Campaign Finance Report

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

Filer Identificati Number :	on 201	50069			Repor Filed		CANDIDATE COMMITTEE V LOBBYIS							BYIST			
Name of Filing C	Committee, Candi	date or L	obbyist:	P	PHILLY	SET	GO										
Street Address:	1414 S PENN	I SQ UNI	T 17E														
City:	PHILADELPH:	IA					Sta	te:	PA			Zip Code: 19102					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2. X		AY 1ARY	F	POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION	RE-	- 5.	30 D	AY CTION	F	POST-	6.		TERMINA REPORT		Yes	No	•	\
report type)	ANNUAL REPORT	7.	Year 2021				NG M					PAPER		\	DISKE	TTE	
Name of Office S	Sought by Candida	ate:	•		•		DA	TE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
							МО		DAY	YI	AR	rumber		51			
								11		2	2021		ONS FOR C	ODES)			
•	Receipts and	МО	DAY YE	AR			МО		DAY	YI	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		3 30	20	21	ГО		5		3	2021						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$	5			10,2	241.00						
B. Total Monet	ary Contributions	And Rec	eipts (From Sc	hed	lule I)	5	\$			-	700.00						
C. Total Funds	Available (Sum 0	f Lines A	and B)			9	\$			10,9	941.00						
D. Total Expend	ditures (From Scl	nedule II	I)			9	\$			5	98.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			9	5			10,3	43.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dule	e II)	9	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			5	\$				0.00			•			
			A		DAV	IT SI	ECTI	ON									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I1	f this i	s a Ca	ndida	ate re	eport, e	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached schedu	lles	filed or	рареі	or by	elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me th day of	is	20							9	ignature	of Perso	n Submit	ting Rep	oort		
	Signat	ure				_						Prin	ted Name	e			_
My Commission Ex	cpires					_						Ema	il				_
	МО	D	AY	/R					Ar	ea Coo	le	Daytim	e Telepl	one Nu	mber		
Part II- If this is	a report of a car	didate's	authorized Cor	nmi	ittee, (Candi	date	shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his p	political	comr	nittee	has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333	3,
Sworn to and subsc	ribed before me this	5									s	ignature o	of Candid	ate			-
	day of —— ————					_						Printe	d Name				-
	Signature					_											_
My Commission Exp	pires											Ema	il				
	мо	D	AY	YR		_			Area	Code		Da	aytime T	elephor	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PHILLY SET GO	From:	<u>3/30/202</u>	<u>1</u> To:	<u>5/3/2021</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	100.00
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)			\$	700.00
TOTAL for the Reporting	Period	(2)	\$	700.00
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			\$	800.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Nume of Fining Comm		From:			То	:		
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL
\$ 0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candidat	e		Rep	orting Pe	eriod		
PHILLY SET GO			Froi	n:	3/30/	<u>2021</u> T o	<u>5/3/2021</u>
					DATE		AMOUNT
Full Name of Contributor Adam Erickson				МО	DAY	YEAR	
Mailing Address 1500 Walnut Street	t, Suite 800						\$ 100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19102		5	2	2021	
Full Name of Contributor Pat Christmas				МО	DAY	YEAR	
Mailing Address 726 Rodman Street				4	9	2021	\$ 250.00
City Philadelphia	State PA	Zip Code (Plus 4) 19147		·	,		
Full Name of Contributor Darin Bartholomew				МО	DAY	YEAR	
Mailing Address 1324 Locust, Apt. 1	.010			4	16	2021	\$ 100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19107		4	16	2021	
Full Name of Contributor Ben Waxman				МО	DAY	YEAR	
Mailing Address 2201 Chestnut St	Apt. 402						\$ 250.00
City Philadelphia	State PA	Zip Code (Plus 4) 19103		4	6	2021	
			!				PAGE TOTAL

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

\$ 700.00

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

nme of Filing Committee or Candidate			Reporting Period					
			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	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	
PHILLY SET GO	From:	3/30/2021 To:	<u>5/3/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candid	ate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Name of Filing Committee or Candidate						
PHILLY SET GO	PHILLY SET GO F			<u>3/30</u>	То:	5/3/2021	
				DATE			AMOUNT
To Whom Paid Zoom Video Communications			мо	DAY	YEAR		
Mailing Address 55 Almaden Boulevard			4	16	2021	\$	199.00
City San Jose	State CA	Zip Code (Plus 4) 95113	Descrip Websit	otion of Exp e Fees	penditure		
To Whom Paid Nation Builder			МО	DAY	YEAR		
Mailing Address PO Box 81:	1428		3	31	2021	\$	399.00
City Los Angeles CA State Zip Code (Plus 4) CA 90081				otion of Exp e upgrade	penditure		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

598.00

\$