### **Campaign Finance Report**

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

| Filer Identification 20200045 Report Filed By: CANDIDATE COMMITTEE LOBBYIST |                             |          |           |                       |                                       |                   |          | BYIST   |                    |           |                   |            |                    |                      |          |           |          |          |
|---|-----------------------------|----------|-----------|-----------------------|---------------------------------------|-------------------|----------|---------|--------------------|-----------|-------------------|------------|--------------------|----------------------|----------|-----------|----------|----------|
| Name of Filing C  | ommittee, Ca                | andid    | ate or L  | obbyist:              |                                       | CIT               | TIZEN    | IS FO   | R AMEN             | BROW      | N                 |            |                    |                      |          |           |          |          |
| Street Address:   | 3600 CO                     | NSHO     | HOCKE     | N AVE, AP             | Т 710                                 |                   |          |         |                    |           |                   |            |                    |                      |          |           |          |          |
| City:   | PHILADE<br>-                | LPHIA    | 4         | _                     |                                       |                   |          |         | State:             | PA        |                   |            | Zip Cod            | de: 19               | 9131     |           |          |          |
| TYPE OF<br>REPORT   | 6TH TUESDAY<br>PRE-PRIMARY  |          | 1.        | 2ND FRIDA<br>PRIMARY  | RIDAY PRE-<br>RY 2. 30 DAY<br>PRIMARY |                   |          |         |                    | POST-     | POST- 3.          |            |                    | AMENDMENT<br>REPORT? |          | No        |          |          |
| (place X to<br>the right of   | 6TH TUESDAY<br>PRE-ELECTION |          | 4.        | 2ND FRIDA<br>ELECTION | y pri                                 | PRE- 5. 30 DAY PO |          |         |                    |           | POST- 6. <b>X</b> |            |                    | ATION<br>?           | Yes      | No        |          | <b>/</b> |
| report type)  | ANNUAL REF                  | PORT     | 7.        | <b>Year</b> 2020      |                                       |                   |          |         | IG METH<br>CHECK C |           |                   |            | PAPER              |                      | <b>/</b> | DISKE     | TTE      |          |
| Name of Office S  | ought by Car                | ndidat   | e:        | -                     |                                       |                   |          |         | DATE (             | OF ELE    | CTIC              | N          | District<br>Number | Office<br>Code       | Par      | ty Code   | Coun     |          |
| DEDDECEMENT   | VE IN THE C                 | SENIED   | AL ACC    | EMDLV                 |                                       |                   |          |         | МО                 | DAY       | ΥI                | AR         | 190                | STH                  | DEN      | 1         | 51       |          |
| REPRESENTATI  | VE IN THE G                 | ENEK     | AL ASS    | EMBLY                 |                                       |                   |          |         | 11                 | L         | 3                 | 2020       |                    | (SEE IN              | STRUCTI  | ONS FOR ( | ODES     | )        |
| Summary of  |                             | nd       | МО        | DAY                   | YEAR                                  | 2                 |          |         | МО                 | DAY       | Y                 | EAR        | FC                 | R OFFI               | CE USE   | ONLY      |          |          |
| Expenditures  | from:                       |          |           | 10 20                 | 2                                     | 020               | <b>T</b> | 0       | 1:                 | 1         | 23                | 2020       |                    |                      |          |           |          |          |
| A. Amount Bro   | ught Forward                | d Fron   | ı Last R  | eport                 |                                       |                   |          | \$      |                    |           | 16,3              | 359.20     |                    |                      |          |           |          |          |
| B. Total Moneta   | ary Contribut               | ions /   | And Rec   | eipts (From           | Sche                                  | dul               | le I)    | \$      |                    |           | 14,0              | 079.00     |                    |                      |          |           |          |          |
| C. Total Funds  | Available (Su               | ım Of    | Lines A   | and B)                |                                       |                   |          | \$      |                    |           | 30,               | 438.20     |                    |                      |          |           |          |          |
| D. Total Expend   | ditures (From               | n Sche   | edule II  | I)                    |                                       |                   |          | \$      |                    |           | 29,4              | 136.14     |                    |                      |          |           |          |          |
| E. Ending Cash  | Balance (Sul                | btract   | Line D    | From Line             | C)                                    |                   |          | \$      |                    |           | 1,0               | 02.06      |                    |                      |          |           |          |          |
| F. Value Of In-   | Kind Contribu               | utions   | Receive   | ed (From S            | chedu                                 | le I              | II)      | \$      |                    |           |                   | 0.00       |                    |                      |          |           |          |          |
| G. Unpaid Debt  | s And Obliga                | tions    | (From S   | Schedule IV           | )                                     |                   |          | \$      |                    |           |                   | 0.00       |                    |                      | 1        |           |          |          |
|   |                             |          |           |                       | AFF                                   | ID                | AVI      | T SE    | CTION              |           |                   |            |                    |                      |          |           |          |          |
| PART I - If this is   | a Committe                  | e rep    | ort, trea | surer sign            | here.                                 | If tl             | his is   | a Can   | ndidate r          | eport,    | candi             | date sig   | jn here.           |                      |          |           |          |          |
| I swear (or affirm) correct and comple                                      | that this reporete.         | rt, incl | uding the | attached sc           | hedule                                | s file            | ed on    | paper o | or by elec         | tronic m  | edium             | , are to t | the best o         | f my kno             | wledge   | and beli  | ef , tru | ue       |
| Sworn to and subs   | cribed before n<br>day of   | ne this  |           | 20                    |                                       |                   |          |         |                    |           | S                 | Signature  | of Perso           | n Submit             | ting Re  | oort      |          | _        |
|   |                             | ignatu   | re        |                       |                                       |                   |          | -<br>-  |                    |           |                   |            | Prin               | ted Name             | •        |           |          | -        |
| My Commission Ex  | pires                       |          |           |                       |                                       |                   |          |         |                    |           |                   |            | Ema                | il                   |          |           |          | -        |
|   | мо                          |          | D         | AY                    | YR                                    |                   |          |         |                    | Ar        | ea Cod            | le         | Daytim             | e Teleph             | one Nu   | mber      |          |          |
| Part II- If this is   | a report of a               | a cand   | lidate's  | authorized            | Comn                                  | nitt              | ee, C    | andida  | ate shall          | sign h    | ere.              |            |                    |                      |          |           |          |          |
| I swear (or affirm)<br>No 320) as amende                                    |                             | st of m  | ıy knowle | edge and beli         | ef this                               | pol               | litical  | commi   | ittee has          | not viola | ted ar            | y provis   | ions of th         | e act of J           | une 3,1  | 937 (P.L  | . 1333   | 3,       |
| Sworn to and subsc  |                             | e this   |           |                       |                                       |                   |          |         |                    |           |                   | s          | ignature o         | of Candid            | ate      |           |          | -        |
| -   | day of<br>—— ——             |          |           |                       |                                       |                   |          | _       |                    |           |                   |            | Printe             | ed Name              |          |           |          | -        |
|   | Signa                       | ature    |           |                       |                                       |                   |          | -       |                    |           |                   |            |                    |                      |          |           |          | _        |
| My Commission Exp   | ires                        |          |           |                       |                                       |                   |          |         |                    |           |                   |            | Ema                | 11                   |          |           |          |          |
|   | м                           | 10       | D         | AY                    | YR                                    | ł                 |          | -       |                    | Area      | Code              |            | D                  | aytime T             | elephor  | ne Numb   | er       | -        |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period  |               |            |
|--|-----------|-----------|---------------|------------|
| CITIZENS FOR AMEN BROWN  | From:     | 10/20/202 | <u>:0</u> To: | 11/23/2020 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |           |               |            |
| TOTAL for the Reporting  | ) Period  | (1)       | \$            | 0.00       |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)  |           |           |               |            |
| Contributions Received From Political Committees (Part A)  |           |           | \$            | 500.00     |
| All Other Contributions (Part B)   |           |           | \$            | 329.00     |
| TOTAL for the Reporting  | Period    | (2)       | \$            | 829.00     |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |           |               |            |
| Contributions Received From Political Committees (Part C)  |           |           | \$            | 2,750.00   |
| All Other Contributions (Part D)   |           |           | \$            | 10,500.00  |
| TOTAL for the Reporting  | ) Period  | (3)       | \$            | 13,250.00  |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |           |               |            |
| TOTAL for the Reporting  | ) Period  | (4)       | \$            | 0.00       |
|  |           |           |               |            |
| Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa |           |           | \$            | 14,079.00  |

#### **PART A**

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

\$50.01 TO \$250.00

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

| Name of Filing Committee or Car  | didate   | R                 | eporting | Period            |      |                  |
|----------------------------------|----------|-------------------|----------|-------------------|------|------------------|
| CITIZENS FOR AMEN BROWN          |          | rom:              | 10/20/20 | <u>11/23/2020</u> |      |                  |
|                                  |          | 1                 |          | DATE              |      | AMOUNT           |
| Full Name of Contributing Commit | tee      |                   | мо       | DAY               | YEAR |                  |
| Friends of Stephen Kinsey        |          |                   | 1-10     | DAI               | ILAK |                  |
| Mailing Address 7167 Ogoni       | z Avenue |                   | 10       | 28                | 2020 | <b>\$</b> 250.00 |
| City Philadelphia                | State    | Zip Code (Plus 4) | 7        |                   | 2020 |                  |
|                                  | PA       | 19138             |          |                   |      |                  |

| Full Name of Contributing Committee Friends of Jared Solomon | МО                 | DAY                               | YEAR |    |      |           |
|--|--------------------|-----------------------------------|------|----|------|-----------|
| Mailing Address PO Box 7522  City Philadelphia               | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19101 | 10   | 26 | 2020 | \$ 250.00 |

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

**PAGE TOTAL** 500.00

### 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                        | Reporting P        | eriod                             |       |        |         |                      |
|---|--------------------|-----------------------------------|-------|--------|---------|----------------------|
| CITIZENS FOR AMEN BRC                           | OWN                |                                   | From: | 10/20/ | 2020 To | i: <u>11/23/2020</u> |
|   |                    |                                   |       | DATE   |         | AMOUNT               |
| Full Name of Contributor<br>Kee Chung           |                    |                                   | мо    | DAY    | YEAR    |                      |
| Mailing Address 90 Harv                         | ard Avenue         |                                   |       |        |         | <b>\$</b> 10.00      |
| City Brookline                                  | State<br>MA        | <b>Zip Code (Plus 4)</b> 02446    | 10    | 24     | 2020    |                      |
| <b>Full Name of Contributor</b> Bernadine Hawes |                    |                                   | мо    | DAY    | YEAR    |                      |
| Mailing Address 40 N. 50  City Philadelphia     | Oth St  State PA   | <b>Zip Code (Plus 4)</b><br>19139 | 10    | 31     | 2020    | \$ 19.00             |
| Full Name of Contributor Tony Harris            |                    |                                   | МО    | DAY    | YEAR    |                      |
| Mailing Address 4747 Ba                         | anyan Dr           |                                   |       |        |         | <b>\$</b> 100.00     |
| <b>City</b> Montgomery                          | <b>State</b><br>AL | <b>Zip Code (Plus 4)</b> 36116    | 11    | 4      | 2020    |                      |
| Full Name of Contributor  Mark Califano         |                    |                                   | МО    | DAY    | YEAR    |                      |
| Mailing Address 94 Wood City New Rochelle       | State NY           | <b>Zip Code (Plus 4)</b><br>10804 | 11    | 3      | 2020    | \$ 100.00            |
| Full Name of Contributor John Hogan             |                    |                                   | МО    | DAY    | YEAR    |                      |
| Mailing Address 2634 Sc                         | orrento road       |                                   |       |        |         | \$ 100.00            |
| <b>City</b> Philadelphia                        | State<br>PA        | <b>Zip Code (Plus 4)</b><br>19132 | 11    | 3      | 2020    |                      |
| <u> </u>  |                    |                                   |       |        |         | PAGE TOTAL           |

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

**PAGE TOTAL \$** 329.00

#### **PART C**

### **Contributions Received From Political Committees**

**OVER \$250.00** 

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

| Name of Filing Committee or Candidate Reporting |                      |             |        | Period      |               |      |                    |
|---|----------------------|-------------|--------|-------------|---------------|------|--------------------|
| ITIZENS FOR AMEN BROWN From:                    |                      |             |        | <u>10/2</u> | <u>0/2020</u> | То:  | 11/23/2020         |
|   |                      |             |        | DA          | TE            |      | AMOUNT             |
| Full Name of Contributing Committee             |                      |             |        | мо          | DAY           | YEAR |                    |
| Friends of Sharif Street                        |                      |             |        |             |               |      | <b>\$</b> 1,000.00 |
| Mailing Address 1421 W SUSQUEHAN                | INA AVE              |             |        | 11          | 4             | 2020 | ·                  |
| City Philadelphia                               | State                | Zip Code (P | lus 4) |             |               |      |                    |
|   | PA                   | 19121       |        |             |               |      |                    |
| Full Name of Contributing Committee             |                      |             |        | МО          | DAY           | YEAR |                    |
| WOJDAK FOR THE COMMONWEALTH PA                  | С                    |             |        |             |               |      | \$ 1,000.00        |
| Mailing Address 30 N THIRD ST, STE              | 950                  |             |        | 11          | 6             | 2020 | ,                  |
| City HARRISBURG                                 | State                | Zip Code (P | lus 4) |             | Ŭ             | 2020 |                    |
|   | PA                   | 17101-174   | 1      |             |               |      |                    |
| Full Name of Contributing Committee             |                      |             |        | МО          | DAY           | YEAR |                    |
| Citizens for Hughes (dated 11/8, recv'd         | by mail, deposited 1 | 1/23)       |        | 1-10        | DA!           | ILAK | <b>\$</b> 750.00   |
| Mailing Address PO Box 13031                    |                      |             |        | 11          | 23            | 2020 |                    |
| City Philadelphia                               | State                | Zip Code (P | lus 4) | 11          | 23            | 2020 |                    |
|   | PA                   | 19101       |        |             |               |      |                    |

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

**PAGE TOTAL \$** 2,750.00

### 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   | Name of Filing Committee or Candidate Rep |                 |              |             |         |         |               |                   |              |  |
|---|---|-----------------|--------------|-------------|---------|---------|---------------|-------------------|--------------|--|
| CITIZENS FOR AMEN BROWN                 |   |                 |              | Fror        | n:      | 10/20/2 | <u>020</u> To | 20 To: 11/23/2020 |              |  |
|   |   |                 |              |             | D/      | ATE     |               |                   | AMOUNT       |  |
| Full Name of Contributor                |   |                 |              |             | МО      | DAY     | YEAR          | \$                | 10,000.00    |  |
| Earl Smith                              |   |                 |              |             |         |         |               |                   | ,            |  |
| Mailing Address 350 N Laurel Avenu      | _   |                 |              |             | 10      | 29      | 2020          |                   |              |  |
| City Los Angeles                        | State                                     | Zi <sub>l</sub> | p Code (Plus | <b>34</b> ) |         |         |               |                   |              |  |
|   | CA  | 90              | 0048         |             |         |         |               | ı                 |              |  |
| Employer Name Unemployed                |   |                 |              |             | Occupat | ion     | Unempl        | oyed              |              |  |
| Employer Mailing Address/Principal Plac | e of Business                             |                 | City         |             |         | State   |               | Zip Co            | ode (Plus 4) |  |
| 350 N Laurel Avenue                     |   |                 | Los Angel    | es          |         | CA      |               | 9004              | 3            |  |
| Full Name of Contributor                |   |                 |              |             |         | DAY     | VEAD          |                   |              |  |
| Keith Brundin                           |   |                 |              |             | МО      | DAY     | YEAR          | \$                | 500.00       |  |
| Mailing Address 610 Meadowview Co       | ourt                                      |                 |              |             | 11      | 4       | 2020          |                   |              |  |
| City Maple Glen                         | State                                     | Zi <sub>l</sub> | p Code (Plus | (4)         | 1 11    | 4       | 2020          |                   |              |  |
|   | PA  | 19              | 0002         |             |         |         |               |                   |              |  |
| Employer Name Shore Things Estate I     | nc  |                 |              |             | Occupat | ion     | Self-Em       | ployed            |              |  |
| Employer Mailing Address/Principal Plac | e of Business                             |                 | City         |             |         | State   |               | Zip Co            | ode (Plus 4) |  |
| 610 Meadowview Court                    |   |                 | Ambler       |             |         | PA      |               | 1900              | 2            |  |
| Futou Cuand Tatal of Baut Con Coho      | lula I. Datailad C                        |                 | D            | Casti       | 2       |         |               |                   | PAGE TOTAL   |  |
| Enter Grand Total of Part C on Scheo    | iule I, Detalled St                       | umn             | nary Page,   | Section     | on 3.   |         |               | \$                | 10,500.00    |  |

## OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

| Name of Filing Committee or Candidate |                      |            | Report  | ing Perio | od  |      |            |
|---------------------------------------|----------------------|------------|---------|-----------|-----|------|------------|
|                                       |                      |            | From:   |           |     | To:  |            |
|                                       |                      |            |         | D         | ATE |      | AMOUNT     |
| Full Name                             |                      |            |         | мо        | DAY | YEAR | \$<br>0.00 |
| Mailing Address                       |                      | _          |         |           |     |      |            |
| City                                  | State                | Zip Code ( | Plus 4) |           |     |      |            |
| Receipt Description                   |                      | •          |         |           | •   | •    |            |
|                                       |                      | _          |         | _         |     |      | PAGE TOTAL |
| Enter Grand Total of Part E on Schedu | lie 1, Detailed Sumn | nary Page, | Section | 4.        |     |      | \$<br>0.00 |

#### **SCHEDULE II**

#### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.
Detailed Summary Page

| Name of Filing Committee or Candidate  | Reporting Pe   | riod                         |            |
|--|----------------|------------------------------|------------|
| CITIZENS FOR AMEN BROWN  | From:          | <u>10/20/2020</u> <b>To:</b> | 11/23/2020 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P  | PER CONTRIBUTO | PR                           |            |
| TOTAL for the Reporting Pe   | eriod (1)      | \$                           | 0.00       |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR   | T F)           |                              |            |
| TOTAL for the Reporting Pe   | eriod (2)      | \$                           | 0.00       |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)   |                |                              |            |
| TOTAL for the Reporting Pe   | eriod (3)      | \$                           | 0.00       |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, | •              | \$                           | 0.00       |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

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

| Name of Filing Committee or Candidate | Reporting Period |                      |          |           |      |             |           |      |
|---------------------------------------|------------------|----------------------|----------|-----------|------|-------------|-----------|------|
| Fr                                    |                  |                      |          | From: To: |      |             |           |      |
|                                       |                  |                      |          | DATE      |      |             | AMOUNT    |      |
| Full Name of Contributor              |                  |                      | МО       | DAY       | YEAR |             |           |      |
| Mailing Address                       |                  |                      |          |           |      | <b>7</b> \$ |           | 0.00 |
| City                                  | State            | Zip Code (Plus 4)    |          |           |      |             |           |      |
| Description of Contribution:          | -                | <b>-</b>             | •        | •         | •    |             |           |      |
|                                       |                  |                      |          |           |      |             |           |      |
| Enter Grand Total of Part F on Sche   | dule II, In-Kind | d Contributions Deta | iled Sum | mary Pag  | ge,  |             | PAGE TOTA | L    |
| Section 2.                            |                  |                      |          |           |      | \$          |           | 0.00 |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

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

## SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting I | Period     |     |            |
|---------------------------------------|-------------|------------|-----|------------|
| CITIZENS FOR AMEN BROWN               | From        | 10/20/2020 | То: | 11/23/2020 |

|  |                            | DATE              |                                  | AMOUNT                     |           |    |        |  |  |
|--|----------------------------|-------------------|----------------------------------|----------------------------|-----------|----|--------|--|--|
| To Whom Paid                             |                            |                   | МО                               | DAY                        | YEAR      |    |        |  |  |
| Quinae Mason                             |                            |                   | 140                              |                            | 1 Z / LIK |    |        |  |  |
| Mailing Address 234 Pusey                | Avenue                     |                   | 10                               | 20                         | 2020      | \$ | 850.00 |  |  |
| <b>City</b> Collingdale                  | Description of Expenditure |                   |                                  |                            |           |    |        |  |  |
|  | administrative consulting  |                   |                                  |                            |           |    |        |  |  |
| To Whom Paid                             |                            |                   | МО                               | DAY                        | YEAR      |    |        |  |  |
| Conoco                                   |                            |                   | 140                              |                            | ILAK      |    |        |  |  |
| Mailing Address 210 Belmor               | nt Ave                     |                   | 10                               | 21                         | 2020      | \$ | 46.06  |  |  |
| City Bala Cynwyd State Zip Code (Plus 4) |                            |                   |                                  | Description of Expenditure |           |    |        |  |  |
|  | gas for outreach volunteer |                   |                                  |                            |           |    |        |  |  |
| To Whom Paid                             |                            |                   | МО                               | DAY                        | YEAR      |    |        |  |  |
| Hilton                                   |                            |                   | 140                              |                            | ILAK      |    |        |  |  |
| Mailing Address 1 N 2nd St               |                            |                   | 10                               | 21                         | 2020      | \$ | 165.39 |  |  |
| City Harrisburg State Zip Code (Plus 4)  |                            |                   | Description of Expenditure       |                            |           |    |        |  |  |
|  | PA                         | 17101             | travel expense                   |                            |           |    |        |  |  |
| To Whom Paid                             |                            | ·                 | МО                               | DAY                        | YEAR      |    |        |  |  |
| Hilton                                   |                            |                   | MO                               | DAT                        | TEAR      |    |        |  |  |
| Mailing Address 1 N 2nd St               |                            |                   | 11                               | 8                          | 2020      | \$ | 172.78 |  |  |
| <b>City</b> Harrisburg                   | State                      | Zip Code (Plus 4) | Description of Expenditure       |                            |           |    |        |  |  |
|  | PA                         | 17101             | travel expense                   |                            |           |    |        |  |  |
| To Whom Paid                             |                            |                   | МО                               | DAY                        | YEAR      |    |        |  |  |
| Hilton                                   |                            |                   | MO                               | DAI                        | ILAK      |    |        |  |  |
| Mailing Address 1 N 2nd St               |                            |                   | 11                               | 18                         | 2020      | \$ | 165.39 |  |  |
| <b>City</b> Harrisburg                   | State                      | Zip Code (Plus 4) | Descrip                          | tion of Exp                | enditure  |    |        |  |  |
| -  | PA                         | 17101             | travel e                         | xpense                     |           |    |        |  |  |
| To Whom Paid                             |                            |                   | Mo                               | DAY                        | VEAD      |    |        |  |  |
| Neia Booth                               |                            |                   | МО                               | DAY                        | YEAR      |    |        |  |  |
| Mailing Address 5731 Delan               | icey St                    |                   | 10                               | 23                         | 2020      | \$ | 500.00 |  |  |
| <b>City</b> Philadelphia                 | State                      | Zip Code (Plus 4) | Description of Expenditure       |                            |           |    |        |  |  |
| ·  | PA                         | 19143             | covid cleaning of campaign space |                            |           |    |        |  |  |
|  | 100710 01                  | canning of t      | campaign                         | Space                      |           |    |        |  |  |

|   |                                     |                   |                                  |             |          |             | JL 12        |  |
|---|-------------------------------------|-------------------|----------------------------------|-------------|----------|-------------|--------------|--|
| To Whom Paid  |                                     |                   | МО                               | DAY         | YEAR     |             |              |  |
| Neia Booth  |                                     |                   |                                  |             |          |             |              |  |
| Mailing Address 5731 Delancey St  | 10                                  | 30                | 2020                             | \$          | 400.00   |             |              |  |
| City Philadelphia   | Description of Expenditure          |                   |                                  |             |          |             |              |  |
|   | food/catering for community meeting |                   |                                  |             |          |             |              |  |
| To Whom Paid  |                                     |                   | мо                               | DAY         | YEAR     |             |              |  |
| Comcast   |                                     |                   | М                                |             | ILAK     |             |              |  |
| Mailing Address P.O. Box 37601  | 10                                  | 26                | 2020                             | \$          | 871.10   |             |              |  |
| <b>City</b> Philadelphia  | Description of Expenditure          |                   |                                  |             |          |             |              |  |
|   | PA                                  | 19101             | internet                         | and secur   | ity came | ra for camp | paign office |  |
| To Whom Paid  |                                     |                   | мо                               | DAY         | YEAR     |             |              |  |
| Sampan  |                                     |                   | М                                |             | ILAK     |             |              |  |
| Mailing Address 124 S 13th St   |                                     |                   | 10                               | 22          | 2020     | \$          | 263.70       |  |
| City Philadelphia   | State                               | Zip Code (Plus 4) | Descrip                          | tion of Exp | enditure |             |              |  |
|   | PA                                  | 19107             | team di                          | nner meet   | ing      |             |              |  |
| To Whom Paid  |                                     |                   | мо                               | DAY         | YEAR     |             |              |  |
| Habitat for Humanity  |                                     |                   |                                  |             |          |             |              |  |
| Mailing Address 7937 S Crescent E   | 10                                  | 24                | 2020                             | \$          | 213.25   |             |              |  |
| City Pennsauken Township State Zip Code (Plus 4) Description of Expenditure |                                     |                   |                                  |             |          |             |              |  |
|   | NJ                                  | 08109             | supplies for outreach and office |             |          |             |              |  |
| To Whom Paid  |                                     |                   | МО                               | DAY         | YEAR     |             |              |  |
| Prowess LLC   |                                     |                   |                                  |             |          |             |              |  |
| Mailing Address 1165 Park Avenue  | 2                                   |                   | 10                               | 27          | 2020     | \$          | 1,000.00     |  |
| <b>City</b> Waynesburg  | State                               | Zip Code (Plus 4) | Descrip                          | tion of Exp | enditure |             |              |  |
|   | PA                                  | 15370             | political                        | consulting  | J        |             |              |  |
| To Whom Paid  |                                     |                   | МО                               | DAY         | YEAR     |             |              |  |
| AMG LLC   |                                     |                   |                                  |             |          |             |              |  |
| Mailing Address 2235 Reed Street  |                                     |                   | 10                               | 28          | 2020     | \$          | 5,000.00     |  |
| City Philadelphia   | State                               | Zip Code (Plus 4) | Descrip                          | tion of Exp | enditure |             |              |  |
|   | PA                                  | 19146             | campaign consulting              |             |          |             |              |  |
| To Whom Paid  |                                     |                   | мо                               | DAY         | YEAR     |             |              |  |
| AMG LLC   |                                     |                   | HO                               |             | ILAK     |             |              |  |
| Mailing Address 2235 Reed Street  |                                     |                   | 11                               | 5           | 2020     | \$          | 5,200.00     |  |
| <b>City</b> Philadelphia  | State                               | Zip Code (Plus 4) | Descrip                          | tion of Exp | enditure | •           |              |  |
| PA 19146  |                                     |                   |                                  | gn consulti | ng       |             |              |  |
| To Whom Paid  |                                     |                   |                                  | DAY         | YEAR     |             |              |  |
| Frank's Deli & Catering   |                                     |                   |                                  |             | LAK      |             |              |  |
| Mailing Address 7547 Haverford Avenue                                       |                                     |                   |                                  | 28          | 2020     | \$          | 47.34        |  |
| <b>City</b> Philadelphia  | State                               | Zip Code (Plus 4) | Descrip                          | tion of Exp | enditure | •           |              |  |
|   | PA                                  | 19151             | meeting                          |             |          |             |              |  |
|   |                                     |                   |                                  |             |          |             |              |  |

| To Whom Paid                              | МО                         | DAY               | YEAR                              |                            |            |    |          |  |  |
|---|----------------------------|-------------------|-----------------------------------|----------------------------|------------|----|----------|--|--|
| Lukoil                                    |                            |                   |                                   |                            |            |    |          |  |  |
| Mailing Address 4400 City Line            | 10                         | 29                | 2020                              | \$                         | 30.00      |    |          |  |  |
| City Philadelphia State Zip Code (Plus 4) |                            |                   |                                   | Description of Expenditure |            |    |          |  |  |
|   | gas for outreach volunteer |                   |                                   |                            |            |    |          |  |  |
| To Whom Paid                              |                            |                   | МО                                | DAY                        | YEAR       |    |          |  |  |
| TD Bank                                   |                            |                   |                                   |                            |            |    |          |  |  |
| Mailing Address 3735 Walnut S             | 10                         | 30                | 2020                              | \$                         | 3.00       |    |          |  |  |
| City Philadelphia                         | Description of Expenditure |                   |                                   |                            |            |    |          |  |  |
|   | PA                         | 19104             | paper s                           | tatement f                 | ee         |    |          |  |  |
| To Whom Paid                              |                            |                   | МО                                | DAY                        | YEAR       |    |          |  |  |
| Target                                    |                            |                   |                                   |                            | ,          |    |          |  |  |
| Mailing Address 4000 Monumer              | nt Road                    |                   | 10                                | 31                         | 2020       | \$ | 29.78    |  |  |
| <b>City</b> Philadelphia                  | State                      | Zip Code (Plus 4) | Description of Expenditure        |                            |            |    |          |  |  |
|   | PA                         | 19131             | office su                         | upplies                    |            |    |          |  |  |
| To Whom Paid                              |                            |                   | МО                                | DAY                        | YEAR       |    |          |  |  |
| Dunkin Donuts                             |                            |                   |                                   |                            |            |    |          |  |  |
| Mailing Address 4160 Monumer              | nt Road                    |                   | 10                                | 31                         | 2020       | \$ | 88.37    |  |  |
| <b>City</b> Philadelphia                  | State                      | Zip Code (Plus 4) | Descrip                           | tion of Exp                | enditure   |    |          |  |  |
|   | PA                         | 19131             | coffee and donuts for volunteers  |                            |            |    |          |  |  |
| To Whom Paid                              |                            |                   | МО                                | DAY                        | YEAR       |    |          |  |  |
| Tee Academy                               |                            |                   |                                   |                            | ,          |    |          |  |  |
| Mailing Address 609 South 22n             | d street                   |                   | 11                                | 1                          | 2020       | \$ | 592.00   |  |  |
| <b>City</b> Philadelphia                  | State                      | Zip Code (Plus 4) | Descrip                           | tion of Exp                | enditure   |    |          |  |  |
|   | PA                         | 19145             | t-shirts for volunteers/motorcade |                            |            |    |          |  |  |
| To Whom Paid                              |                            |                   | мо                                | DAY                        | YEAR       |    |          |  |  |
| Minuteman Press                           |                            |                   | 110                               |                            | I Z A II X |    |          |  |  |
| Mailing Address 301 Montgome              | ry Avenue                  |                   | 10                                | 30                         | 2020       | \$ | 1,600.00 |  |  |
| City Bala Cynwyd                          | State                      | Zip Code (Plus 4) | Descrip                           | tion of Exp                | enditure   |    |          |  |  |
|   | PA                         | 19004             | campaign literature               |                            |            |    |          |  |  |
| To Whom Paid                              |                            |                   | мо                                | DAY                        | YEAR       |    |          |  |  |
| Minuteman Press                           |                            |                   | М                                 |                            | ILAK       |    |          |  |  |
| Mailing Address 301 Montgome              | ry Avenue                  |                   | 11                                | 17                         | 2020       | \$ | 1,765.00 |  |  |
| City Bala Cynwyd                          | State                      | Zip Code (Plus 4) | Descrip                           | tion of Exp                | enditure   |    |          |  |  |
| PA 19004                                  |                            |                   |                                   | campaign literature        |            |    |          |  |  |
| To Whom Paid                              |                            |                   |                                   | DAY                        | YEAR       |    |          |  |  |
| Minuteman Press                           |                            |                   |                                   |                            | ILAK       |    |          |  |  |
| Mailing Address 301 Montgomery Avenue     |                            |                   |                                   | 20                         | 2020       | \$ | 1,000.00 |  |  |
| City Bala Cynwyd State Zip Code (Plus 4)  |                            |                   |                                   | tion of Exp                | enditure   | ı  |          |  |  |
|   | PA                         | 19004             | campaign literature               |                            |            |    |          |  |  |
|   |                            |                   |                                   |                            |            |    |          |  |  |

| To Whom Pa                             | aid           |                    |                    |                                   | МО                         | DAY         | YEAR      |          |              |  |  |
|--|---------------|--------------------|--------------------|-----------------------------------|----------------------------|-------------|-----------|----------|--------------|--|--|
| PA House Democratic Campaign Committee |               |                    |                    |                                   |                            |             |           | 2,500.00 |              |  |  |
| Mailing Add                            | ress          | PO Box 555         |                    |                                   | 10 29 2020 \$              |             |           |          |              |  |  |
| <b>City</b> Harr                       | risburg       |                    | State              | Zip Code (Plus 4)                 | Description of Expenditure |             |           |          |              |  |  |
|  |               |                    | PA                 | 17108                             | donatio                    | า           |           |          |              |  |  |
| To Whom Pa                             | aid           |                    |                    |                                   | МО                         | DAY         | YEAR      |          |              |  |  |
| Golden Plough Inn                      |               |                    |                    |                                   |                            |             |           |          |              |  |  |
| Mailing Address 5883 Lower York Rd     |               |                    |                    |                                   | 11                         | 1           | 2020      | \$       | 154.29       |  |  |
| City New Hope State Zip Code (Plus 4)  |               |                    |                    | Description of Expenditure        |                            |             |           |          |              |  |  |
|  |               |                    | PA                 | 18938                             | travel e                   |             | oense for | voluntee | er - canvass |  |  |
| To Whom Pa                             | aid           |                    |                    |                                   | МО                         | DAY         | YEAR      |          |              |  |  |
| Golden Plou                            | ıgh Inn       |                    |                    |                                   | МО                         | DAT         | TEAK      |          |              |  |  |
| Mailing Add                            | ress          | 5883 Lower York Rd |                    |                                   | 11                         | 1           | 2020      | \$       | 154.29       |  |  |
| <b>City</b> New                        | <i>I</i> Норе |                    | State              | Zip Code (Plus 4)                 | Descript                   | tion of Exp | enditure  |          |              |  |  |
|  |               |                    | PA                 | 18938                             |                            |             | oense for | voluntee | er - canvass |  |  |
| To Whom Pa                             | .:            |                    |                    |                                   | (Mitchel                   | I)          |           |          |              |  |  |
| Fran's Pub                             | aiu           |                    |                    |                                   | МО                         | DAY         | YEAR      |          |              |  |  |
| Mailing Add                            | ress          | 116 S Main Street  |                    |                                   | 11                         | 1           | 2020      | \$       | 146.42       |  |  |
|  |               |                    |                    |                                   |                            |             |           |          |              |  |  |
| <b>City</b> New                        | <i>I</i> Hope |                    | State<br>PA        | <b>Zip Code (Plus 4)</b><br>18938 |                            | canvass v   |           |          |              |  |  |
| To Whom Pa                             | aid           |                    | 10                 | 10930                             | 1000 101                   | Carryass v  | Olunteers | ·<br>    |              |  |  |
| Committee                              | to Elect      | : Darisha Parker   |                    |                                   | МО                         | DAY         | YEAR      |          |              |  |  |
| Mailing Add                            | ress          | 7715 CRITTENDEN S  | STREET, SUITE #390 |                                   | 11                         | 4           | 2020      | \$       | 500.00       |  |  |
| <b>City</b> Phila                      | adelphia      | 9                  | State              | Zip Code (Plus 4)                 | Description of Expenditure |             |           |          |              |  |  |
|  | •             |                    | PA                 | 19118                             | donation                   |             |           |          |              |  |  |
| To Whom Pa                             | aid           |                    |                    |                                   | мо                         | DAY         | YEAR      |          |              |  |  |
| ActBlue/Var                            | ntiv          |                    |                    |                                   | 110                        |             | 1 Z/IIX   |          |              |  |  |
| Mailing Add                            | ress          | 366 Summer Street  |                    |                                   | 11                         | 4           | 2020      | \$       | 161.69       |  |  |
| City Som                               | nerville      |                    | State              | Zip Code (Plus 4)                 | Descript                   | tion of Exp | enditure  |          |              |  |  |
|  |               |                    | МА                 | 02144                             | process                    | ing fees    |           |          |              |  |  |
| To Whom Pa                             | aid           |                    |                    |                                   | мо                         | DAY         | YEAR      |          |              |  |  |
| ActBlue/Var                            | ntiv          |                    |                    |                                   |                            |             |           |          |              |  |  |
| Mailing Add                            | ress          | 366 Summer Street  |                    |                                   | 11                         | 10          | 2020      | ₩        | 284.01       |  |  |
| City Som                               | nerville      |                    | State              | Zip Code (Plus 4)                 | Descript                   | tion of Exp | enditure  |          |              |  |  |
| MA 02144                               |               |                    |                    | process                           | ing fees                   |             |           |          |              |  |  |
| To Whom Paid                           |               |                    |                    | мо                                | DAY                        | YEAR        |           |          |              |  |  |
| Taqueria Feliz                         |               |                    |                    |                                   |                            |             |           |          |              |  |  |
| Mailing Address 4410 Main St           |               |                    |                    | 11                                | 2                          | 2020        | \$        | 90.68    |              |  |  |
| <b>City</b> Phila                      | adelphia      | a                  | State              | Zip Code (Plus 4)                 | Descript                   | tion of Exp | enditure  |          |              |  |  |
| PA 19127                               |               |                    |                    | food for                          | volunteer                  | s           |           |          |              |  |  |

| To Whom Paid                              |                    |       |                   | мо                         | DAY                        | YEAR     |           |          |  |  |
|---|--------------------|-------|-------------------|----------------------------|----------------------------|----------|-----------|----------|--|--|
| Larry White                               |                    |       |                   |                            | DAT                        | ILAK     |           |          |  |  |
| Mailing Address                           | 1539 S 16th St     |       | 11                | 5                          | 2020                       | \$       | 1,200.00  |          |  |  |
| City Philadelphia State Zip Code (Plus 4) |                    |       |                   |                            | Description of Expenditure |          |           |          |  |  |
| PA 19146                                  |                    |       |                   |                            | field management           |          |           |          |  |  |
| To Whom Paid                              |                    |       |                   | мо                         | DAY                        | YEAR     |           |          |  |  |
| Krispy Kreme                              |                    |       |                   | MO                         | DAI                        | ILAK     |           |          |  |  |
| Mailing Address 1305 West Chester Pike    |                    |       |                   |                            | 3                          | 2020     | \$        | 22.98    |  |  |
| City Havertown State Zip Code (Plus 4)    |                    |       |                   |                            | Description of Expenditure |          |           |          |  |  |
|   |                    | PA    | 19083             | donuts f                   | for volunte                | ers      |           |          |  |  |
| To Whom Paid                              |                    |       |                   | мо                         | DAY                        | YEAR     |           |          |  |  |
| Sunoco                                    |                    |       |                   | 110                        | DAI                        | ILAK     |           |          |  |  |
| Mailing Address                           | 301 S 52nd St      |       |                   | 11                         | 3                          | 2020     | \$        | 24.07    |  |  |
| <b>City</b> Philadelphia                  |                    | State | Zip Code (Plus 4) | Descript                   | tion of Exp                | enditure |           |          |  |  |
|   |                    | PA    | 19143             | gas for                    | E-day volu                 | nteer    |           |          |  |  |
| To Whom Paid                              |                    |       |                   | мо                         | DAY                        | YEAR     |           |          |  |  |
| David Townes                              |                    |       |                   | 11                         |                            |          |           | 1 100 00 |  |  |
| Mailing Address 235 N 60th Street         |                    |       |                   |                            | 5                          | 2020     | \$        | 1,100.00 |  |  |
| <b>City</b> Philadelphia                  |                    | State | Zip Code (Plus 4) | Description of Expenditure |                            |          |           |          |  |  |
|   |                    | PA    | 19139             | field and sign clean up    |                            |          |           |          |  |  |
| To Whom Paid                              |                    |       |                   | мо                         | DAY                        | YEAR     |           |          |  |  |
| Cafe Fresco                               |                    |       |                   |                            |                            |          |           |          |  |  |
| Mailing Address                           | 215 N 2nd St       |       |                   | 11                         | 7                          | 2020     | \$        | 190.00   |  |  |
| <b>City</b> Harrisburg                    |                    | State | Zip Code (Plus 4) | Descript                   | tion of Exp                | enditure |           |          |  |  |
|   |                    | PA    | 17101             | fundrais                   | ing meetir                 | ng       |           |          |  |  |
| To Whom Paid                              |                    |       |                   | МО                         | DAY                        | YEAR     |           |          |  |  |
| Cafe Fresco                               |                    |       |                   |                            |                            |          |           |          |  |  |
| Mailing Address                           | 215 N 2nd St       |       |                   | 11                         | 10                         | 2020     | \$        | 80.00    |  |  |
| <b>City</b> Harrisburg                    |                    | State | Zip Code (Plus 4) | Descript                   | tion of Exp                | enditure |           |          |  |  |
|   |                    | PA    | 17101             | meeting                    | l                          |          |           |          |  |  |
| To Whom Paid                              |                    |       |                   | мо                         | DAY                        | YEAR     |           |          |  |  |
| Sunoco                                    | D. I               | D T " |                   | 4.4                        | 0                          | 2020     | \$        | 50.00    |  |  |
|   | Bachmanville Rd At |       |                   | 11                         | 9                          | 2020     | Ψ         | 30.00    |  |  |
| City Hershey State Zip Code (Plus 4)      |                    |       |                   |                            | Description of Expenditure |          |           |          |  |  |
| PA 17033                                  |                    |       |                   | travel e                   | xpense                     |          |           |          |  |  |
| To Whom Paid                              |                    |       |                   | мо                         | DAY                        | YEAR     |           |          |  |  |
| Shell Oil                                 |                    |       |                   | 11                         |                            |          |           | 40.00    |  |  |
| Mailing Address 4628 Ridge Avenue         |                    |       |                   |                            | 23                         | 2020     | <b>\$</b> | 40.00    |  |  |
| <b>City</b> Philadelphia                  |                    | State | Zip Code (Plus 4) | Descript                   | tion of Exp                | enditure |           |          |  |  |
| PA 19129                                  |                    |       |                   | gas for outreach volunteer |                            |          |           |          |  |  |

| To Whom Paid  |       |                   | МО  |                            |          |    |            |  |  |
|---|-------|-------------------|---|----------------------------|----------|----|------------|--|--|
| Asia on the Parkway   |       |                   |   | DAY                        | YEAR     |    |            |  |  |
| Mailing Address 1700 Benjamin   | 11    | 22                | 2020                                      | \$                         | 34.55    |    |            |  |  |
| City Philadelphia State Zip Code (Plus 4)                               |       |                   |   | Description of Expenditure |          |    |            |  |  |
| PA 19103  |       |                   |   | fundraising meeting        |          |    |            |  |  |
| To Whom Paid  |       |                   | мо  | DAY                        | YEAR     |    |            |  |  |
| Quansheila Clay   | 1-10  |                   | ILAK                                      |                            |          |    |            |  |  |
| Mailing Address 2105 W Jefferson Street                                 |       |                   |   | 4                          | 2020     | \$ | 2,000.00   |  |  |
| <b>City</b> Philadelphia  | State | Zip Code (Plus 4) | Description of Expenditure                |                            |          |    |            |  |  |
|   | PA    | 19121             | food for E-day volunteers and pollworkers |                            |          |    |            |  |  |
| To Whom Paid  |       |                   | МО  | DAY                        | YEAR     |    |            |  |  |
| Rayshawn Washington   |       |                   | МО  | DAI                        | ILAK     |    |            |  |  |
| Mailing Address 2740 N Taylor S   | St    |                   | 10  | 20                         | 2020     | \$ | 700.00     |  |  |
| <b>City</b> Philadelphia  | State | Zip Code (Plus 4) | Descrip                                   | tion of Exp                | enditure |    |            |  |  |
|   | PA    | 19132             | youth outreach and gotv                   |                            |          |    |            |  |  |
|   |       |                   |   |                            |          |    | PAGE TOTAL |  |  |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. |       |                   |   |                            |          | \$ | 29,436.14  |  |  |