Campaign Finance Report

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

Filer Identificat Number :	ion 2021	C0069			Repor Filed I		CANDI	DATE	✓	со	MMITTEE		LOB	BYIST		
	Committee, Candid	ate or Lo	obbyist:		MICHEI	-	NGLEY			_						
Street Address:																
City:							State:				Zip Cod	Zip Code: 19106				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D. PRIM		POST- 3.			AMENDMENT REPORT?		Yes	No	, 🔨	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pre	∃- 5. X	30 D. ELEC	ay f Tion	POST- 6.			TERMINA [*] REPORT?	TION	Yes	No	· 🗸	
report type)	ANNUAL REPORT	7.	Year 2021				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE	
Name of Office	L Sought by Candidat	te:					DATE O	F ELEC	TION		District Number	Office Code	Par	ty Code	County Code	
	COURT OF COMM		٨c				мо	DAY	YEAR		1	СРЈ	DEN	1		
JODGE OF THE							11		2 20	021		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YEAR		FOI	R OFFIC	E USE	ONLY		
Expenditures from: 9 14 2021						0	10	1	8 2	021						
A. Amount Bro	ought Forward From	n Last Ro	eport			\$.00						
B. Total Monet	ary Contributions /	And Rece	eipts (From	1 Sche	dule I)	\$	\$ 0.00									
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5		0	.00						
D. Total Expen	ditures (From Scho	edule III	[)			\$	5		9,076	.66						
E. Ending Cash	n Balance (Subtract	t Line D	From Line	C)		\$	5	(9,076.6	56)						
	Kind Contributions		•		le II)	\$	5	0.00								
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$	5		0	.00						
							CTION									
	s a Committee report, incl											my know	vledae	and beli	ef , true	
correct and comp	ete.	-				F-F						,	j -			
Sworn to and sub	scribed before me this day of	6	20						Signa	ature	of Person	Submitt	ing Rep	oort		
	Signatu	ro				_					Print	ed Name				
My Commission E	-										Email					
	мо	DA	NY	YR		_		Are	a Code		Daytime	e Telepho	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, C	Candid	late shall	sign he	re.							
I swear (or affirm No 320) as amend) that to the best of n ed.	ny knowle	dge and beli	ef this	political	comn	nittee has n	ot violat	ed any pr	ovisi	ons of the	act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subs	cribed before me this day of		20							Si	gnature of	f Candida	ite			
						_					Printed	i Name				
My Commission Ex	Signature					-					Email	1				
						_										
	мо	DA	ΥY	YR	l			Area C	oae		Da	ytime Te	eephor	ie Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MICHELE HANGLEY From: <u>9/14/2021</u> To: 10/18/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Commit	Name of Filing Committee or Candidate						
			Reporting From:	i cirioù	То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

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 Candidat	e			orting P	eriod				
			Fro	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
PAGE TOTAL									
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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 Cand	lidate		Reporting Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Report	ing Perio	d				
F			From: To:						
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description		1				1			
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ΓAL
		iiai y i 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 Period		
MICHELE HANGLEY	From:	<u>9/14/2021</u> то:	<u>10/18/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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					То:		
				DATE		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor					Occupat	tion	_			
Employer Mailing Address/Principal Place of City State Business				Zip 4)	Code(Plus	Descri	otion of	f Contribution		

		I		
Enter Grand Total of Part G on Schedule II, In	-Kind Contribut	ions Detailed		PAGE TOTAL
Summary Page, Section 3.				0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate		Reporti	ng Period				
MICHELE HANGLEY			From	<u>9/14</u>	<u>4/2021</u>	То:	<u>10/18/2021</u>	
				DATE			AMOUNT	
To Whom Paid LAUREN UNDERWOOD FOR CONGRESS			мо	DAY	YEAR			
Mailing Address 13400 S. ROUTE 59	, STE. 116 BOX 248		6	17	2021	\$	250.00	
City PLAINFIELD	State IL	Zip Code (Plus 4) 60585	Descrip EVENT					
To Whom Paid LOVE CITY BREWING			мо	DAY	YEAR			
Mailing Address 1016 BUTTONWOOD STREET			6	10	2021	\$	3,415.35	
CityPHILADELPHIAStateZip Code (Plus 4)PA19123			Description of Expenditure EVENT CATERING					
To Whom Paid MARIA MCLAUGHLIN FOR SUPREME CO	URT		мо	DAY	YEAR			
Mailing Address PO BOX 15943			10	12	2021	\$	1,000.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103		tion of Exp	penditure	1		
To Whom Paid LOVE CITY BREWING			мо	DAY	YEAR			
Mailing Address 1016 BUTTONWOOD) STREET		6	16	2021	\$	80.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123		otion of Exp CATERING				
To Whom Paid MALCOLMPAC		мо	DAY	YEAR				
Mailing Address PO BOX 22395	Aailing Address PO BOX 22395			23	2021	\$	500.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19110		tion of Exp	penditure	•		

To Whom Paid MATT & MARIE'S	мо	DAY	YEAR							
Mailing Address 100 N. 18TH ST.				9	2021	\$	1,333.80			
City PHILADELPHIA		tion of Exp CATERING								
To Whom Paid PHILLY PRETZEL	мо	DAY	YEAR							
Mailing Address 1521 SANSOM STREET			6	10	2021	\$	93.00			
CityPHILADELPHIAStateZip Code (Plus 4)PA19102				Description of Expenditure EVENT CATERING						
To Whom Paid SHARIF STREET FOR PA	мо	DAY	YEAR							
Mailing Address PO BOX 28729 65	8 N. 63RD STREE	T	7	2	2021	\$	1,000.00			
City PHILADELPHIA	PHILADELPHIA State Zip Code (Plus 4) PA 19151				Description of Expenditure EVENT TICKET					
To Whom Paid SQUARESPACE INC.			мо	DAY	YEAR					
	ET 12TH FLOOR		мо 6	DAY 14	YEAR 2021	\$	12.72			
SQUARESPACE INC.	ET 12TH FLOOR State NY	Zip Code (Plus 4) 10014	6 Descrip		2021		12.72			
SQUARESPACE INC. Mailing Address 225 VARICK STRE	State		6 Descrip EMAIL S	14 otion of Exp	2021		12.72			
SQUARESPACE INC. Mailing Address 225 VARICK STRE City NEW YORK To Whom Paid	State NY		6 Descrip EMAIL S	14 htion of Exp SERVICES	2021 penditure		12.72			
SQUARESPACE INC. Mailing Address 225 VARICK STRE City NEW YORK To Whom Paid SQUARESPACE INC. Mailing Address Mailing Address	State NY		6 Descrip EMAIL 9 MO 7 Descrip	14 htion of Exp SERVICES DAY	2021 penditure YEAR 2021 penditure	\$				
SQUARESPACE INC. Mailing Address 225 VARICK STRE City NEW YORK To Whom Paid SQUARESPACE INC. Mailing Address 225 VARICK STRE	State NY ET 12TH FLOOR State	10014 Zip Code (Plus 4)	6 Descrip EMAIL 9 MO 7 Descrip	14 Nation of Exp SERVICES DAY 14	2021 penditure YEAR 2021 penditure	\$				
SQUARESPACE INC. Mailing Address 225 VARICK STRE City NEW YORK To Whom Paid SQUARESPACE INC. Mailing Address 225 VARICK STRE City NEW YORK To Whom Paid 225 VARICK STRE City NEW YORK To Whom Paid 225 VARICK STRE City NEW YORK To Whom Paid 225 VARICK STRE	State NY ET 12TH FLOOR State NY	10014 Zip Code (Plus 4)	6 Descrip EMAIL	14 stion of Exp SERVICES DAY 14 stion of Exp SERVICES	2021 penditure YEAR 2021 penditure	\$				

To Whom Paid SQUARESPACE INC.					DAY	YEAR			
Mailing Address 225 VARICK STREET 12TH FLOOR				9	14	2021	\$	12.	.72
City NEW YORK State Zip Code (Plus 4) NY 10014					i ition of Exp SERVICES				
To Whom Paid SQUARESPACE INC.					DAY	YEAR			
Mailing Address 225 VARICK STREET 12TH FLOOR			10	14	2021	\$	12.	.72	
City NEW YORK State Zip Code (Plus 4) NY 10014				Description of Expenditure EMAIL SERVICES					
To Whom Paid UBER					DAY	YEAR			
Mailing Address	1455 MARKET STRE	ET #400		6	12	2021	\$	39.	.80
City SAN FRA	RANCISCO State Zip Code (Plus 4) CA 94103				Description of Expenditure TRAVEL				
To Whom Paid UBER		<u> </u>		мо	DAY	YEAR			
	1455 MARKET STRE	ET #400		мо 7	DAY	YEAR 2021	\$	44.	.07
UBER		ET #400 State CA	Zip Code (Plus 4) 94103	7	1 otion of Exp	2021		44.	.07
UBER Mailing Address		State		7 Descrip	1 otion of Exp	2021		44.	.07
UBER Mailing Address City SAN FRAI To Whom Paid		State CA		7 Descrip TRAVEL	1 ption of Exp -	2021 penditure			.07
UBER Mailing Address City SAN FRAI To Whom Paid UBER	NCISCO 1455 MARKET STRE	State CA		7 Descrip TRAVEL MO 7	1 otion of Exp - DAY 1 stion of Exp	2021 penditure YEAR 2021	\$		
UBER Mailing Address City SAN FRAI To Whom Paid UBER Mailing Address	NCISCO 1455 MARKET STRE	State CA ET #400 State	94103 Zip Code (Plus 4)	7 Descrip TRAVEL MO 7 Descrip	1 otion of Exp - DAY 1 stion of Exp	2021 penditure YEAR 2021	\$		
UBER Mailing Address City SAN FRAI To Whom Paid UBER Mailing Address City SAN FRAI To Whom Paid	NCISCO 1455 MARKET STRE	State CA ET #400 State CA	94103 Zip Code (Plus 4)	7 Descrip TRAVEL MO 7 Descrip TRAVEL	1 otion of Exp - DAY 1 otion of Exp -	2021 penditure YEAR 2021 penditure	\$	10.	

To Whom Paid UBER					DAY	YEAR			
Mailing Address 1455 MARKET STREET #400				7	7	2021	\$	19.77	
CitySAN FRANCISCOStateZip Code (Plus 4)CA94103					tion of Exp -	penditure			
To Whom Paid UBER					DAY	YEAR			
Mailing Address 1455 MARKET STREET #400				8	9	2021	\$	16.35	
CitySAN FRANCISCOStateZip Code (Plus 4)CA94103				Description of Expenditure TRAVEL					
To Whom Paid UBER					DAY	YEAR			
Mailing Address 145	55 MARKET STRE	ET #400		9	25	2021	\$	40.14	
City SAN FRANCISC	SAN FRANCISCOStateZip Code (Plus 4)CA94103				Description of Expenditure TRAVEL				
To Whom Paid UBER				мо	DAY	YEAR			
UBER	55 MARKET STRE	ET #400		мо 9	DAY 25	YEAR 2021	\$	37.87	
UBER		ET #400 State CA	Zip Code (Plus 4) 94103	9	25 otion of Exp	2021		37.87	
UBER Mailing Address 145		State		9 Descrip	25 otion of Exp	2021		37.87	
UBER Mailing Address 145 City SAN FRANCISC To Whom Paid UBER		State CA		9 Descrip TRAVEL	25 ption of Exp -	2021 penditure		37.87	
UBER Mailing Address 145 City SAN FRANCISC To Whom Paid UBER	CO 55 MARKET STRE	State CA		9 Descrip TRAVEL MO 10	DAY 6	2021 penditure YEAR 2021	\$		
UBER Mailing Address 145 City SAN FRANCISC To Whom Paid UBER Mailing Address 145 City	CO 55 MARKET STRE CO	State CA ET #400 State	94103 Zip Code (Plus 4)	9 Descrip TRAVEL MO 10 Descrip	DAY 6	2021 penditure YEAR 2021	\$		
UBER Mailing Address 145 City SAN FRANCISC To Whom Paid UBER Mailing Address 145 City SAN FRANCISC To Whom Paid USPS PO BOXES ONLIN Mailing Address	CO 55 MARKET STRE CO	State CA ET #400 State CA	94103 Zip Code (Plus 4)	9 Descrip TRAVEL MO 10 Descrip TRAVEL	DAY 6 otion of Exp -	2021 penditure YEAR 2021 penditure	\$		

To Whom Paid ZIMM PRODUCTIONS			мо	DAY	YEAR		
Mailing Address 2218 S. 17TH ST.				6	10	2021	\$ 1,000.00
CityPHILADELPHIAStateZip Code (Plus 4)PA19145					ition of Exp SERVICES		
Enter Grand Tot	al of Expenditu	ures on Page 1 Re	nort Cover Page Item D				PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$ 9,076.66