Campaign Finance Report

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

Filer Identification 2020C1475 Number :							Repoi Filed	-	C	ANDI	DATE	*	′ ′	ОММІТТ	EE		LOBE	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	bbyis	it:	C	OYLE	, MIC	HAEL	F JR										
Street Address:																				
City:									Sta	te:	e:				Zip Code: 19154					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.	30 D PRIM	AY 1ARY	F	POST- 3.				AMENDMENT REPORT?		Yes	No)	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND F ELECT	FRIDAY FION	PRE-	5.	30 D	AY CTION	F	POST- 6. X			TERMIN REPORT		N	Yes	No)	√
report type)	ANNUAL REF	PORT	7.	Year	2020					CK O				PAPER			\searrow	DISKI	TTE	
Name of Office S	- Sought by Car	ndidate	e:						DA	TE O	F ELE	СТ	ION	District Numbe		fice de	Par	ty Code	Cour	
REPRESENTATI	VE IN THE G	ENER <i>A</i>	AL ASSI	EMBL	Y				МО		DAY		YEAR	170	ST	Ή	DEN	1	51	
										11	3 2020 (SEE INSTRUCTIONS FOR C					CODES)			
Summary of Expenditures		nd	МО	.0 DA	20	YEAR 20	20 -	ГО	МО		DAY	23	YEAR		OR O	FFIC	E USE	ONLY		
A. Amount Bro	ught Forward	d From			20	20	20	. U		11	,		202	4						
B. Total Moneta				-	(From	Sched	ule I)	-	, , ,		(1,900.00)									
C. Total Funds	. Total Funds Available (Sum Of Lines A and B)							<u> </u>			(1	,900.00)							
D. Total Expend	D. Total Expenditures (From Schedule III)						_	<u> </u>				500.0	5							
E. Ending Cash	Cash Balance (Subtract Line D From Line C)					9	5			(2,	400.00)								
F. Value Of In-	Kind Contribu	stributions Received (From Schedule II)					9	\$				0.00)							
G. Unpaid Debt	s And Obliga	tions (From S	chedu	ıle IV)			9	\$				0.0			'				
						AFFI	DAV:	IT SI	ECTI	ON										
PART I - If this is	a Committe	e repo	rt, trea	surer	sign h	ere. If	this i	s a Ca	ndida	ate re	port,	can	didate s	ign here						
I swear (or affirm) correct and complete		rt, inclu	ding the	attach	ned sch	edules	filed or	n papei	or by	elect	ronic m	ediu	ım, are t	the best	of my	know	ledge	and bel	ief , tr	ue
Sworn to and subs	cribed before n day of	ne this		20									Signatu	re of Pers	on Sub	bmitti	ng Rep	ort		_
		ignature	.	•				<u>-</u>						Pri	nted N	lame				_
My Commission Ex	rpires							_						Em	ail					
	МО		DA	Υ		YR					Ar	ea C	Code	Daytii	me Te	elepho	ne Nu	mber		
Part II- If this is	a report of a	a candi	date's	autho	rized (Commi	ittee, (Candi	date	shall	sign h	ere.								
I swear (or affirm) No 320) as amende		st of my	/ knowle	dge an	nd belie	f this p	oolitica	l comr	nittee	has n	ot viola	ted	any prov	isions of t	he act	of Jui	ne 3,19	937 (P.I	133	3,
Sworn to and subsc	ribed before me	e this		20										Signature	of Car	ndidat	te			_
				- -				_						Print	ed Na	me				-
My Commission Exp	_	ature						_						Em	ail					-
·		10						_				Cod	la) 21/4° ==	10 Tr	lonh	o Nu'	nor.	-
	М		DA	λY		YR					Area	coa	ie		aytım	ie iei	epnon	e Numi	Jer	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
DOYLE, MICHAEL F JR	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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee 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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$ 0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 3.			\$	PAGE TOTAL 0.00

OTHER RECEIPTS

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

Name of Filing Committee or Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	Section	••			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Per	iod	
DOYLE, MICHAEL F JR	From:	<u>10/20/2020</u> To:	11/23/2020
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	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 Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai 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	Reporting Period	
	From:	То:

					DATE			AMOUNT
				мо	DAY	YEAR		
							\$	0.00
State		Zip Code(Plus 4)						
				Occupa	tion			
pal Place of	City	State		Zip 4)	Code(Plus	Descri	ption of C	ontribution
on Schedule II	, In-Kind	Contributions De	etaile	ed				PAGE TOTAL 0.00
	pal Place of	pal Place of City	pal Place of City State	pal Place of City State	State Zip Code(Plus 4) Occupation Pal Place of City State Zip	State Zip Code(Plus 4) Occupation Pal Place of City State Zip Code(Plus 4)	State Zip Code(Plus 4) Occupation Pal Place of City State Zip Code(Plus 4) Descri	State Zip Code(Plus 4) Occupation Pal Place of City State Zip Code(Plus 4) Description of C

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
DOYLE, MICHAEL F JR	From	10/20/2020	То:	11/23/2020	
	DATE			AMOUNT	

			DATE				AMOUNT	
To Whom Paid Friends to Elect Mike Doyle			мо	DAY	YEAR			
Mailing Address 12619 Dunks Ferry Road		11	9	2020	\$	500.00		
City Philadelphia	State PA	Zip Code (Plus 4) 19154	Description of Expenditure In-kind: office space					
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	500.00		