

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 :		20190266		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Friends of Nikil Saval												
Street Address: 525 QUEEN ST												
City: PHILADELPHIA						State: PA			Zip Code: 19147			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2021	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	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		5	4	2021		6	7	2021				
A. Amount Brought Forward From Last Report						\$ 40,831.90						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 752.50						
C. Total Funds Available (Sum Of Lines A and B)						\$ 41,584.40						
D. Total Expenditures (From Schedule III)						\$ 938.02						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 40,646.38						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

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

Signature

Printed Name

My Commission Expires

MO DAY YR

Email

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

Signature

Printed Name

My Commission Expires

MO DAY YR

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Friends of Nikil Saval	From: <u>5/4/2021</u> To: <u>6/7/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 617.50

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)	\$ 135.00
TOTAL for the Reporting Period (2)	\$ 135.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 752.50
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PART B ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate Friends of Nikil Saval	Reporting Period From: <u>5/4/2021</u> To: <u>6/7/2021</u>
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				DATE		AMOUNT	
Full Name of Contributor Dermot Benedict Delude-Dix				MO	DAY	YEAR	\$ 27.00
Mailing Address 1415 S Broad St							
City Philadelphia		State PA	Zip Code (Plus 4) 191474919				
Full Name of Contributor Dermot Benedict Delude-Dix				MO	DAY	YEAR	\$ 27.00
Mailing Address 1415 S Broad St							
City Philadelphia		State PA	Zip Code (Plus 4) 191474919				
Full Name of Contributor Dermot Benedict Delude-Dix				MO	DAY	YEAR	\$ 27.00
Mailing Address 1415 S Broad St							
City Philadelphia		State PA	Zip Code (Plus 4) 191474919				
Full Name of Contributor Adam Erispaha				MO	DAY	YEAR	\$ 27.00
Mailing Address 1019 Spruce St Apt 2R							
City Philadelphia		State PA	Zip Code (Plus 4) 191076728				
Full Name of Contributor Adam Erispaha				MO	DAY	YEAR	\$ 27.00
Mailing Address 1019 Spruce St Apt 2R							
City Philadelphia		State PA	Zip Code (Plus 4) 191076728				

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

PAGE TOTAL
\$ 135.00

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: To:

DATE				AMOUNT
Full Name of Contributing Committee				
Mailing Address				
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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	Reporting Period
	From: To:

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 0.00

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	
Friends of Nikil Saval		From: <u>5/4/2021</u> To: <u>6/7/2021</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
Friends of Nikil Saval	From <u>5/4/2021</u> To: <u>6/7/2021</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
ActBlue/Vantiv eCommerce				
Mailing Address 366 Summer St	5	5	2021	\$ 9.91
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure processing fees	
To Whom Paid	MO	DAY	YEAR	
ActBlue/Vantiv eCommerce				
Mailing Address 366 Summer St	6	3	2021	\$ 10.03
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure processing fees	
To Whom Paid	MO	DAY	YEAR	
ADP				
Mailing Address 12250 E Iliff Ave	6	4	2021	\$ 44.28
City Aurora	State CO	Zip Code (Plus 4) 800146318	Description of Expenditure payroll taxes	
To Whom Paid	MO	DAY	YEAR	
Google LLC				
Mailing Address 1600 Amphitheatre Pkwy	6	2	2021	\$ 38.88
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure email platform	
To Whom Paid	MO	DAY	YEAR	
LiquidWeb				
Mailing Address 2703 Ena Dr	5	22	2021	\$ 31.32
City Lansing	State MI	Zip Code (Plus 4) 489178585	Description of Expenditure website hosting	
To Whom Paid	MO	DAY	YEAR	
Mailchimp				
Mailing Address 675 Ponce De Leon Ave NE Ste 5000	5	5	2021	\$ 183.60
City Atlanta	State GA	Zip Code (Plus 4) 303082172	Description of Expenditure email software	

To Whom Paid Mailchimp			MO	DAY	YEAR	\$ 183.60
Mailing Address 675 Ponce De Leon Ave NE Ste 5000			6	5	2021	
City Atlanta	State GA	Zip Code (Plus 4) 303082172	Description of Expenditure email software			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 436.40
Mailing Address 1445 New York Ave NW Ste 200			6	2	2021	
City Washington	State DC	Zip Code (Plus 4) 200052158	Description of Expenditure software			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 938.02

