>Full Name of Contr</b><br>Cecile Burgert  | ibutor                          |             |  | мо      | DAY           | YEAR             |      |        |
| Full Name of Contributor   State   PA  | Mailing Address  | 104 Mill Rd                     |             |  |         |               |                  | \$   | 200.00 |
| Full Name of Contributor Natalic Catin-St. Louis  Mailing Address 623 E Durham St  City Philadelphia State PA 191191227  Full Name of Contributor Sharon H Chen  Mo DAY YEAR  \$ 250.00  \$ 250.00  Full Name of Contributor Sharon H Chen  Mo DAY YEAR  \$ 88.00  Full Name of Contributor Sharon H Chen  Mo DAY YEAR  \$ 88.00  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  \$ 1526 17th Ave E  WA 981122809  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  \$ 100.000  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  \$ 100.000  | <b>City</b> Havertown  |                                 | State       | Zip Code (Plus 4)                      | 5       | 14            | 2020             |      |        |
| Natalie Catin-St. Louis  Mo DAY YEAR  Mailing Address 623 E Durham St  City Philadelphia State PA 191191227  Full Name of Contributor Sharon H Chen  Mo DAY YEAR  Mo DAY YEAR  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 250.00  * 260.00  * |  |                                 | PA          | 190833716                              |         |               |                  |      |        |
| State   Zip Code (Plus 4)   191191227  |  |                                 |             |  | МО      | DAY           | YEAR             |      |        |
| Full Name of Contributor Sharon H Chen  Mo DAY YEAR  Mailing Address 1526 17th Ave E  State WA 981122809  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  \$ 88.00  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  \$ 1520  \$ 16 2020  \$ 16 2020  \$ 100.00  \$ 100.00  \$ 100.00  \$ 100.00  | Mailing Address  |                                 |             |  |         |               |                  | 1    |        |
| Full Name of Contributor Sharon H Chen  Mo DAY YEAR  Mailing Address 1526 17th Ave E  City Seattle  State WA 981122809  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  * 88.00  * 88.00  City Moon Twp  State Zip Code (Plus 4) 981122809  * 100.00  |  | 623 E Durham St                 |             |  |         |               |                  | \$   | 250.00 |
| Full Name of Contributor Sharon H Chen  Mo DAY YEAR  Mailing Address 1526 17th Ave E  City Seattle  State WA 981122809  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  \$ 88.00  Full Name of Contributor Richard Chesnik  Mo DAY YEAR  \$ 100.00  City Moon Twp  State Zip Code (Plus 4)  981122809  **  **  **  **  **  **  **  **  **   | <b>City</b> Philadelphi  |                                 | State       | Zip Code (Plus 4)                      | 5       | 15            | 2020             | \$   | 250.00 |
| State     State  | <b>City</b> Philadelphi  |                                 |             |  | 5       | 15            | 2020             | \$   | 250.00 |
| Full Name of Contributor Richard Chesnik  Mailing Address 3014 Fallbrook Dr  City Moon Twp  State  VMA  981122809  MO  DAY  YEAR  \$ 100.00  | rimacipiii   | a                               |             |  |         |               |                  | \$   | 250.00 |
| Full Name of Contributor Richard Chesnik  Mo DAY YEAR  Mailing Address 3014 Fallbrook Dr  City Moon Twp State Zip Code (Plus 4)  4 2020  | Full Name of Contr   | a<br>ibutor                     |             |  | мо      | DAY           | YEAR             |      |        |
| Richard Chesnik  Mo DAY YEAR  Mailing Address 3014 Fallbrook Dr  City Moon Twp  State Zip Code (Plus 4)  4 2020  \$ 100.00   | Full Name of Contr<br>Sharon H Chen<br>Mailing Address   | a<br>ibutor                     | РА          | 191191227                              | мо      | DAY           | YEAR             |      |        |
| City Moon Twp State Zip Code (Plus 4) 4 2020 \$ 100.00   | Full Name of Contr<br>Sharon H Chen<br>Mailing Address   | a<br>ibutor                     | PA          | 191191227  Zip Code (Plus 4)           | мо      | DAY           | YEAR             |      |        |
| City Moon Twp State Zip Code (Pius 4)  | Full Name of Contr<br>Sharon H Chen<br>Mailing Address<br>City Seattle   | a<br>ibutor<br>1526 17th Ave E  | PA          | 191191227  Zip Code (Plus 4)           | мо 3    | <b>DAY</b> 16 | <b>YEAR</b> 2020 |      |        |
| TIOSH TWP  | Full Name of Contr<br>Sharon H Chen  Mailing Address  City Seattle  Full Name of Contr                                     | ibutor  1526 17th Ave E  ibutor | PA          | 191191227  Zip Code (Plus 4)           | мо 3    | <b>DAY</b> 16 | <b>YEAR</b> 2020 | \$   | 88.00  |
|  | Full Name of Contr<br>Sharon H Chen  Mailing Address  City Seattle  Full Name of Contr<br>Richard Chesnik  Mailing Address | ibutor  1526 17th Ave E  ibutor | State<br>WA | 191191227  Zip Code (Plus 4) 981122809 | мо<br>3 | DAY 16        | YEAR 2020 YEAR   | \$   | 88.00  |

|  |                             |                               |       |                   |           |               |                  | PAGE   | б      |
|--|-----------------------------|-------------------------------|-------|-------------------|-----------|---------------|------------------|--------|--------|
| Full Nan                                       | me of Contri                | butor                         |       |                   |           | 544           | VEAD             |        |        |
| Ibrul Ch                                       | howdhury                    |                               |       |                   | МО        | DAY           | YEAR             |        |        |
| Mailing  | Address                     | 6 Cabot Dr                    |       |                   |           |               |                  | \$     | 250.00 |
| City   | Chesterbro                  | ok                            | State | Zip Code (Plus 4) | 5         | 14            | 2020             |        |        |
|  |                             |                               | PA    | 190875622         |           |               |                  |        |        |
| Full Name of Contributor  Manzur Max CHOWDHURY |                             |                               |       |                   | мо        | DAY           | YEAR             |        |        |
| Mailing Address 500 N Hanover St               |                             |                               |       |                   |           |               |                  | \$     | 100.00 |
| City   | Anaheim                     |                               | State | Zip Code (Plus 4) | 4         | 15            | 2020             |        |        |
| ·  | Andrienn                    |                               | CA    | 928015007         |           |               |                  |        |        |
|  | me of Contri                | butor                         |       |                   | мо        | DAY           | YEAR             |        |        |
| Mailing  | Address                     | 730 Paul Ave Paul             |       |                   |           |               | \$               | 100.00 |        |
| City   | Palo Alto                   |                               | State | Zip Code (Plus 4) | 4         | 21            | 2020             |        |        |
|  |                             |                               | CA    | 943063162         |           |               |                  |        |        |
| Full Nan                                       | <b>me of Contri</b><br>Lapi | butor                         |       |                   | МО        | DAY           | YEAR             |        |        |
| Mailing  | Address                     | 418 W Stafford St             |       |                   |           |               |                  | \$     | 100.00 |
| City   | Philadelphia                | <u> </u>                      | State | Zip Code (Plus 4) | 5         | 9             | 2020             |        |        |
|  |                             |                               | PA    | 191444408         |           |               |                  |        |        |
|  | me of Contri<br>Ooughton    | butor                         |       |                   | МО        | DAY           | YEAR             |        |        |
| Mailing  | Address                     | 605 E Scott St                |       |                   |           |               |                  | \$     | 100.00 |
| City   | Olyphant                    |                               | State | Zip Code (Plus 4) | 5         | 18            | 2020             |        |        |
|  |                             |                               | PA    | l                 |           |               |                  |        |        |
|  |                             |                               |       | 184471990         |           |               |                  |        |        |
| Full Nan<br>Kathlee                            | me of Contri<br>en Furin    | butor                         |       | 1844/1990         | МО        | DAY           | YEAR             |        |        |
| Kathlee  |                             | <b>butor</b> 7115 Cresheim Rd |       | 1844/1990         | мо        | DAY           | YEAR             | \$     | 250.00 |
| Kathlee<br>Mailing                             | en Furin<br>Address         | 7115 Cresheim Rd              | State | Zip Code (Plus 4) | <b>MO</b> | <b>DAY</b> 26 | <b>YEAR</b> 2020 | \$     | 250.00 |
| Kathlee<br>Mailing                             | en Furin                    | 7115 Cresheim Rd              |       |                   |           |               |                  | \$     | 250.00 |

| Full Nan   | ne of Contributor  |                    |  |           |                 |                      |              |       |
|--|--|--------------------|--|-----------|-----------------|----------------------|--------------|-------|
| Antoine  | ette M Hamidian  |                    |  | МО        | DAY             | YEAR                 |              |       |
| Mailing  | Address 13 Union Mill Rd   |                    |  |           |                 |                      | <b>\$</b> 10 | 00.00 |
| City   | Covington Township   | State              | Zip Code (Plus 4)                      | 5         | 18              | 2020                 |              |       |
|  |  | PA                 | 184447912                              |           |                 |                      |              |       |
| Full Name of Contributor Michele Hangley                 |  |                    |  |           | DAY             | YEAR                 |              |       |
| Michele  | Hangley  |                    |  |           |                 |                      |              |       |
| Mailing  | Mailing Address 710 Carpenter St   |                    |  |           |                 |                      | \$ 25        | 50.00 |
| City   | Philadelphia   | State              | Zip Code (Plus 4)                      | 4         | 10              | 2020                 |              |       |
|  | ·  | PA                 | 191473908                              |           |                 |                      |              |       |
|  | <b>ne of Contributor</b><br>em Hasan   |                    |  | МО        | DAY             | YEAR                 |              |       |
| Mailing  | Address 420 Harrison Dr  |                    |  |           |                 |                      | <b>\$</b> 25 | 50.00 |
| City   | Hockessin  | State              | Zip Code (Plus 4)                      | 5         | 13              | 2020                 |              |       |
|  |  | DE                 | 197071914                              |           |                 |                      |              |       |
|  |  |                    |  |           |                 |                      |              |       |
| Full Nam   | me of Contributor<br>Hill  |                    |  | МО        | DAY             | YEAR                 |              |       |
| Darryl H   |  |                    |  | МО        | DAY             | YEAR                 | \$ 25        | 50.00 |
| Darryl H   | Address 419 N 20th St  | State              | Zip Code (Plus 4)                      | <b>MO</b> | <b>DAY</b> 29   | <b>YEAR</b> 2020     | \$ 25        | 50.00 |
| Darryl H   | Hill   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 191303846     |           |                 |                      | \$ 2!        | 50.00 |
| Mailing City   | Address 419 N 20th St  Philadelphia  me of Contributor   |                    |  |           |                 |                      | \$ 2!        | 50.00 |
| Mailing City Full Nam Jovida J                           | Address 419 N 20th St  Philadelphia  me of Contributor   |                    |  | 4         | 29<br>DAY       | 2020<br>YEAR         |              | 50.00 |
| Darryl H Mailing City Full Nam Jovida J Mailing          | Address 419 N 20th St  Philadelphia  me of Contributor J. Hill  Address 419 N 20th St  |                    |  | 4         | 29              | 2020                 |              |       |
| Darryl H Mailing City Full Nam Jovida J Mailing          | Address 419 N 20th St  Philadelphia  me of Contributor  J. Hill  | PA                 | 191303846                              | мо        | 29<br>DAY       | 2020<br>YEAR         |              |       |
| City  Full Nam Jovida J  Mailing  City                   | Address 419 N 20th St  Philadelphia  me of Contributor J. Hill  Address 419 N 20th St  | PA                 | 191303846  Zip Code (Plus 4)           | мо        | 29<br>DAY       | 2020<br>YEAR         |              |       |
| City  Full Nam Jovida J  Mailing  City  Full Nam Abu (Sh | Address 419 N 20th St  Philadelphia  me of Contributor  J. Hill  Address 419 N 20th St  Philadelphia  me of Contributor                                      | PA                 | 191303846  Zip Code (Plus 4)           | MO 4      | 29 DAY 29       | 2020 YEAR 2020       | \$ 25        |       |
| Full Nam Jovida J Mailing City  Full Nam Abu (Sh Mailing | Address 419 N 20th St  Philadelphia  me of Contributor  J. Hill  Address 419 N 20th St  Philadelphia  me of Contributor  namsul) Huda  Address 105 Grove Cir | PA                 | 191303846  Zip Code (Plus 4)           | MO 4      | 29<br>DAY<br>29 | 2020<br>YEAR<br>2020 | \$ 25        | 50.00 |
| Full Nam Jovida J Mailing City  Full Nam Abu (Sh Mailing | Address 419 N 20th St  Philadelphia  me of Contributor  J. Hill  Address 419 N 20th St  Philadelphia  me of Contributor  mamsul) Huda                        | State PA           | 191303846  Zip Code (Plus 4) 191303846 | MO 4      | 29 DAY 29       | 2020 YEAR 2020       | \$ 25        | 50.00 |

|   |  |                                |  |             |                |                      | PAGE |                  |
|---|--|--------------------------------|--|-------------|----------------|----------------------|------|------------------|
| Full Name of Cont   | ributor  |                                |  | МО          | DAY            | YEAR                 |      |                  |
| Lynne Jacobs  |  |                                |  |             |                |                      |      |                  |
| Mailing Address   | 7734 Devon St  |                                |  |             |                |                      | \$   | 100.00           |
| <b>City</b> Philadelph  | ia   | State                          | Zip Code (Plus 4)                      | 3           | 18             | 2020                 |      |                  |
| · · · · · · · · · · · · · · · · · · ·   |  | PA                             | 191183502                              |             |                |                      |      |                  |
| Full Name of Cont   | ributor  |                                |  | МО          | DAY            | YEAR                 |      |                  |
| Douglas Lawrence  |  |                                |  |             |                |                      |      |                  |
| Mailing Address   | 208 E 51st St 312  |                                |  |             |                |                      | \$   | 250.00           |
| City New York   |  | State                          | Zip Code (Plus 4)                      | 3           | 14             | 2020                 |      |                  |
| New York  |  | NY                             | 100226557                              |             |                |                      |      |                  |
| Full Name of Contr  | ributor  |                                |  | МО          | DAY            | YEAR                 |      |                  |
|   |  |                                |  |             |                |                      |      |                  |
| Mailing Address   | 422 W Chestnut Hil   | l Ave                          |  |             | 20             | 2020                 | \$   | 250.00           |
| <b>City</b> Philadelph  | ia   | State                          | Zip Code (Plus 4)                      | 4           | 20             | 2020                 |      |                  |
|   |  | PA                             | 191183712                              |             |                |                      |      |                  |
| Full Name of Contributor  |  |                                |  |             |                |                      |      |                  |
| Full Name of Control  | ributor  | I                              |  | МО          | DAY            | YEAR                 |      |                  |
|   | ributor<br>3 Benjamin Ln   |                                |  | МО          | DAY            | YEAR                 | \$   | 100.00           |
| Maria McNeill  Mailing Address  |  | State                          | Zip Code (Plus 4)                      | <b>MO</b> 5 | <b>DAY</b> 6   | <b>YEAR</b> 2020     | \$   | 100.00           |
| Maria McNeill  Mailing Address  |  | <b>State</b> PA                | <b>Zip Code (Plus 4)</b> 193731096     |             |                |                      | \$   | 100.00           |
| Maria McNeill  Mailing Address  | 3 Benjamin Ln  |                                | 1                                      |             | 6              |                      | \$   | 100.00           |
| Maria McNeill  Mailing Address  City Thornton  Full Name of Control   | 3 Benjamin Ln  | PA                             | 1                                      | 5           | DAY            | 2020                 | \$   | 100.00<br>250.00 |
| Maria McNeill  Mailing Address  City Thornton  Full Name of Control Barbara Miller  Mailing Address   | 3 Benjamin Ln  | PA                             | 1                                      | 5           | 6              | 2020                 |      |                  |
| Maria McNeill  Mailing Address  City Thornton  Full Name of Control Barbara Miller  Mailing Address   | 3 Benjamin Ln  | PA ee Ct                       | 193731096                              | мо          | DAY            | 2020<br>YEAR         |      |                  |
| Maria McNeill  Mailing Address  City Thornton  Full Name of Control Barbara Miller  Mailing Address   | 3 Benjamin Ln  ributor  2522 W Hidden Lak                            | PA Te Ct State                 | 193731096  Zip Code (Plus 4)           | мо          | DAY            | 2020<br>YEAR         |      |                  |
| Maria McNeill  Mailing Address  City Thornton  Full Name of Conte Barbara Miller  Mailing Address  City Peoria  | 3 Benjamin Ln  ributor  2522 W Hidden Lak                            | PA Te Ct State IL              | 193731096  Zip Code (Plus 4)           | MO 4        | 6 <b>DAY</b> 7 | 2020<br>YEAR<br>2020 |      |                  |
| Maria McNeill  Mailing Address  City Thornton  Full Name of Contents Barbara Miller  Mailing Address  City Peoria  Full Name of Contents Elizabeth Omand  Mailing Address | 3 Benjamin Ln  ributor  2522 W Hidden Lak  ributor  7900 Old York Rd | PA Te Ct State IL              | 193731096  Zip Code (Plus 4) 616143200 | MO 4        | 6 <b>DAY</b> 7 | 2020<br>YEAR<br>2020 | \$   | 250.00           |
| Maria McNeill  Mailing Address  City Thornton  Full Name of Contents Barbara Miller  Mailing Address  City Peoria  Full Name of Contents Elizabeth Omand                  | 3 Benjamin Ln  ributor  2522 W Hidden Lak  ributor  7900 Old York Rd | PA  Te Ct  State  IL  Apt 407B | 193731096  Zip Code (Plus 4)           | MO 4        | 6 <b>DAY</b> 7 | 2020 YEAR 2020       | \$   | 250.00           |

| Full Name of Contribut  | or                                     |                    |   |               |            |                      |              |
|---|--|--------------------|---|---------------|------------|----------------------|--------------|
| Sara Picard   |  |                    |   | МО            | DAY        | YEAR                 |              |
| Mailing Address 23  | 361 Hickory Rd                         |                    |   |               |            |                      | \$<br>100.00 |
| City Plymouth Meet  | tina                                   | State              | Zip Code (Plus 4)                       | 3             | 16         | 2020                 |              |
| Plymouth Meet   | ung                                    | PA                 | 194621049                               |               |            |                      |              |
|   |  |                    |   |               |            |                      |              |
| Full Name of Contributor Sangeeta Prasad  |  |                    |   |               | DAY        | YEAR                 |              |
| Mailing Address 72  |  |                    |   | \$<br>250.00  |            |                      |              |
| City Bryn Mawr  |  | State              | Zip Code (Plus 4)                       | 4             | 22         | 2020                 |              |
| Dryll Mawi  |  | PA                 | 190101735                               |               |            |                      |              |
|   |  |                    | 230202703                               |               |            |                      |              |
| <b>Full Name of Contribut</b><br>Abu Rahman   | cor                                    |                    |   | МО            | DAY        | YEAR                 |              |
| Mailing Address 30  | 04 Crum Creek Ln                       | Newtown Sq.        |   |               |            |                      | \$<br>100.00 |
| City Newtown Squa   | are                                    | State              | Zip Code (Plus 4)                       | 4             | 30         | 2020                 |              |
|   |  | PA                 | 190731604                               |               |            |                      |              |
|   |  |                    |   |               |            |                      |              |
| Full Name of Contribut  | or                                     |                    |   | МО            | DAY        | YEAR                 |              |
| Michael Reed  | or<br>5 Lakeview Rd                    |                    |   | МО            | DAY        |                      | \$<br>100.00 |
| Michael Reed  Mailing Address 35  |  | State              | Zip Code (Plus 4)                       | <b>MO</b> 4   | DAY 4      | <b>YEAR</b> 2020     | \$<br>100.00 |
| Michael Reed  Mailing Address 35  |  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 193351848      |               |            |                      | \$<br>100.00 |
| Michael Reed  Mailing Address 35  |  |                    |   |               |            |                      | \$<br>100.00 |
| Michael Reed  Mailing Address 35  | 5 Lakeview Rd                          |                    |   |               |            |                      | \$<br>100.00 |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut  Jeffrey Rieder  | 5 Lakeview Rd                          |                    |   | 4             | DAY        | 2020<br>YEAR         | \$<br>100.00 |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut  Jeffrey Rieder  | 5 Lakeview Rd  cor  235 Lakeland Dr    |                    |   | 4             | 4          | 2020                 |              |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut Jeffrey Rieder  Mailing Address 12   | 5 Lakeview Rd  cor  235 Lakeland Dr    | РА                 | 193351848                               | 4             | DAY        | 2020<br>YEAR         |              |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut Jeffrey Rieder  Mailing Address 12  City Scott Township  | 5 Lakeview Rd  cor  235 Lakeland Dr    | PA<br>State        | 193351848  Zip Code (Plus 4)            | 4             | DAY        | 2020<br>YEAR         |              |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut Jeffrey Rieder  Mailing Address 12   | 5 Lakeview Rd  cor  235 Lakeland Dr    | PA<br>State        | 193351848  Zip Code (Plus 4)            | 4             | DAY        | 2020<br>YEAR         |              |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut Jeffrey Rieder  Mailing Address 12  City Scott Township  Full Name of Contribut Len Rieser                     | 5 Lakeview Rd  cor  235 Lakeland Dr    | State PA           | 193351848  Zip Code (Plus 4)            | 4 <b>MO</b> 5 | 18 DAY     | 2020 YEAR 2020       |              |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut Jeffrey Rieder  Mailing Address 12  City Scott Township  Full Name of Contribut Len Rieser  Mailing Address 32 | 5 Lakeview Rd  cor  235 Lakeland Dr  p | State PA           | 193351848  Zip Code (Plus 4)            | 4 <b>MO</b> 5 | <b>DAY</b> | 2020<br>YEAR<br>2020 | \$<br>100.00 |
| Michael Reed  Mailing Address 35  City Downingtown  Full Name of Contribut Jeffrey Rieder  Mailing Address 12  City Scott Township  Full Name of Contribut Len Rieser  Mailing Address 32 | 5 Lakeview Rd  cor  235 Lakeland Dr  p | State PA           | 193351848  Zip Code (Plus 4)  184337817 | 4 MO          | 18 DAY     | 2020 YEAR 2020       | \$<br>100.00 |

| Full Name of Contributor                    |                    |                                       |      |                  |      |                  |
|---|--------------------|---------------------------------------|------|------------------|------|------------------|
| James Rodway                                |                    |                                       | МО   | DAY              | YEAR |                  |
| Mailing Address 140 Electric                | : St               |                                       |      |                  |      | <b>\$</b> 100.00 |
| <b>City</b> Peckville                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>184522110 | 5    | 16               | 2020 |                  |
| Full Name of Contributor Robert Schreiber   | МО                 | DAY                                   | YEAR |                  |      |                  |
| Mailing Address 548 Heritag                 |                    |                                       |      | <b>\$</b> 100.00 |      |                  |
| <b>City</b> Yardley                         | <b>State</b><br>PA | 5                                     | 6    | 2020             |      |                  |
| Full Name of Contributor  Matthew Schultz   |                    |                                       | МО   | DAY              | YEAR |                  |
| Mailing Address 91 E Green                  | wood Ave           |                                       |      |                  |      | <b>\$</b> 100.00 |
| <b>City</b> Lansdowne                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190501625 | 4    | 30               | 2020 |                  |
| Full Name of Contributor Lesley Shepard     | <u>.</u>           | ·                                     | МО   | DAY              | YEAR |                  |
| Mailing Address 414 E Gowe                  | en Ave             |                                       |      |                  |      | <b>\$</b> 100.00 |
| <b>City</b> Philadelphia                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191191024 | 4    | 27               | 2020 |                  |
| Full Name of Contributor Harold Yaffe       |                    |                                       | МО   | DAY              | YEAR |                  |
| Mailing Address 237s18thst                  | Apt11a             |                                       |      |                  |      | <b>\$</b> 250.00 |
| City Phila State Zip Code (Plus 4) PA 19103 |                    |                                       |      | 27               | 2020 |                  |
|   | ·                  | '                                     |      |                  |      | PAGE TOTAL       |

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

**PAGE TOTAL \$** 6,218.00

#### **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 Candidat  | ame of Filing Committee or Candidate Report |                                    |                                       | g Period   |         |      |                    |            |
|---|---|------------------------------------|---------------------------------------|------------|---------|------|--------------------|------------|
| AHMAD, NINA FOR PA  |   |                                    | From:                                 | <u>3/1</u> | .0/2020 | То:  | : <u>5/18/2020</u> |            |
|   |   |                                    |                                       | DA         | TE      |      | ı                  | AMOUNT     |
| <b>Full Name of Contributing Committee</b> Laborers District Council PAC Fund |   |                                    |                                       | МО         | DAY     | YEAR |                    |            |
| Mailing Address 665 N Broad St F  | 5   |                                    |                                       | 5          |         |      | \$                 | 10,000.00  |
| <b>City</b> Philadelphia  | <b>State</b><br>PA                          |                                    | <b>Zip Code (Plus 4)</b><br>191232537 |            | 15      | 2020 |                    |            |
| Full Name of Contributing Committee Local Union #98 IBEW                      |   |                                    |                                       | МО         | DAY     | YEAR |                    |            |
| Mailing Address 1719 Spring Garde  City Philadelphia                          | State PA                                    | <b>Zip Code (Plus 4)</b> 191303915 |                                       |            | 24      | 2020 | \$                 | 25,000.00  |
| Full Name of Contributing Committee Philadelphia Association of Retail Dru    | ggists Phila PAC                            | -                                  |                                       | МО         | DAY     | YEAR |                    |            |
| Mailing Address 2200 Michener St  | Ste 10                                      |                                    |                                       |            |         |      | \$                 | 500.00     |
| <b>City</b> Philadelphia  | <b>State</b><br>PA                          | <b>Zip Cod</b> 191154              | <b>e (Plus 4)</b><br>374              | 5          | 18      | 2020 |                    |            |
| Full Name of Contributing Committee She Can Win PAC                           |   |                                    |                                       | МО         | DAY     | YEAR |                    |            |
| Mailing Address 730? City Line Ave  | e Suite 310                                 |                                    |                                       |            |         |      | \$                 | 1,500.00   |
| <b>City</b> Philadelphia  | <b>State</b><br>PA                          | <b>Zip Cod</b> 19151               | e (Plus 4)                            | 3          | 13      | 2020 |                    |            |
|   |   |                                    |                                       |            |         |      |                    | PAGE TOTAL |
| Enter Grand Total of Part C on Sch  | edule I, Detailed Sur                       | nmary Pa                           | age, Sectio                           | n 3.       |         |      | \$                 | 37.000.00  |

### 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 Re                  |              |    |              |      | porting Period          |        |               |            |            |
|---|--------------|----|--------------|------|-------------------------|--------|---------------|------------|------------|
| AHMAD, NINA FOR PA  |              |    |              | Fror | m:                      | 3/10/2 | <u>020</u> To | <b>)</b> : | 5/18/2020  |
|   |              |    |              |      | DA                      | ATE    |               | A          | MOUNT      |
| Full Name of Contributor                                  |              |    |              |      | МО                      | DAY    | YEAR          |            |            |
| Nina Ahmad  |              |    |              |      | PIO                     |        | ILAK          |            |            |
| Mailing 405 E Gowen Ave                                   |              |    |              |      |                         |        |               | \$         | 27,000.00  |
| City Philadelphia   | State        | Zi | p Code (Plus | 5 4) | 4                       | 17     | 2020          | )          |            |
|   | PA 191191025 |    |              |      |                         |        |               |            |            |
| Employer Name N/A   | I I          |    |              |      |                         | tion   | Scientist     | :          |            |
| Employer Mailing Address/Principal Pl<br>Business         | ace of       |    | City         |      |                         | State  |               | Zip Cod    | e (Plus 4) |
| Same as Above   |              |    | Philadelp    | hia  |                         | PA     |               | 19119      |            |
| Full Name of Contributor Nina Ahmad                       |              |    |              |      | МО                      | DAY    | YEAR          |            |            |
| Mailing 405 E Gowen Ave                                   |              |    |              |      |                         |        |               | <b>\$</b>  | 89,716.67  |
| City Philadelphia   | State        | Zi | p Code (Plus | 5 4) | 5                       | 7      | 2020          | )          |            |
| ,   | PA           | 19 | 91191025     |      |                         |        |               |            |            |
| Employer Name N/A   | -1           |    |              |      | Occupation Scientist    |        |               |            |            |
| Employer Mailing Address/Principal Pl<br>Business         | ace of       |    | City         |      | State Zip Code (Plus 4) |        |               |            | e (Plus 4) |
| Same as Above   |              |    | Philadelp    | hia  |                         | PA     |               | 19119      |            |
| Full Name of Contributor Nina Ahmad                       |              |    |              |      | МО                      | DAY    | YEAR          |            |            |
| Mailing 405 E Gowen Ave                                   |              |    |              |      |                         |        |               | \$         | 19,716.67  |
| City Philadelphia   | State        | Zi | p Code (Plus | s 4) | 5                       | 11     | 2020          | )          |            |
|   | PA           | 19 | 91191025     |      |                         |        |               |            |            |
| Employer Name N/A   |              |    |              |      | Occupat                 | tion   | Scientist     |            |            |
| Employer Mailing Address/Principal Place of City Business |              |    |              | •    | State                   |        | Zip Cod       | e (Plus 4) |            |
| Same as Above   |              |    | Philadelp    | hia  |                         | PA     |               | 19119      |            |

| Full Name 12   |                              |          |     |                                   |                |               |                      |                  |           |  |  |
|--|------------------------------|----------|-----|-----------------------------------|----------------|---------------|----------------------|------------------|-----------|--|--|
| Full Name of Con<br>Nina Ahmad                                 | tributor                     |          |     |                                   | МО             | DAY           | YEAR                 |                  |           |  |  |
| Mailing<br>Address   | 405 E Gowen Ave              |          |     |                                   |                |               |                      | <u> </u><br>  \$ | 70,000.00 |  |  |
| City Philadelp   |                              | State    | Zir | Code (Plus 4)                     | 5              | 12            | 2020                 |                  | •         |  |  |
| Philadelph   | hia                          | PA       |     | 1191025                           |                |               |                      |                  |           |  |  |
| Employer Name  | N/A                          |          |     |                                   | Occupat        | i <b>on</b>   | cientist             | •                |           |  |  |
| Employer Mailing<br>Business                                   | Address/Principal Plac       | e of     |     | City                              |                | State         |                      | Zip Code (       | Plus 4)   |  |  |
| Same as Above  |                              |          |     | Philadelphia                      |                | PA            |                      | 19119            |           |  |  |
| Full Name of Con   | tributor                     |          |     |                                   | мо             | DAY           | YEAR                 |                  |           |  |  |
| Nina Ahmad   |                              |          |     |                                   |                |               |                      |                  |           |  |  |
| Mailing<br>Address   | 405 E Gowen Ave              |          |     |                                   |                |               |                      | \$               | 75,000.00 |  |  |
| <b>City</b> Philadelp  | hia                          | State    | Zip | Code (Plus 4)                     | 5              | 15            | 2020                 |                  |           |  |  |
|  |                              | PA       | 19  | 1191025                           |                |               |                      |                  |           |  |  |
| Employer Name  | imployer Name <sub>N/A</sub> |          |     |                                   |                |               | Occupation Scientist |                  |           |  |  |
| Employer Mailing<br>Business                                   | Address/Principal Plac       | e of     |     | City                              | 1              | State         |                      | Zip Code (       | Plus 4)   |  |  |
| Same as Above  |                              |          |     | Philadelphia                      | PA 19119       |               |                      |                  |           |  |  |
| Full Name of Con   | tributor                     |          |     |                                   | мо             | DAY           | YEAR                 |                  |           |  |  |
| Nina Ahmad   |                              |          |     |                                   |                |               |                      |                  |           |  |  |
| Mailing<br>Address   | 405 E Gowen Ave              |          |     |                                   |                |               |                      | \$               | 15,000.00 |  |  |
| <b>City</b> Philadelp  | hia                          | State    | Zip | Code (Plus 4)                     | 5              | 15            | 2020                 |                  |           |  |  |
|  |                              | PA       | 19  | 1191025                           |                |               |                      |                  |           |  |  |
| Employer Name  | N/A                          |          |     |                                   | Occupat        | i <b>on</b> S | cientist             | •                |           |  |  |
| Employer Mailing<br>Business                                   | Address/Principal Plac       | e of     |     | City                              |                | State         |                      | Zip Code (       | Plus 4)   |  |  |
| Same as Above  |                              |          |     | Philadelphia                      |                | PA            |                      | 19119            |           |  |  |
| Full Name of Con   | tributor                     |          |     |                                   | мо             | DAY           | YEAR                 |                  |           |  |  |
| Ziauddin Ahmero  | I                            |          |     |                                   |                |               |                      |                  |           |  |  |
|  | 6 Cedar Hollow Dr            |          |     |                                   |                |               |                      | <b>\$</b>        | 500.00    |  |  |
| Ziauddin Ahmero Mailing Address                                | 6 Cedar Hollow Dr            | State    | Zip | o Code (Plus 4)                   | 4              | 30            | 2020                 | 1 '              | 500.00    |  |  |
| Ziauddin Ahmero  Mailing Address                               | 6 Cedar Hollow Dr            | State PA |     | • <b>Code (Plus 4)</b><br>0866719 | - 4            | 30            | 2020                 | 1 '              | 500.00    |  |  |
| Ziauddin Ahmero Mailing Address                                | 6 Cedar Hollow Dr            |          |     |                                   | - 4<br>Occupat | ion           | 2020<br>hysiciar     |                  | 500.00    |  |  |
| Ziauddin Ahmero Mailing Address  City Rose Vall  Employer Name | 6 Cedar Hollow Dr<br>ey      | PA       |     |                                   |                | ion           |                      |                  |           |  |  |

| Full Name of Contributor Cecil Baker                      |       |                      |                                 |                |              |          |                   |
|---|-------|----------------------|---------------------------------|----------------|--------------|----------|-------------------|
| Mailing 264 S 11th St                                     |       |                      |                                 |                |              |          | \$ 500.00         |
|   | State | 7in                  | Code (Plus 4)                   | 4              | 30           | 2020     | 300.00            |
| <b>City</b> Philadelphia                                  |       |                      | 1076735                         |                |              |          |                   |
| Employer Name Cecil Baker + Partners                      | 3     |                      |                                 | Occupat        | ion A        | rchitect | •                 |
| Employer Mailing Address/Principal Place<br>Business      | e of  |                      | City                            |                | State        |          | Zip Code (Plus 4) |
| 1107 Walnut StSte 2                                       |       |                      | Philadelphia                    |                | PA           |          | 191074963         |
| Full Name of Contributor Golam Bhuiyan                    |       |                      |                                 | мо             | DAY          | YEAR     |                   |
| Mailing 10 Connett Dr                                     |       |                      |                                 |                |              |          | <b>\$</b> 500.00  |
| City Sayreville   |       |                      | <b>Code (Plus 4)</b><br>3722164 | 5              | 5            | 2020     |                   |
| Employer Name Ninon Corporation                           |       | Occupation President |                                 |                |              |          |                   |
| Employer Mailing Address/Principal Place of Business City |       |                      |                                 |                | State        |          | Zip Code (Plus 4) |
| 501 Finnegan LnUnit 2                                     |       |                      | North Brunswick                 | k NJ 089023499 |              |          | 089023499         |
| Full Name of Contributor Wendy Caroline Wolf              |       |                      |                                 | мо             | DAY          | YEAR     |                   |
| Mailing 224 Valley Ridge Rd                               |       |                      |                                 |                |              |          | <b>\$</b> 500.00  |
| <b>City</b> Haverford                                     |       |                      | <b>Code (Plus 4)</b><br>0412029 | 5              | 18           | 2020     |                   |
| Employer Name Not Employed                                |       |                      |                                 | Occupat        | c <b>ion</b> | ociologi | st                |
| Employer Mailing Address/Principal Place<br>Business      | e of  |                      | City                            |                | State        |          | Zip Code (Plus 4) |
| 224 Valley Ridge Rd                                       |       |                      | Haverford                       |                | PA           |          | 190412029         |
| Full Name of Contributor Dwight Evans                     |       |                      |                                 | мо             | DAY          | YEAR     |                   |
| Mailing 1600 E Cardeza St                                 |       |                      |                                 |                |              |          | \$ 1,000.00       |
| <b>City</b> Philadelphia                                  |       |                      | <b>Code (Plus 4)</b><br>1503308 | 5              | 15           | 2020     |                   |
| Employer Name US Government                               |       |                      |                                 | Occupat        | c <b>ion</b> | Congress | sman              |
| Employer Mailing Address/Principal Place                  | e of  |                      | City                            |                | State        |          | Zip Code (Plus 4) |
| Business 7250 Limekiln Pike                               |       |                      | Philadelphia                    |                | PA           |          | 191381337         |

| Full Name of Contribut  | tor                                       |                      |          |                                   | МО       | DAY           | YEAR                |                               |          |  |  |
|---|---|----------------------|----------|-----------------------------------|----------|---------------|---------------------|-------------------------------|----------|--|--|
| Judith Gay  |   |                      |          |                                   |          |               |                     | 1                             |          |  |  |
| Mailing 170<br>Address  | 0 Spring Garden S                         | St                   |          |                                   |          |               |                     | \$                            | 500.00   |  |  |
| <b>City</b> Philadelphia  |   | State                | Zip      | Code (Plus 4)                     | 5        | 11            | 2020                |                               |          |  |  |
| i i i i i i i i i i i i i i i i i i i   |   | PA                   | 19       | 1303936                           |          |               |                     |                               |          |  |  |
| Employer Name Con   | nmunity College o                         | ll<br>f Philadelphia |          |                                   | Occupat  | ion V         | ice Pres            | I<br>ident for Strate         |          |  |  |
| Employer Mailing Addr   | ess/Principal Plac                        | e of                 |          | CIL-                              |          | State         | T                   | Zip Code (Plus 4              | <u> </u> |  |  |
| Business  | ess/ Fillicipal Flac                      | e 01                 |          | City                              |          | State         |                     | Zip Code (Flus 4              | ,        |  |  |
| 1700 Spring Garden S  | St  |                      |          | Philadelphia                      |          | PA            |                     | 191303936                     |          |  |  |
| Full Name of Contribu   | tor                                       |                      |          |                                   |          | DAY           | VEAD                |                               |          |  |  |
| Syed Hossain  |   |                      |          |                                   | МО       | DAY           | YEAR                |                               |          |  |  |
| Mailing 81 \  | W Gate Dr                                 |                      |          |                                   |          |               |                     | <b>\$</b> 1,                  | 000.00   |  |  |
| <b>City</b> Huntington  |   | State                | Zip      | Code (Plus 4)                     | 5        | 15            | 2020                |                               |          |  |  |
|   |   | NY                   | 11       | 7436056                           |          |               |                     |                               |          |  |  |
| Employer Name Mpi   | ployer Name <sub>Mpi</sub>                |                      |          |                                   |          |               | Occupation Engineer |                               |          |  |  |
| Employer Mailing Addr<br>Business   | ess/Principal Plac                        | e of                 |          | City                              |          | State         |                     | Zip Code (Plus 4              | )        |  |  |
| Information Requeste  | ed  |                      |          | Huntington                        |          | NY            |                     | 11743                         |          |  |  |
| Full Name of Contribut  |   |                      | <u> </u> |                                   |          | '             | ı                   | <u> </u>                      |          |  |  |
| Marie Killian   | tor                                       |                      |          |                                   | мо       | DAY           | YEAR                |                               |          |  |  |
| Mailing 170   | 6 Marion St                               |                      |          |                                   |          |               |                     | <u> </u>                      | 300.00   |  |  |
|   |   | State                | 7ir      | Code (Plus 4)                     | 3        | 17            | 2020                | *                             | 300.00   |  |  |
| <b>City</b> Dunmore   |   | PA                   | _        | 5092516                           |          |               |                     |                               |          |  |  |
|   |   |                      | 10       | 3092310                           |          |               |                     |                               |          |  |  |
| Employer Name PWN   |   |                      |          |                                   | <u> </u> | _             |                     |                               |          |  |  |
|   | NEPA VOLUNTEER                            |                      |          |                                   | Occupat  | i <b>on</b>   | WNEPA               | Board Chair                   |          |  |  |
| Employer Mailing Addr<br>Business   |   | e of                 |          | City                              | Occupat  | ion P         |                     | Board Chair  Zip Code (Plus 4 | )        |  |  |
| Employer Mailing Addr<br>Business<br>Information Requeste                               | ess/Principal Plac                        | e of                 |          | <b>City</b> Dunmore               | Occupat  | P             |                     |                               | )        |  |  |
| Business  | r <b>ess/Principal Plac</b><br>ed         | e of                 |          |                                   | Occupat  | State         |                     | Zip Code (Plus 4              | )        |  |  |
| Information Requeste  Full Name of Contribut  Daphne Kwok                               | r <b>ess/Principal Plac</b><br>ed         | e of                 |          |                                   |          | State PA      |                     | <b>Zip Code (Plus 4</b> 18509 | 500.00   |  |  |
| Full Name of Contribution Daphne Kwok  Mailing Address  510                             | ess/Principal Plac                        | e of                 | Zip      |                                   |          | State PA      |                     | <b>Zip Code (Plus 4</b> 18509 |          |  |  |
| Business Information Requeste  Full Name of Contribut Daphne Kwok  Mailing Address  510 | ess/Principal Plac                        |                      |          | Dunmore                           | мо       | State PA  DAY | YEAR                | <b>Zip Code (Plus 4</b> 18509 |          |  |  |
| Full Name of Contribution Daphne Kwok  Mailing Address  510                             | ress/Principal Place  d  tor  9 Philip Rd | State                |          | Dunmore  Code (Plus 4)            | мо       | State PA  DAY | <b>YEAR</b> 2020    | <b>Zip Code (Plus 4</b> 18509 |          |  |  |
| Full Name of Contribute Daphne Kwok  Mailing Address  City Annandale  Employer Name AAR | ess/Principal Placed  tor  9 Philip Rd    | State<br>VA          |          | Dunmore  D Code (Plus 4)  0035526 | мо 5     | State PA  DAY | <b>YEAR</b> 2020    | <b>Zip Code (Plus 4</b> 18509 | 500.00   |  |  |
| Full Name of Contribute Daphne Kwok  Mailing Address  City Annandale                    | ess/Principal Placed  tor  9 Philip Rd    | State<br>VA          |          | Dunmore  Code (Plus 4)            | мо 5     | PA  DAY  16   | <b>YEAR</b> 2020    | <b>Zip Code (Plus 4</b> 18509 | 500.00   |  |  |

| Full Name of Con             | tributor                   |       |     |                 | мо      | DAY              | YEAR                    |                |          |  |  |
|------------------------------|----------------------------|-------|-----|-----------------|---------|------------------|-------------------------|----------------|----------|--|--|
| Loida Lewis                  |                            |       |     |                 |         |                  |                         | Ц              |          |  |  |
| Mailing<br>Address           | 115 E 57th St Ste 14       | 30    |     |                 |         |                  |                         | \$             | 1,000.00 |  |  |
| City New York                | (                          | State | Zij | p Code (Plus 4) | 5       | 13               | 2020                    |                |          |  |  |
|                              |                            | NY    | 10  | 00222110        |         |                  |                         |                |          |  |  |
| Employer Name                | TLC Beatrice LLC           |       |     |                 | Occupat | ion L            | awyer                   |                |          |  |  |
| Employer Mailing<br>Business | Address/Principal Plac     | e of  |     | City            |         | State            |                         | Zip Code (Plus | : 4)     |  |  |
| 9 W 57th StFl 48             | 3                          |       |     | New York        |         | NY               |                         | 100192701      |          |  |  |
| Full Name of Con             | tributor                   |       |     |                 |         | DAY              | VEAD                    |                |          |  |  |
| S Musunuri                   |                            |       |     |                 | МО      | DAY              | YEAR                    |                |          |  |  |
| Mailing<br>Address           | 482 Byers Rd               |       |     |                 |         |                  |                         | <b>\$</b>      | 500.00   |  |  |
| City Chester S               | Springs                    | State | Zij | p Code (Plus 4) | 3       | 12               | 2020                    |                |          |  |  |
|                              |                            | PA    | 19  | 94259508        |         |                  |                         |                |          |  |  |
| Employer Name                | Employer Name Ocugen, Inc. |       |     |                 |         |                  | Occupation Entrepreneur |                |          |  |  |
| Employer Mailing<br>Business | Address/Principal Plac     | e of  |     | City            |         | State            |                         | Zip Code (Plus | : 4)     |  |  |
| 5 Great Valley Pk            | kwySte 160                 |       |     | Malvern         |         | PA               |                         | 193551445      |          |  |  |
| Full Name of Con             | tributor                   |       |     | •               |         |                  |                         |                |          |  |  |
| Anup Patel                   |                            |       |     |                 | МО      | DAY              | YEAR                    |                |          |  |  |
| Mailing<br>Address           | 461 Ice Harvest Dr         |       |     |                 |         | 5 3              |                         | \$             | 500.00   |  |  |
| <b>City</b> Mountain         | Тор                        | State | Zij | p Code (Plus 4) | 5       |                  | 2020                    |                |          |  |  |
|                              |                            | PA    | 18  | 37079607        |         |                  |                         |                |          |  |  |
| Employer Name                | Self Employed              |       |     |                 | Occupat | i <b>on</b><br>S | elf Emp                 | loyed          |          |  |  |
| Employer Mailing<br>Business | Address/Principal Plac     | e of  |     | City            | •       | State            |                         | Zip Code (Plus | : 4)     |  |  |
| 461 Ice Harvest              | Dr                         |       |     | Mountain Top    |         | PA               |                         | 187079607      |          |  |  |
| Full Name of Con             | tributor                   |       |     |                 | мо      | DAY              | YEAR                    |                |          |  |  |
| Mailing                      | 4117 Main C+               |       |     |                 |         |                  |                         | 4              |          |  |  |
| Address                      | 4117 Main St               |       |     |                 | 5       | 6                | 2020                    | \$             | 500.00   |  |  |
| <b>City</b> Whitehall        | l                          | State |     | p Code (Plus 4) | 3       | ם ס              | 2020                    |                |          |  |  |
|                              |                            | PA    | 18  | 30521607        |         |                  |                         |                |          |  |  |
| Employer Name                | Whitehall Pharmacy         |       |     |                 | Occupat | i <b>on</b> P    | harmac                  | ist            |          |  |  |
| Employer Mailing<br>Business | Address/Principal Plac     | e of  |     | City            |         | State            |                         | Zip Code (Plus | 3 4)     |  |  |
| 4117 Main St                 |                            |       |     | Whitehall       |         | PA               |                         | 180521607      |          |  |  |
|                              |                            |       |     | •               |         |                  | - 1                     |                |          |  |  |

|  |                    |                     |            |                             |            |              |                   | FAGL           | 17     |
|--|--------------------|---------------------|------------|-----------------------------|------------|--------------|-------------------|----------------|--------|
| Full Name of Co  |                    |                     |            |                             | МО         | DAY          | YEAR              |                |        |
| Mailing<br>Address                                     | 2340 Bella Mag     | nolia Ct            |            |                             |            |              |                   | <u> </u>       | 500.00 |
| <b>City</b> Oakland                                    | d Twp              | <b>State</b><br>MI  |            | p Code (Plus 4)<br>33064775 | 4          | 30           | 2020              |                |        |
| Employer Name  | Manufacturing      | Quality Resources G | roup       |                             | Occupat    | t <b>ion</b> | residen           | t              |        |
| Employer Mailing Address/Principal Place of City State |                    |                     |            |                             |            | State        | Zip Code (Plus 4) |                |        |
|  |                    |                     |            | Detroit                     | MI         |              |                   | 482152438      |        |
| Full Name of Contributor Simone Williams               |                    |                     | МО         | DAY                         | YEAR       |              |                   |                |        |
| Mailing<br>Address                                     | 1717 K St NW       |                     |            |                             |            |              |                   | \$             | 500.00 |
| City Washin  | gton               | State               | Zi         | p Code (Plus 4)             | 4          | 9            | 2020              |                |        |
|  |                    | DC                  | 20         | 00065343                    |            |              |                   |                |        |
| Employer Name  | Self Employed      | -                   | •          |                             | Occupat    | tion /       | attorney          | ,              |        |
| Employer Mailin<br>Business                            | g Address/Princip  | al Place of         |            | City                        | <u>. I</u> | State        |                   | Zip Code (Plus | 4)     |
| 101 Constitutio  | n Ave NW           |                     |            | Washington                  |            | DC           |                   | 200012133      |        |
| Enter Grand T  | otal of Part C on  | Schedule I, Detai   | led Sumr   | nary Page Secti             | on 3       |              |                   | PAGE TO        | TAL    |
| Liitei Giailu I  | otal of Fait C Oil | Schedule 1, Detail  | ica Suilli | nary rage, secti            | J., J.     |              |                   | t              |        |

\$ 305,233.34

### 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 Peri | od                   |           |
|---------------------------------------|----------------|----------------------|-----------|
| AHMAD, NINA FOR PA                    | From:          | 3/10/2020 <b>To:</b> | 5/18/2020 |

|                                 |                                   |                                | D  | ATE |      | AMOUNT      |
|---------------------------------|-----------------------------------|--------------------------------|----|-----|------|-------------|
| Full Name Indigo Strategies LLC |                                   |                                | МО | DAY | YEAR |             |
| Mailing Address 312 9th Stre    | Mailing Address 312 9th Street NW |                                |    |     | 2020 | \$ 3,000.00 |
| <b>City</b> Washington          | State<br>DC                       | <b>Zip Code (Plus 4)</b> 20001 | 4  | 6   | 2020 |             |
| Receipt Description Return      | Check Payment                     |                                |    |     |      |             |

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

**PAGE TOTAL** 3,000.00

\$

#### **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 Per  | iod                  |           |
|---|----------------|----------------------|-----------|
| AHMAD, NINA FOR PA  | From:          | 3/10/2020 <b>To:</b> | 5/18/2020 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P   | PER CONTRIBUTO | R                    |           |
| TOTAL for the Reporting Pe  | eriod (1)      | \$                   | 0.00      |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR  | TF)            |                      |           |
| 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 Candida | ate                 |                       | Reporting | 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 So   | chedule II In-Vir   | nd Contributions Deta | iled Sum  | mary Pag     |       |     | DACE TOTAL |
| Section 2.                          | iledule 11, 111-Kii | id Contributions Deta | neu Sum   | illial 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                          |             |         |            |         | Re     | porting l | Period    |       |        |                        |
|--|-------------|---------|------------|---------|--------|-----------|-----------|-------|--------|------------------------|
|  |             |         |            |         | Fro    | om:       |           | To:   |        |                        |
|  |             |         |            |         | •      |           | DATE      |       |        | AMOUNT                 |
| Full Name of Contributor                                       |             |         |            |         |        | МО        | DAY       | YEAR  |        |                        |
| Mailing Address  |             |         |            |         |        |           |           |       | \$     | 0.00                   |
| City   | State       |         | Zip Code(I | Plus 4) |        |           |           |       |        |                        |
| Employer of Contributor  |             |         |            |         |        | Occupa    | tion      |       | •      |                        |
| Employer Mailing Address/Principal Plac<br>Business            | ce of       | City    |            | State   |        | Zip<br>4) | Code(Plus | Descr | iption | of Contribution        |
| Enter Grand Total of Part G on Sch<br>Summary Page, Section 3. | edule II, I | in-Kind | Contributi | ons De  | etaile | ed        |           |       |        | <b>PAGE TOTAL</b> 0.00 |

## SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Period |           |     |                  |  |  |  |
|---------------------------------------|------------------|-----------|-----|------------------|--|--|--|
| AHMAD, NINA FOR PA                    | From             | 3/10/2020 | То: | <u>5/18/2020</u> |  |  |  |

|  |                    |                                    |    | DATE                        |      |             | AMOUNT |
|--|--------------------|------------------------------------|----|-----------------------------|------|-------------|--------|
| <b>To Whom Paid</b><br>Shoshana Bricklin |                    |                                    | МО | DAY                         | YEAR |             |        |
| Mailing Address 8423 Anderso             | n St               |                                    | 4  | 10                          | 2020 | \$          | 250.00 |
| <b>City</b> Philadelphia                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 191182801 | 1  | otion of Expunication C     |      |             |        |
| <b>To Whom Paid</b><br>Citizens Bank     |                    |                                    | МО | DAY                         | YEAR |             |        |
| Mailing Address PO Box 7000              |                    |                                    | 3  | 16                          | 2020 | \$          | 30.00  |
| <b>City</b> Providence                   | <b>State</b><br>RI | <b>Zip Code (Plus 4)</b> 029407000 | 1  | otion of Exp<br>ransfer Fee |      |             |        |
| <b>To Whom Paid</b><br>Citizens Bank     |                    |                                    | МО | DAY                         | YEAR |             |        |
| Mailing Address PO Box 7000              |                    |                                    | 4  | 17                          | 2020 | \$          | 18.00  |
| <b>City</b> Providence                   | <b>State</b><br>RI | <b>Zip Code (Plus 4)</b> 029407000 |    | otion of Exp<br>ransfer Fee |      |             |        |
| <b>To Whom Paid</b><br>Citizens Bank     | ·                  | ·                                  | МО | DAY                         | YEAR |             |        |
| Mailing Address PO Box 7000              |                    |                                    | 5  | 1                           | 2020 | \$          | 20.00  |
| <b>City</b> Providence                   | <b>State</b><br>RI | <b>Zip Code (Plus 4)</b> 029407000 |    | otion of Exp                |      | ESS PAYMENT | -S     |
| <b>To Whom Paid</b><br>Citizens Bank     |                    |                                    | МО | DAY                         | YEAR |             |        |
| Mailing Address PO Box 7000              |                    |                                    | 5  | 1                           | 2020 | \$          | 20.00  |
| <b>City</b> Providence                   | <b>State</b><br>RI | <b>Zip Code (Plus 4)</b> 029407000 | 1  | tion of Exp                 |      | ESS PAYMENT | -S     |
|  |                    |                                    |    |                             |      |             |        |

| To Whom Paid Facebook, Inc  Mailing Address  1601 Willow Rd  State CA  2ip Code (Plus 4) 940251452  Mo DAY YEAR  Description of Expenditure Wire Transfer Fee  To Whom Paid Facebook, Inc  Mo DAY YEAR  3 12 2020 \$ 3.4.  2ip Code (Plus 4) 940251452  Description of Expenditure Digital Advertising  To Whom Paid Facebook, Inc  Mo DAY YEAR  Address  1601 Willow Rd  CA  2ip Code (Plus 4) 940251452  Description of Expenditure Digital Advertising  To Whom Paid Fedex Office  Mo DAY YEAR  CA  2ip Code (Plus 4) 940251452  Description of Expenditure Digital Advertising  To Whom Paid Fedex Office  Mo DAY YEAR  City King Of Prussia  State 2ip Code (Plus 4) 940251452  Description of Expenditure Mailing Address  PO Box 2312  To Whom Paid Friends of Cathy Spahr  Mo DAY YEAR  Mailing Address PO Box 2312  State 2ip Code (Plus 4) 194062390  Mo DAY YEAR  Description of Expenditure Mailing Materials  To Whom Paid Friends of Cathy Spahr  Mo DAY YEAR  Description of Expenditure Mailing Address PO Box 2312  State 2ip Code (Plus 4) 194062390  Description of Expenditure Mailing Address PO Box 2312  State PA Description of Expenditure Event Contribution  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  Address  Description of Expenditure Event Contribution  |                             |                   |       |    |     |           | FAV | ∃E 23     |
|--|-----------------------------|-------------------|-------|----|-----|-----------|-----|-----------|
| State  |                             |                   |       | мо | DAY | YEAR      |     |           |
| To Whom Paid Facebook, Inc    Mailing Address   1601 Willow Rd   State   CA   940251452   Description of Expenditure   Digital Advertising   | Mailing Address PO          | Box 7000          |       | 5  | 15  | 2020      | \$  | 18.00     |
| Mailing   Address   1601   Willow   Rd   State   CA   State   CA   State   CA   State   CA   State   CA   State   CA   State   State   CA   State   State   CA   State   Sta   | <b>City</b> Providence      |                   |       |    |     |           |     |           |
| City   Menlo Park   State   CA   2ip Code (Plus 4)   940251452   Digital Advertising   |                             |                   |       | мо | DAY | YEAR      |     |           |
| CA   940251452   Digital Advertising   | Mailing Address 160         | 01 Willow Rd      |       | 3  | 12  | 2020      | \$  | 3.42      |
| Facebook, Inc  Mailing Address 1601 Willow Rd  CA Zip Code (Plus 4) 940251452 Description of Expenditure Digital Advertising  To Whom Paid Fedex Office  Mailing Address 99 Town Center Rd  City King Of Prussia  State PA Zip Code (Plus 4) 194062390 Prussia  To Whom Paid Friends of Cathy Spahr  Mo DAY YEAR  Mailing Address PO Box 2312  City Boothwyn  State PA Zip Code (Plus 4) 194062390 Poscription of Expenditure Mailing Materials  To Whom Paid Friends of Cathy Spahr  Mo DAY YEAR  Mailing Address PO Box 2312  City Boothwyn  State PA Zip Code (Plus 4) 190618312  Description of Expenditure Event Contribution  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  Mo DAY YEAR  State PA Zip Code (Plus 4) 190618312  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  Mo DAY YEAR  State PA Zip Code (Plus 4) 190618312  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  Mailing Address 1101 15th St NW Ste 900  State Zip Code (Plus 4) Description of Expenditure Event Contribution  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  Mailing Address 1101 15th St NW Ste 900  State Zip Code (Plus 4) Description of Expenditure  | City Menlo Park             |                   |       |    |     |           |     |           |
| City   Menlo Park   State   CA   Plus 4   P40251452   Description of Expenditure   Digital Advertising   |                             |                   |       | МО | DAY | YEAR      |     |           |
| To Whom Paid Friends of Cathy Spahr  Mailing Address PO Box 2312  City Boothwyn Paid Greenberg Quinlan Rosner Research  Mo Day YEAR  Zip Code (Plus 4) 194062390  Mo Day YEAR  Zip Code (Plus 4) 194062390  Mo Day YEAR  Mo Day YEAR  Mo Day YEAR  Zip Code (Plus 4) 194062390  Mo Day YEAR  Zip Code (Plus 4) 2020 \$ 55.00  Zip Code (Plus 4) 190618312  Mo Day YEAR  Zip Code (Plus 4) 2020 \$ 55.00  Zip Code (Plus 4) 3 3 11 2020 \$ 55.00  To Whom Paid Greenberg Quinlan Rosner Research  Mo Day YEAR  Zip Code (Plus 4) 190618312  To Whom Paid Greenberg Quinlan Rosner Research  Mo Day YEAR  Zip Code (Plus 4) 190618312  Zip Code (Plus 4) 2020 \$ 20,000.00  Zip Code (Plus 4) 3 3 31 2020 \$ 20,000.00  Zip Code (Plus 4) 2020 \$ 20,000.00  | Mailing Address 160         | 01 Willow Rd      |       | 5  | 18  | 2020      | \$  | 20.50     |
| Fedex Office  Mailing Address 99 Town Center Rd  State PA 2ip Code (Plus 4) 194062390 Pown Mailing Materials  To Whom Paid Friends of Cathy Spahr  Mo DAY YEAR  Mailing Address PO Box 2312  State PA 2ip Code (Plus 4) 194062390 Pown Mailing Materials  To Whom Paid Friends of Cathy Spahr  Mo DAY YEAR  Mailing Address PO Box 2312  State PA 2ip Code (Plus 4) 190618312  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  MO DAY | City Menlo Park             |                   |       |    |     |           |     |           |
| City King Of Prussia  State PA P   |                             |                   |       | МО | DAY | YEAR      |     |           |
| To Whom Paid Friends of Cathy Spahr  Mailing Address PO Box 2312  State PA 2ip Code (Plus 4) 190618312  To Whom Paid Friends of Cathy Spahr  To Whom Paid Friends of Cathy Spahr  State PA 2ip Code (Plus 4) 190618312  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  Mo DAY YEAR  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  State Event Contribution  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  State Event Contribution  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  State Zip Code (Plus 4) Description of Expenditure  State Zip Code (Plus 4) Description of Expenditure  | Mailing Address 99          | Town Center Rd    |       | 5  | 7   | 2020      | \$  | 23.94     |
| Friends of Cathy Spahr  Mo DAY YEAR  Mailing Address PO Box 2312  State Zip Code (Plus 4) 190618312  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  Mo DAY YEAR  To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY YEAR  MO  | <b>City</b> King Of Prussia | 3                 |       | 1  | -   | penditure |     |           |
| City Boothwyn State PA State PA  |                             | r                 |       | МО | DAY | YEAR      |     |           |
| To Whom Paid Greenberg Quinlan Rosner Research  Mo DAY  YEAR  Mailing Address 1101 15th St NW Ste 900  State  Zip Code (Plus 4)  Description of Expenditure  Event Contribution  YEAR  2020 \$ 20,000.00   | Mailing Address PO          | Box 2312          |       | 3  | 11  | 2020      | \$  | 55.00     |
| Greenberg Quinlan Rosner Research  Mo DAY YEAR  Mailing Address 1101 15th St NW Ste 900 3 31 2020 \$ 20,000.00  City Washington State Zip Code (Plus 4) Description of Expenditure   | <b>City</b> Boothwyn        |                   |       |    |     |           |     |           |
| City Washington State Zip Code (Plus 4) Description of Expenditure   |                             | sner Research     |       | МО | DAY | YEAR      |     |           |
| washington Description of Experiature  | Mailing Address 110         | 01 15th St NW Sto | e 900 | 3  | 31  | 2020      | \$  | 20,000.00 |
|  | <b>City</b> Washington      |                   |       |    |     | penditure |     |           |

|   |                            |  |  |  |                                      | PAGE 24             |
|---|----------------------------|--|--|--|--------------------------------------|---------------------|
| <b>To Whom Paid</b><br>Greenberg Quinlan Rosner Res   | search                     |  | мо   | DAY  | YEAR                                 |                     |
| Mailing Address 1101 15th   | St NW Ste 900              |  | 4  | 21   | 2020                                 | \$<br>19,200.00     |
| <b>City</b> Washington  | <b>State</b> DC            | <b>Zip Code (Plus 4)</b> 200055002         | <b>Descrip</b> Poll Inv                                | otion of Exp<br>voice  | enditure                             |                     |
| <b>To Whom Paid</b><br>Indigo Strategies LLC  |                            |  | МО   | DAY  | YEAR                                 |                     |
| Mailing Address 312 9th Str   | reet NW                    |  | 3  | 31   | 2020                                 | \$<br>3,000.00      |
| <b>City</b> Washington  | <b>State</b> DC            | <b>Zip Code (Plus 4)</b> 20001             | <b>Descrip</b><br>Consult                              | otion of Exp   | enditure                             |                     |
| <b>To Whom Paid</b> Indigo Strategies LLC   |                            |  | МО   | DAY  | YEAR                                 |                     |
| Mailing Address 312 9th Str   | reet NW                    |  | 4  | 6  | 2020                                 | \$<br>3,000.00      |
| <b>City</b> Washington  | State 7:n Code (Blue 4)    |  |  |  | enditure                             |                     |
|   | DC                         | 20001                                      | Consult  | ing  |                                      |                     |
| <b>To Whom Paid</b> Indigo Strategies LLC   | DC                         | 20001                                      | МО   | DAY  | YEAR                                 |                     |
|   |                            | 20001                                      |  |  | <b>YEAR</b> 2020                     | \$<br>400.00        |
| Indigo Strategies LLC   |                            | Zip Code (Plus 4) 20001                    | MO 4 Descrip   | DAY  | 2020<br>penditure                    | 400.00              |
| Indigo Strategies LLC  Mailing Address 312 9th Str  | reet NW                    | Zip Code (Plus 4)                          | MO 4 Descrip   | DAY  22  Otion of Exp  | 2020<br>penditure                    | 400.00              |
| Indigo Strategies LLC  Mailing Address 312 9th Str  City Washington  To Whom Paid   | reet NW State DC           | Zip Code (Plus 4)                          | MO 4 Descrip   | DAY  22  Otion of Exp  Consulting                                  | 2020<br>penditure                    | 400.00<br>15,000.00 |
| Indigo Strategies LLC  Mailing Address 312 9th Str  City Washington  To Whom Paid Liberty Square PAC  | reet NW State DC           | Zip Code (Plus 4)                          | MO  4  Descrip Digital  MO  5  Descrip                 | DAY  22  Potion of Exp Consulting  DAY                             | 2020 penditure  YEAR  2020           | \$                  |
| Indigo Strategies LLC  Mailing Address 312 9th Str  City Washington  To Whom Paid Liberty Square PAC  Mailing Address PO Box 346                    | reet NW State DC 508 State | Zip Code (Plus 4) 20001  Zip Code (Plus 4) | MO  4  Descrip Digital  MO  5  Descrip                 | DAY  22  otion of Exp  Consulting  DAY  16                         | 2020 penditure  YEAR  2020           | \$                  |
| Indigo Strategies LLC  Mailing Address 312 9th Str  City Washington  To Whom Paid Liberty Square PAC  Mailing Address PO Box 346  City Philadelphia | State DC State PA          | Zip Code (Plus 4) 20001  Zip Code (Plus 4) | MO  4  Description Digital  MO  5  Description Voter C | DAY  22  Potion of Exp Consulting  DAY  16  Potion of Exp Outreach | 2020 Penditure  YEAR  2020 Penditure | \$                  |

|  |                     |                                |                                    |   |   |  | PAGE |                  |
|--|---------------------|--------------------------------|------------------------------------|---|---|--|------|------------------|
| <b>To Whom Paid</b><br>NGP VAN   |                     |                                |                                    | мо  | DAY   | YEAR   |      |                  |
| Mailing Address  | 48 Grove St Ste 202 | 2                              |                                    | 5   | 4   | 2020   | \$   | 1,050.00         |
| City Somervill   |                     | State                          | Zip Code (Plus 4)                  | Descrip   | tion of Exp   | enditure   |      |                  |
| Somerviii  | C                   | МА                             | 021442500                          | Databa  |   |  |      |                  |
| <b>To Whom Paid</b><br>Paragon Payment   | t Solutions         |                                |                                    | мо  | DAY   | YEAR   |      |                  |
| Mailing Address  | 2141 E Broadway Ro  | d Ste 202                      |                                    | 4   | 2   | 2020   | \$   | 369.44           |
| City Tempe   |                     | State                          | Zip Code (Plus 4)                  | Descrip   | tion of Exp   | enditure   |      |                  |
| Tempe  |                     | AZ 852821895                   |                                    |   |   |  |      |                  |
| <b>To Whom Paid</b><br>Paragon Payment   | t Solutions         |                                |                                    | мо  | DAY   | YEAR   |      |                  |
| Mailing Address  | 2141 E Broadway Ro  | d Ste 202                      |                                    | 5   | 4   | 2020   | \$   | 200.32           |
| City Tempe   |                     | State                          | Zip Code (Plus 4)                  | Descrip   | tion of Exp   | enditure   |      |                  |
| ·  |                     | AZ Zip Code (Plus 4) 852821895 |                                    |   |   |  |      |                  |
|  |                     |                                |                                    |   |   |  |      |                  |
| <b>To Whom Paid</b><br>Paychex, Inc  |                     |                                |                                    | мо  | DAY   | YEAR   |      |                  |
|  | 911 Panorama Trl S  |                                |                                    | мо 3  | <b>DAY</b> 10                                       | <b>YEAR</b> 2020                                 | \$   | 209.88           |
| Paychex, Inc  Mailing Address  |                     | State                          | Zip Code (Plus 4)                  | 3   | 10  | 2020   |      | 209.88           |
| Paychex, Inc  Mailing Address  |                     |                                | <b>Zip Code (Plus 4)</b> 146252311 | 3   | 10  | 2020   |      | 209.88           |
| Paychex, Inc  Mailing Address  |                     | State                          |                                    | 3<br>Descrip                                      | 10  | 2020   |      | 209.88           |
| Paychex, Inc  Mailing Address  City Rochestel  To Whom Paid  |                     | State<br>NY                    |                                    | 3  Descrip Payroll                                | 10  Stion of Exp                                    | 2020<br>penditure                                |      | 209.88<br>912.15 |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  | 911 Panorama Trl S  | State<br>NY                    |                                    | 3  Descrip Payroll  MO                            | 10 Potion of Exp Fee  DAY  17                       | 2020 penditure  YEAR  2020                       | \$   |                  |
| Paychex, Inc  Mailing Address  City Rochestel  To Whom Paid Paychex, Inc  Mailing Address  | 911 Panorama Trl S  | State<br>NY                    | 146252311                          | 3  Descrip Payroll  MO                            | 10  ption of Exp Fee  DAY  17                       | 2020 penditure  YEAR  2020                       | \$   |                  |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  | 911 Panorama Trl S  | State<br>NY<br>State           | 146252311  Zip Code (Plus 4)       | 3  Descrip Payroll  MO  3  Descrip                | 10  ption of Exp Fee  DAY  17                       | 2020 penditure  YEAR  2020                       | \$   |                  |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  City Rochester  To Whom Paid              | 911 Panorama Trl S  | State NY  State NY             | 146252311  Zip Code (Plus 4)       | 3  Descrip Payroll  MO  3  Descrip Payroll        | 10  Potion of Exp Fee  DAY  17  Dation of Exp Taxes | 2020  Penditure  YEAR  2020  Penditure           | \$   |                  |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc | 911 Panorama Trl S  | State NY  State NY             | 146252311  Zip Code (Plus 4)       | 3  Descrip Payroll  MO  3  Descrip Payroll  MO  3 | 10  ption of Exp Fee  DAY  17  ption of Exp Taxes   | 2020 Penditure  YEAR  2020 Penditure  YEAR  2020 | \$   | 912.15           |

|  |  |  |                                    |   |  |  |    | 26               |
|--|--|--|------------------------------------|---|--|--|----|------------------|
| <b>To Whom Paid</b><br>Paychex, Inc  |  |  |                                    | МО  | DAY  | YEAR   |    |                  |
| Mailing Address  | 911 Panorama Trl S                       |  |                                    | 4   | 10   | 2020   | \$ | 100.36           |
| City Rochester   |  | State  | Zip Code (Plus 4)                  | Descrip   | tion of Exp  | enditure   |    |                  |
| Trochieste.  |  | NY   | 146252311                          | Payroll   |  |  |    |                  |
| <b>To Whom Paid</b><br>Paychex, Inc  |  |  |                                    | мо  | DAY  | YEAR   |    |                  |
| Mailing Address  | 911 Panorama Trl S                       |  |                                    | 4   | 16   | 2020   | \$ | 658.52           |
| <b>City</b> Rochester  |  | State  | Zip Code (Plus 4)                  | Descrip   | tion of Exp  | enditure   |    |                  |
|  |  | NY   | 146252311                          | Payroll   |  |  |    |                  |
| <b>To Whom Paid</b><br>Paychex, Inc  |  |  |                                    | МО  | DAY  | YEAR   |    |                  |
| Mailing Address  | 911 Panorama Trl S                       |  |                                    | 4   | 20   | 2020   | \$ | 893.59           |
| <b>City</b> Rochester  |  | State  | Zip Code (Plus 4)                  | Descrip   | tion of Exp  | enditure   |    |                  |
|  |  | State         Zip Code (Plus 4)           NY         146252311 |                                    |   | Taxes  |  |    |                  |
|  |  |  |                                    |   |  |  |    |                  |
| <b>To Whom Paid</b><br>Paychex, Inc  |  |  |                                    | МО  | DAY  | YEAR   |    |                  |
|  | 911 Panorama Trl S                       |  |                                    | <b>MO</b> 4                                       | <b>DAY</b> 30  | <b>YEAR</b> 2020                                 | \$ | 658.51           |
| Paychex, Inc  Mailing Address  | 911 Panorama Trl S                       | State  | Zip Code (Plus 4)                  | 4   | 30   | 2020   | \$ | 658.51           |
| Paychex, Inc  Mailing Address  | 911 Panorama Trl S                       | <b>State</b><br>NY   | <b>Zip Code (Plus 4)</b> 146252311 | 4   | 30   | 2020   | \$ | 658.51           |
| Paychex, Inc  Mailing Address  | 911 Panorama Trl S                       |  |                                    | 4<br>Descrip                                      | 30   | 2020   | \$ | 658.51           |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid  | 911 Panorama Trl S<br>911 Panorama Trl S |  |                                    | 4  Descrip Payroll                                | 30<br>Stion of Exp<br>Taxes                              | 2020<br>penditure                                | \$ | 658.51<br>369.55 |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  |  |  |                                    | 4  Descrip Payroll  MO                            | 30  Ition of Exp Taxes  DAY                              | 2020 penditure  YEAR  2020                       |    |                  |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  |  | NY   | 146252311                          | 4  Descrip Payroll  MO                            | 30  Ition of Exp Taxes  DAY  11                          | 2020 penditure  YEAR  2020                       |    |                  |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  |  | NY   | 146252311  Zip Code (Plus 4)       | 4  Descrip Payroll  MO  5  Descrip                | 30  Ition of Exp Taxes  DAY  11                          | 2020 penditure  YEAR  2020                       |    |                  |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  City Rochester  To Whom Paid              |  | NY   | 146252311  Zip Code (Plus 4)       | 4  Descrip Payroll  MO  5  Descrip Payroll        | 30  Intion of Exp Taxes  DAY  11  Intion of Exp Fee      | 2020 Penditure  YEAR  2020 Penditure             |    |                  |
| Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc  Mailing Address  City Rochester  To Whom Paid Paychex, Inc | 911 Panorama Trl S                       | NY   | 146252311  Zip Code (Plus 4)       | 4  Descrip Payroll  MO  5  Descrip Payroll  MO  5 | 30  Intion of Exp Taxes  DAY  11  Intion of Exp Fee  DAY | 2020 Penditure  YEAR  2020 Penditure  YEAR  2020 | \$ | 369.55           |

| <b>To Whom Paid</b> Philadelphia Chinatown Development C  | Corporation        |                                       | МО  | DAY  | YEAR   |    |          |
|---|--------------------|---------------------------------------|---|--|--|----|----------|
| Mailing Address 301-305 North 9th   | Street             |                                       | 3   | 31   | 2020   | \$ | 954.80   |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19107     | Descrip<br>Space i                        | etion of Exp                               | enditure                                     |    |          |
| To Whom Paid Philly Neighborhood Networks PAC   |                    |                                       | мо  | DAY  | YEAR   |    |          |
| Mailing Address 6350 Lancaster Ave  | 2                  |                                       | 5   | 4  | 2020   | \$ | 250.00   |
| City Philadelphia State Zip Code (Plus 4) PA 191512507  |                    |                                       |   | otion of Exp<br>/ Mail Outr                |  |    |          |
| <b>To Whom Paid</b> Bilal Rice  |                    |                                       |   |  |  |    |          |
| Mailing Address 622 N 48th St   |                    |                                       | 3   | 16   | 2020   | \$ | 1,548.31 |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191392804 | <b>Descrip</b><br>Payroll                 | otion of Exp                               | enditure                                     |    |          |
|   |                    |                                       |   |  |  |    |          |
| To Whom Paid<br>Bilal Rice  |                    |                                       | МО  | DAY  | YEAR   |    |          |
|   |                    |                                       | мо 3                                      | <b>DAY</b> 16                              | <b>YEAR</b> 2020                             | \$ | 695.32   |
| Bilal Rice  | State<br>PA        | <b>Zip Code (Plus 4)</b><br>191392804 | 3   |  | 2020   |    | 695.32   |
| Mailing Address 622 N 48th St   |                    |                                       | 3<br>Descrip                              | 16   | 2020   |    | 695.32   |
| Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia  To Whom Paid  |                    |                                       | 3  Descrip Payroll                        | 16   | 2020<br>penditure                            |    | 695.32   |
| Mailing Address 622 N 48th St  City Philadelphia  To Whom Paid Bilal Rice   |                    |                                       | 3  Descrip Payroll  MO  4  Descrip        | 16 DAY                                     | 2020 penditure  YEAR  2020 penditure         | \$ |          |
| Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia  To Whom Paid Bilal Rice  Mailing Address 622 N 48th St        | PA State           | 191392804  Zip Code (Plus 4)          | 3  Descrip Payroll  MO  4  Descrip        | DAY  1  1  1  1  1  1  1  1  1  1  1  1  1 | 2020 penditure  YEAR  2020 penditure         | \$ |          |
| Mailing Address 622 N 48th St  City Philadelphia  To Whom Paid Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia | PA State           | 191392804  Zip Code (Plus 4)          | 3  Descrip Payroll  MO  4  Descrip Health | DAY  1 btion of Exp  Insurance             | 2020 Penditure  YEAR  2020 Penditure Payment | \$ |          |

| <b>To Whom Paid</b><br>Bilal Rice  | МО  | DAY  | YEAR                                 |    |                      |
|--|---|--|--------------------------------------|----|----------------------|
| Mailing Address 622 N 48th St  | 4   | 15   | 2020                                 | \$ | 1,548.31             |
| City Philadelphia State Zip Code (Plus 4) PA 191392804   | Descrip<br>Payroll                            | otion of Exp                                 | penditure                            |    |                      |
| <b>To Whom Paid</b><br>Bilal Rice  | МО  | DAY  | YEAR                                 |    |                      |
| Mailing Address 622 N 48th St  | 5   | 4  | 2020                                 | \$ | 1,548.32             |
| City Philadelphia State Zip Code (Plus 4) PA 191392804   | Descrip<br>Payroll                            | otion of Exp                                 | penditure                            |    |                      |
| <b>To Whom Paid</b><br>Bilal Rice  | МО  | DAY  | YEAR                                 |    |                      |
| Mailing Address 622 N 48th St  | 5   | 4  | 2020                                 | \$ | 440.00               |
| City Philadelphia State Zip Code (Plus 4)  | ) Descrip                                     | tion of Exp                                  | enditure                             |    |                      |
| PA 191392804   | Health  | Insurance                                    |                                      |    |                      |
|  | Health<br>MO                                  | Insurance                                    |                                      |    |                      |
| PA 191392804  To Whom Paid   |   |  | Payment                              |    | 1,548.31             |
| To Whom Paid Bilal Rice  | мо 5  | DAY 15 ption of Exp                          | YEAR 2020                            | \$ | 1,548.31             |
| To Whom Paid Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia State Zip Code (Plus 4)  | MO 5  | DAY 15 ption of Exp                          | YEAR 2020                            | \$ | 1,548.31             |
| To Whom Paid Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia State PA 191392804  To Whom Paid   | MO 5 Descrip                                  | DAY<br>15<br>Otion of Exp                    | YEAR 2020 Denditure                  | \$ | 1,548.31<br>4,000.00 |
| To Whom Paid Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia State PA 191392804  To Whom Paid S& S Consultants, LLC   | MO  5 Descrip Payroll  MO  4 Descrip          | DAY  15  ption of Exp                        | YEAR 2020 Penditure  YEAR 2020       | \$ |                      |
| To Whom Paid Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia State PA 191392804  To Whom Paid S& PO Box 33  City Bala Cynwyd State Zip Code (Plus 4)  | MO  5 Descrip Payroll  MO  4 Descrip          | DAY  15  DAY  DAY  23  Potion of Exp         | YEAR 2020 Penditure  YEAR 2020       | \$ |                      |
| To Whom Paid Bilal Rice  Mailing Address 622 N 48th St  City Philadelphia State PA 191392804  To Whom Paid S& S Consultants, LLC  Mailing Address PO Box 33  City Bala Cynwyd State PA 190040033  To Whom Paid | MO  5 Descrip Payroll  MO  4 Descrip Politica | DAY  15  DAY  23  Dition of Exp  I Consultin | YEAR 2020 Denditure 2020 Denditure 9 | \$ |                      |

|  |                             |  |           | PAGE 29        |
|--|-----------------------------|--|-----------|----------------|
| To Whom Paid Sabina Louise Pierce LLC  | мо                          | DAY  | YEAR      |                |
| Mailing Address 3572 Indian Queen Ln   | 3                           | 19   | 2020      | \$<br>1,608.0  |
| CityPhiladelphiaStateZip Code (Plus 4)PA191291523  |                             | otion of Exp                                   |           |                |
| <b>To Whom Paid</b> Salvus Public Affairs LLC  | МО                          | DAY  | YEAR      |                |
| Mailing Address 21130 Lakeview Center Plaza Suite 400  | 3                           | 16   | 2020      | \$<br>19,000.0 |
| City Ashburn State Zip Code (Plus 4) VA 20148  | <b>Descrip</b><br>Consul    | otion of Exp                                   | penditure |                |
| To Whom Paid Salvus Public Affairs LLC   | мо                          | DAY  | YEAR      |                |
| Mailing Address 21130 Lakeview Center Plaza Suite 400  | 5                           | 7  | 2020      | \$<br>3,000.0  |
| City Ashburn State Zip Code (Plus 4)  VA 20148   | <b>Descrip</b><br>Consult   | otion of Exp                                   | penditure |                |
| To Whom Paid Scanlon For Congress  | мо                          | DAY  | YEAR      |                |
|  |                             |  |           |                |
| Mailing Address PO Box 263   | 4                           | 30   | 2020      | \$<br>500.0    |
| Mailing Address PO Box 263  City Swarthmore State PA 190810263   |                             | otion of Exp                                   |           | 500.0          |
| City Swarthmore State Zip Code (Plus 4)  | Descrip                     | otion of Exp                                   |           | 500.0          |
| City         Swarthmore         State         Zip Code (Plus 4)           PA         190810263    To Whom Paid   | <b>Descrip</b> Contrib      | otion of Exp<br>oution                         | penditure | 3,050.0        |
| City Swarthmore State PA 190810263  To Whom Paid Snyder Pickerill Media  | Descrip<br>Contrib<br>MO    | DAY  10  pution of Exp                         | YEAR 2020 | \$             |
| City Swarthmore State PA 2ip Code (Plus 4) 190810263  To Whom Paid Snyder Pickerill Media  Mailing Address 230 W Huron St Ste 5E  City Chicago State Zip Code (Plus 4)       | MO  3  Descrip              | DAY  10  pution of Exp                         | YEAR 2020 | \$             |
| City Swarthmore State PA 190810263  To Whom Paid Snyder Pickerill Media  Mailing Address 230 W Huron St Ste 5E  City Chicago State Zip Code (Plus 4) 606543933  To Whom Paid | MO  3  Description  Video E | DAY  10  pution of Exp  pution of Exp  Editing | YEAR 2020 | \$             |

|   |                     |                                       |             |                            |                  | P.F | NGE 30    |
|---|---------------------|---------------------------------------|-------------|----------------------------|------------------|-----|-----------|
| <b>To Whom Paid</b><br>Snyder Pickerill Media |                     |                                       | мо          | DAY                        | YEAR             |     |           |
| Mailing Address 230 W Hu                      | ron St Ste 5E       |                                       | 5           | 11                         | 2020             | \$  | 19,716.67 |
| <b>City</b> Chicago                           | State<br>IL         | <b>Zip Code (Plus 4)</b> 606543933    | 1           | otion of Exp               |                  |     |           |
| <b>To Whom Paid</b><br>Snyder Pickerill Media |                     |                                       | МО          | DAY                        | YEAR             |     |           |
| Mailing Address 230 W Hu                      | ron St Ste 5E       |                                       | 5           | 12                         | 2020             | \$  | 70,000.00 |
| <b>City</b> Chicago                           | State<br>IL         | <b>Zip Code (Plus 4)</b> 606543933    |             | otion of Exp               |                  |     |           |
| <b>To Whom Paid</b><br>Snyder Pickerill Media |                     |                                       | мо          | DAY                        | YEAR             |     |           |
| Mailing Address 230 W Hu                      | ron St Ste 5E       |                                       | 5           | 15                         | 2020             | \$  | 75,000.00 |
| <b>City</b> Chicago                           | State<br>IL         | <b>Zip Code (Plus 4)</b> 606543933    |             | otion of Exp               |                  |     |           |
| <b>To Whom Paid</b><br>SP Digital LLC         |                     |                                       | МО          | DAY                        | YEAR             |     |           |
| Mailing Address 328 S Jeff                    | erson St Ste 540    |                                       | 5           | 5                          | 2020             | \$  | 16,958.33 |
| <b>City</b> Chicago                           | State<br>IL         | <b>Zip Code (Plus 4)</b> 606615649    | I -         | otion of Exp<br>Consulting |                  |     |           |
| <b>To Whom Paid</b><br>Square Group Inc       |                     |                                       | МО          | DAY                        | YEAR             |     |           |
| Mailing Address PO Box 34                     | l608                |                                       | 3           | 10                         | 2020             | \$  | 5,000.00  |
| <b>City</b> Philadelphia                      | <b>State</b><br>PA  | <b>Zip Code (Plus 4)</b><br>191014608 |             | otion of Exper deposit/    |                  |     |           |
|   |                     |                                       | <u> </u>    |                            |                  |     |           |
| <b>To Whom Paid</b><br>WURD 900 AM            | <u> </u>            | <u> </u>                              | мо          | DAY                        | YEAR             |     |           |
| WURD 900 AM                                   | elaware Ave Ste 300 | <u> </u>                              | <b>MO</b> 5 | <b>DAY</b> 7               | <b>YEAR</b> 2020 | \$  | 4,000.00  |

|  |                        |                                       |                          |                             |           |    | PAGE 31    |
|--|------------------------|---------------------------------------|--------------------------|-----------------------------|-----------|----|------------|
| <b>To Whom Paid</b><br>Zoom.US               |                        |                                       | мо                       | DAY                         | YEAR      |    |            |
| Mailing Address 55 Almade                    | en Blvd Fl 6           |                                       | 5                        | 5                           | 2020      | \$ | 16.19      |
| City San Jose                                | <b>State</b><br>CA     | <b>Zip Code (Plus 4)</b><br>951131608 |                          | otion of Exp<br>ence Call S |           |    |            |
| To Whom Paid<br>Zoom.US                      |                        |                                       | МО                       | DAY                         | YEAR      |    |            |
| Mailing Address 55 Almade                    | en Blvd Fl 6           |                                       | 5                        | 12                          | 2020      | \$ | 72.85      |
| <b>City</b> San Jose                         | State<br>CA            | <b>Zip Code (Plus 4)</b><br>951131608 |                          | otion of Exp<br>ence Call S |           |    |            |
| To Whom Paid<br>Zoom.US                      |                        |                                       | МО                       | DAY                         | YEAR      |    |            |
| Mailing Address 55 Almade                    | en Blvd Fl 6           |                                       | 5                        | 14                          | 2020      | \$ | 30.66      |
| City San Jose                                | State<br>CA            | <b>Zip Code (Plus 4)</b><br>951131608 |                          | otion of Exp<br>ence Call S |           |    |            |
| <b>To Whom Paid</b><br>Shoshana Bricklin     |                        |                                       | МО                       | DAY                         | YEAR      |    |            |
| Mailing Address 8423 Ande                    | erson St               |                                       | 5                        | 2                           | 2020      | \$ | 250.00     |
| <b>City</b> Philadelphia                     | <b>State</b><br>PA     | <b>Zip Code (Plus 4)</b><br>191182801 |                          | otion of Exp<br>unication C |           |    |            |
| <b>To Whom Paid</b><br>Jaworski Sign Company |                        |                                       | мо                       | DAY                         | YEAR      |    |            |
| Mailing Address 913 S Main                   | n Ave #15              |                                       | 5                        | 14                          | 2020      | \$ | 1,200.00   |
| <b>City</b> Scranton                         | <b>State</b><br>PA     | <b>Zip Code (Plus 4)</b><br>18504     | <b>Descrip</b><br>Lawn S | otion of Exp<br>Signs       | penditure | !  |            |
|  |                        |                                       |                          |                             |           |    | PAGE TOTAL |
| Enter Grand Total of Expen                   | iditures on Page 1, Re | port Cover Page, Item D               | •                        |                             |           | \$ | 396,489.27 |

## 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 Candida   | ate                |   |                             | Reportin | g Period                  |              |      |                                |
|---------------------------------------|--------------------|---|-----------------------------|----------|---------------------------|--------------|------|--------------------------------|
| AHMAD, NINA FOR PA                    |                    |   |                             | From:    | <u>3</u>                  | /10/2020     | То:  | 5/18/2020                      |
|                                       |                    |   |                             |          |                           | DATE         |      | Outstanding<br>Balance of Debt |
| Name of Creditor<br>Nina Ahmad        |                    |   |                             |          | МО                        | DAY          | YEAR |                                |
| Mailing Address 405 E Gowen A         | Ave                |   |                             |          | 3                         | 13           | 2018 | \$<br>9,000.00                 |
| <b>City</b> Philadelphia              | <b>State</b><br>PA |   | <b>Code (Plu</b><br>1191025 | s 4)     | <b>Descrip</b><br>Loan Ro | otion of Del | ot   |                                |
|                                       |                    |   |                             |          |                           | DATE         |      | Outstanding<br>Balance of Debt |
| Name of Creditor<br>Nina Ahmad        |                    |   |                             |          | МО                        | DAY          | YEAR |                                |
| Mailing Address 405 E Gowen A         | Ave                |   |                             |          | 3                         | 26           | 2018 | \$<br>50,000.00                |
| <b>City</b> Philadelphia              | State<br>PA        |   | <b>Code (Plu</b><br>1191025 | s 4)     | <b>Descrip</b><br>Loan Re | otion of Del | ot   |                                |
|                                       | ·                  | • |                             |          |                           | DATE         |      | Outstanding<br>Balance of Debt |
| Name of Creditor<br>Nina Ahmad        |                    |   |                             |          | МО                        | DAY          | YEAR |                                |
| Mailing Address 405 E Gowen A         | Ave                |   |                             |          | 3                         | 26           | 2018 | \$<br>450,000.00               |
| <b>City</b> Philadelphia              | State<br>PA        |   | <b>Code (Plu</b><br>1191025 | s 4)     | <b>Descrip</b><br>Loan Ro | otion of Deb | ot   |                                |
|                                       |                    |   |                             |          |                           | DATE         |      | Outstanding<br>Balance of Debt |
| <b>Name of Creditor</b><br>Nina Ahmad |                    |   |                             |          | МО                        | DAY          | YEAR |                                |
| Mailing Address 405 E Gowen A         | Ave                |   |                             |          | 5                         | 4            | 2018 | \$<br>61,750.00                |
| <b>City</b> Philadelphia              | <b>State</b><br>PA |   | <b>Code (Plu</b><br>1191025 | s 4)     | <b>Descrip</b><br>Loan Ro | otion of Deb | ot   |                                |

|                                |           |                   |         |                   |                |           | PAGL 33                    |
|--------------------------------|-----------|-------------------|---------|-------------------|----------------|-----------|----------------------------|
|                                |           |                   |         | DATE              |                |           | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |           |                   | МО      | DAY               | YEAR           |           |                            |
| Mailing Address 405 E          | Gowen Ave |                   | 5       | 8                 | 2018           | <b>\$</b> | 13,000.00                  |
| City Philadelphia              | State     | Zip Code (Plus 4) | Doscrii | l<br>otion of Del | <u> </u><br>ht | <u> </u>  |                            |
| <b>City</b> Philadelphia       | PA        | 191191025         | 1       | eceived           | ot .           |           |                            |
|                                |           |                   |         | DATE              |                |           | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |           |                   | МО      | DAY               | YEAR           |           |                            |
| Mailing Address 405 E          | Gowen Ave |                   | 5       | 9                 | 2018           | \$        | 12,000.00                  |
| <b>City</b> Philadelphia       | State     | Zip Code (Plus 4) | Descri  | tion of Del       | bt             | •         |                            |
|                                | PA        | 191191025         |         | eceived           |                |           |                            |
|                                |           |                   |         | DATE              |                |           | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |           |                   | мо      | DAY               | YEAR           |           |                            |
| Mailing Address 405 E          | Gowen Ave |                   | 5       | 11                | 2018           | \$        | 27,000.00                  |
| <b>City</b> Philadelphia       | State     | Zip Code (Plus 4) | Descri  | tion of Del       | bt             |           |                            |
| , <b></b>                      | PA        | 191191025         |         | eceived           |                |           |                            |
|                                |           |                   |         | DATE              |                |           | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |           |                   | МО      | DAY               | YEAR           |           |                            |
| Mailing Address 405 E          | Gowen Ave |                   | 5       | 14                | 2018           | \$        | 11,485.52                  |
| <b>City</b> Philadelphia       | State     | Zip Code (Plus 4) | Descri  | tion of Del       | bt             | I         |                            |
| rmadcipma                      | PA        | 191191025         |         | eceived           |                |           |                            |
|                                |           |                   |         | DATE              |                | Ou<br>Bal | tstanding<br>lance of Debt |
| Name of Creditor               |           |                   |         |                   |                |           |                            |
| Nina Ahmad                     |           |                   | МО      | DAY               | YEAR           |           |                            |
| Mailing Address 405 E          | Gowen Ave |                   | 6       | 27                | 2018           | \$        | 17,600.00                  |
| <b>City</b> Philadelphia       | State     | Zip Code (Plus 4) | Descri  | tion of Del       | bt             |           |                            |
|                                | PA        | 191191025         |         | eceived           |                |           |                            |
|                                |           |                   |         |                   | _              |           |                            |

|                                |             |                                       |                       |                           |      |          | PAGL 34                    |
|--------------------------------|-------------|---------------------------------------|-----------------------|---------------------------|------|----------|----------------------------|
|                                |             |                                       |                       | DATE                      |      |          | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |             |                                       | МО                    | DAY                       | YEAR |          |                            |
| Mailing Address 405 E C        | Gowen Ave   |                                       | 11                    | 21                        | 2018 | \$       | 4,000.00                   |
| <b>City</b> Philadelphia       | State<br>PA | <b>Zip Code (Plus 4)</b><br>191191025 | 1                     | otion of Del<br>eceived   | bt   |          |                            |
|                                |             |                                       |                       | DATE                      |      |          | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |             |                                       | МО                    | DAY                       | YEAR |          |                            |
| Mailing Address 405 E C        | Gowen Ave   |                                       | 9                     | 10                        | 2019 | \$       | 10,000.00                  |
| <b>City</b> Philadelphia       | State<br>PA | <b>Zip Code (Plus 4)</b><br>191191025 | <b>Descri</b><br>Loan | otion of Del              | bt   |          |                            |
|                                |             |                                       |                       | DATE                      |      |          | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |             |                                       | мо                    | DAY                       | YEAR |          |                            |
| Mailing Address 405 E 0        | Gowen Ave   |                                       | 2                     | 20                        | 2020 | \$       | 15,000.00                  |
| <b>City</b> Philadelphia       | State<br>PA | <b>Zip Code (Plus 4)</b><br>191191025 |                       | otion of Del<br>Payment   | bt   |          |                            |
|                                | <b>'</b>    |                                       |                       | DATE                      |      |          | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |             |                                       | МО                    | DAY                       | YEAR |          |                            |
| Mailing Address 405 E 0        | Gowen Ave   |                                       | 2                     | 20                        | 2020 | \$       | 9,000.00                   |
| <b>City</b> Philadelphia       | State<br>PA | <b>Zip Code (Plus 4)</b><br>191191025 |                       | otion of Del              |      |          |                            |
|                                |             |                                       |                       | DATE                      |      | Ou<br>Ba | tstanding<br>lance of Debt |
| Name of Creditor<br>Nina Ahmad |             |                                       | МО                    | DAY                       | YEAR |          |                            |
| Mailing Address 405 E 0        | Gowen Ave   |                                       | 4                     | 17                        | 2020 | \$       | 27,000.00                  |
| <b>City</b> Philadelphia       | State<br>PA | <b>Zip Code (Plus 4)</b><br>191191025 |                       | otion of Del<br>o account | bt   | •        |                            |
|                                |             |                                       |                       |                           |      |          |                            |

|   |                    |                                       |                                      | DATE                          |      |    | Outstanding<br>Balance of Debt |  |
|---|--------------------|---------------------------------------|--------------------------------------|-------------------------------|------|----|--------------------------------|--|
| Name of Creditor<br>Nina Ahmad  |                    |                                       | мо                                   | DAY                           | YEAR |    |                                |  |
| Mailing Address 405 E Gowen Ave   |                    |                                       | 5                                    | 7                             | 2020 | \$ | 89,716.67                      |  |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 191191025    | Description of Debt Pay Vendor       |                               |      |    |                                |  |
|   |                    |                                       |                                      | DATE                          |      |    | Outstanding<br>Balance of Debt |  |
| me of Creditor<br>na Ahmad  |                    |                                       | мо                                   | DAY                           | YEAR |    |                                |  |
| Mailing Address 405 E Gowen Ave   |                    |                                       | 5                                    | 11                            | 2020 | \$ | 19,716.67                      |  |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191191025 | 1                                    | scription of Debt<br>/ Vendor |      |    |                                |  |
|   |                    |                                       |                                      | DATE                          |      |    | Outstanding<br>Balance of Debt |  |
| Name of Creditor<br>Nina Ahmad  |                    |                                       | мо                                   | DAY                           | YEAR |    |                                |  |
| Mailing Address 405 E Gowen Ave   |                    |                                       | 5                                    | 12                            | 2020 | \$ | 70,000.00                      |  |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191191025 | Description of Debt Pay Vendor       |                               |      |    |                                |  |
|   |                    |                                       |                                      | DATE                          |      |    | Outstanding<br>Balance of Debt |  |
| Name of Creditor Nina Ahmad   |                    |                                       | мо                                   | DAY                           | YEAR |    |                                |  |
| Mailing Address 405 E Gowen Ave   |                    |                                       | 5                                    | 15                            | 2020 | \$ | 75,000.00                      |  |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191191025 | Description of Debt Pay Vendor       |                               |      |    |                                |  |
|   |                    |                                       |                                      | DATE                          |      |    | Outstanding<br>Balance of Debt |  |
| Name of Creditor Nina Ahmad   |                    |                                       | МО                                   | DAY                           | YEAR |    |                                |  |
| Mailing Address 405 E Gowen Ave   |                    |                                       | 5                                    | 15                            | 2020 | \$ | 15,000.00                      |  |
| <b>City</b> Philadelphia  | State<br>PA        | <b>Zip Code (Plus 4)</b><br>191191025 | Description of Debt Loan to campaign |                               |      |    |                                |  |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. |                    |                                       |                                      |                               |      | \$ | <b>PAGE TOTAL</b> 986,268.86   |  |