

Campaign Finance Report

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

Filer Identification Number :		20180132		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Nina for PA												
Street Address:												
City: Philadelphia						State: PA		Zip Code: 19119				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2020	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	3	2020				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	24	2020		12	31	2020				
A. Amount Brought Forward From Last Report						\$ 26,721.86						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 1,483.34						
C. Total Funds Available (Sum Of Lines A and B)						\$ 28,205.20						
D. Total Expenditures (From Schedule III)						\$ 11,575.97						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 16,629.23						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 1,210,547.19						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Nina for PA	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 33.34

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 450.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 450.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 500.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,483.34
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PART A
CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES
\$50.01 TO \$250.00

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

Name of Filing Committee or Candidate Nina for PA	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">DATE</td> <td style="width: 40%;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee Clearfield County Democratic Committee			MO	DAY	YEAR	\$ 200.00
Mailing Address			11	30	2020	
City Clearfield	State PA	Zip Code (Plus 4) 16830				

Full Name of Contributing Committee Teamsters Local Union 249			MO	DAY	YEAR	\$ 250.00
Mailing Address			11	30	2020	
City Pittsburgh	State PA	Zip Code (Plus 4) 15201				

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

PAGE TOTAL
\$ 450.00

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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
Nina for PA	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	500.00
Pittsburgh Fire Fighters Local 1 Fire PAC									
Mailing Address					11	30	2020		
City	Pittsburgh		State	PA				Zip Code (Plus 4)	152071606

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

PAGE TOTAL
\$ 500.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate Nina for PA	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
James B Wall	11	30	2020	\$ 500.00
Mailing Address				
City Pittsburgh	State PA	Zip Code (Plus 4) 15222		
Employer Name SELF			Occupation INSURANCE AGENT	
Employer Mailing Address/Principal Place of Business		City Pittsburgh	State PA	Zip Code (Plus 4) 152225406

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

PAGE TOTAL
\$ 500.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
Nina for PA		From: <u>11/24/2020</u> To: <u>12/31/2020</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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 From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						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:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Nina for PA	From <u>11/24/2020</u> To: <u>12/31/2020</u>

DATE				AMOUNT		
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 24.89
Mailing Address			12	3	2020	
City	West Somerville	State MA	Zip Code (Plus 4) 021440031		Description of Expenditure Actblue contribution cost	
To Whom Paid Ahmad-Harper Strategies LLC			MO	DAY	YEAR	\$ 2,000.00
Mailing Address			11	30	2020	
City	Philadelphia	State PA	Zip Code (Plus 4) 191191025		Description of Expenditure Consultant, Soc Media	
To Whom Paid Citizens Bank			MO	DAY	YEAR	\$ 20.00
Mailing Address			12	1	2020	
City	Providence	State RI	Zip Code (Plus 4) 029407000		Description of Expenditure Wire Transfer Fee	
To Whom Paid Citizens Bank			MO	DAY	YEAR	\$ 20.00
Mailing Address			12	1	2020	
City	Providence	State RI	Zip Code (Plus 4) 029407000		Description of Expenditure Wire Transfer Fee	
To Whom Paid Ameena Elahi			MO	DAY	YEAR	\$ 10.00
Mailing Address			12	4	2020	
City	Philadelphia	State PA	Zip Code (Plus 4) 191311602		Description of Expenditure Contribution refunded	
To Whom Paid Labels & Lists Inc - DBA L2			MO	DAY	YEAR	\$ 2,400.00
Mailing Address			12	11	2020	
City	Bothell	State WA	Zip Code (Plus 4) 980118016		Description of Expenditure Database	

To Whom Paid			MO	DAY	YEAR	\$ 19.00
Nexcess.Net, LLC						
Mailing Address			11	24	2020	
City	Southfield	State	Zip Code (Plus 4)		Description of Expenditure	
	MI		480755629		Website Branding	
To Whom Paid			MO	DAY	YEAR	\$ 19.00
Nexcess.Net, LLC						
Mailing Address			12	22	2020	
City	Southfield	State	Zip Code (Plus 4)		Description of Expenditure	
	MI		480755629		Website Branding	
To Whom Paid			MO	DAY	YEAR	\$ 1,296.00
NGP VAN						
Mailing Address			12	8	2020	
City	Somerville	State	Zip Code (Plus 4)		Description of Expenditure	
	MA		021442500		Database Fee	
To Whom Paid			MO	DAY	YEAR	\$ 64.61
Paragon Payment Solutions						
Mailing Address			12	2	2020	
City	Tempe	State	Zip Code (Plus 4)		Description of Expenditure	
	AZ		852821895		Merchant Fees	
To Whom Paid			MO	DAY	YEAR	\$ 658.51
Paychex, Inc						
Mailing Address			11	30	2020	
City	Rochester	State	Zip Code (Plus 4)		Description of Expenditure	
	NY		146252311		Payroll Taxes	
To Whom Paid			MO	DAY	YEAR	\$ 288.28
Paychex, Inc						
Mailing Address			12	10	2020	
City	Rochester	State	Zip Code (Plus 4)		Description of Expenditure	
	NY		146252311		Payroll Taxes	
To Whom Paid			MO	DAY	YEAR	\$ 857.86
Paychex, Inc						
Mailing Address			12	15	2020	
City	Rochester	State	Zip Code (Plus 4)		Description of Expenditure	
	NY		146252311		Payroll Taxes	
To Whom Paid			MO	DAY	YEAR	\$ 440.00
Bilal Rice						
Mailing Address			11	30	2020	
City	Philadelphia	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		191392804		Health Insurance Payment	

To Whom Paid Bilal Rice			MO	DAY	YEAR	\$ 1,548.32
Mailing Address			11	30	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191392804	Description of Expenditure Payroll			

To Whom Paid Bilal Rice			MO	DAY	YEAR	\$ 1,833.39
Mailing Address			12	15	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191392804	Description of Expenditure Payroll			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 59.92
Mailing Address			12	8	2020	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Credit card processing fees			

To Whom Paid Zoom.US			MO	DAY	YEAR	\$ 16.19
Mailing Address			12	7	2020	
City San Jose	State CA	Zip Code (Plus 4) 951131608	Description of Expenditure Conference Call Subscription			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 11,575.97

SCHEDULE IV
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 Candidate	Reporting Period
Nina for PA	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

				DATE		Outstanding Balance of Debt	
Name of Creditor Nina Ahmad				MO	DAY	YEAR	\$ 9,000.00
Mailing Address				3	13	2018	
City Philadelphia		State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			
Name of Creditor Nina Ahmad				MO	DAY	YEAR	\$ 50,000.00
Mailing Address				3	26	2018	
City Philadelphia		State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			
Name of Creditor Nina Ahmad				MO	DAY	YEAR	\$ 450,000.00
Mailing Address				3	26	2018	
City Philadelphia		State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			
Name of Creditor Nina Ahmad				MO	DAY	YEAR	\$ 61,750.00
Mailing Address				5	4	2018	
City Philadelphia		State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			
Name of Creditor Nina Ahmad				MO	DAY	YEAR	\$ 13,000.00
Mailing Address				5	8	2018	
City Philadelphia		State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			
Name of Creditor Nina Ahmad				MO	DAY	YEAR	\$ 12,000.00
Mailing Address				5	9	2018	
City Philadelphia		State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 27,000.00
Mailing Address			5	11	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 11,485.52
Mailing Address			5	14	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 17,600.00
Mailing Address			6	27	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 4,000.00
Mailing Address			11	21	2018	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan Received			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 10,000.00
Mailing Address			9	10	2019	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 15,000.00
Mailing Address			2	20	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Vendor Payment			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 9,000.00
Mailing Address			2	20	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan to campaign			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 27,000.00
Mailing Address			4	17	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan to account			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 89,716.67
Mailing Address			5	7	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 19,716.67
Mailing Address			5	11	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 70,000.00
Mailing Address			5	12	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 15,000.00
Mailing Address			5	15	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 15,000.00
Mailing Address			5	15	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan to campaign			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 43,503.33
Mailing Address			5	19	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 41,000.00
Mailing Address			5	19	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 13,580.00
Mailing Address			5	20	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 10,000.00
Mailing Address			5	21	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Paid Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 10,000.00
Mailing Address			5	21	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Paid Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 30,490.00
Mailing Address			5	22	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Paid Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 35,901.67
Mailing Address			5	26	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 45,000.00
Mailing Address			5	28	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Paid Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 26,803.33
Mailing Address			6	2	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Paid Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 10,000.00
Mailing Address			6	5	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Pay Vendor			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 4,000.00
Mailing Address			6	12	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Loan to campaign			

Name of Creditor Nina Ahmad			MO	DAY	YEAR	\$ 14,000.00
Mailing Address			6	12	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191191025	Description of Debt Paid Vendor			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 1,210,547.19