### **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	50283				port ed B		CAND	CANDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Candi	date or L	obbyist:		Will	liams	for S	Senate								
Street Address:	P.O. Box 63	13														
City:	Philadelphia -							State:	PA			Zip Cod	le: 19	9139		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDMENT Yes REPORT?			No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- ELECTION			5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	No	<b>~</b>
report type)	ANNUAL REPOR	<b>T</b> 7. <b>X</b>	<b>Year</b> 2021	Year 2021 FILING MI							PAPER		$\checkmark$	DISKE	ГТЕ	
Name of Office S	Sought by Candid	ate:						DATE (	E OF ELECTION District Number Code Party Co			y Code	County Code			
								МО	DAY	ΥI	EAR		10000	<u> </u>		
								11		2	2021		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	/EAR	1			МО	DAY YEAR FOR OFFICE USE ONLY					ONLY		
Expenditures	from:		11 23	20	021	T	0	12	2	31	2021					
A. Amount Bro	ught Forward Fro	om Last R	leport				\$	-		262,9	940.50					
B. Total Monetary Contributions And Receipts (From Schedule					e I)	\$		68,477.56								
C. Total Funds Available (Sum Of Lines A and B)							\$			331,4	418.06					
D. Total Expenditures (From Schedule III)						\$			12,9	981.22						
E. Ending Cash Balance (Subtract Line D From Line C)					\$		:	318,4	36.84							
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Sch	nedu	le I	I)	\$		0.00							
G. Unpaid Debt	s And Obligation	s (From	Schedule IV)				\$			126,0	00.00			•		
				AFF	ΊD	AVI	T SE	CTION								
PART I - If this is	s a Committee re	port, trea	surer sign he	ere. 1	[f th	his is	a Can	ndidate r	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and complete	) that this report, in ete.	cluding th	e attached sche	dules	file	ed on	paper (	or by elec	tronic m	edium	, are to t	he best o	my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me the	nis	20							S	Signature	of Perso	Submit	ting Rep	ort	
	Signat	ura	_				-					Prin	ed Nam	e		
My Commission Ex	_	uic										Emai	I			
	МО	D	AY	YR					Ar	ea Cod	de	Daytim	e Telepi	none Nur	nber	
Part II- If this is	a report of a ca	ndidate's	authorized C	omn	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of	my knowl	edge and belief	this	poli	itical	commi	ittee has i	not viola	ted ar	y provis	ions of the	act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc		s									s	ignature o	f Candid	ate		
	day of —— ————						-					Drint-	d Name			
	Signature	<u> </u>					-									
My Commission Exp	-	-									_	Ema	1			
	МО	D	AY	YR			•		Area	Code		Da	ytime 1	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
Williams for Senate	From:	11/23/2	2021 <b>To</b> :	12/31/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	21.10
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)	\$	206.46		
TOTAL for the Reporting	Period	(2)	\$	456.46
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	40,000.00
All Other Contributions (Part D)			\$	28,000.00
TOTAL for the Reporting	) Period	(3)	\$	68,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	68,477.56

#### **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	Reporting			
Williams for Senate	From:	11/23/2021	То:	12/31/2021
		DATE		AMOUNT

Full Name of Contributing Comm Philadelphia Council of AFL CIO	МО	DAY	YEAR			
Mailing Address 22 S 22nd St Fl 2						<b>\$</b> 250.00
City Philadelphia	State	Zip Code (Plus 4)	12	31	2021	
·	PA	191033005				

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

**PAGE TOTAL \$** 250.00

### 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 Candidate	Reporting Period					
Williams for Senate	From:	11/23/2021 <b>T</b> o	<u>12/31/2021</u>			

DATE

Full Name of Contributor
Myron McNeely

MO
DAY
YEAR

 Mailing Address
 7116 Hilltop Rd
 \$ 206.46

 City
 Upper Darby
 State
 Zip Code (Plus 4)
 12
 31
 2021

 PA
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 190823604
 1

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

**PAGE TOTAL \$** 206.46

**AMOUNT** 

#### **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 Re			Reporting	eporting Period				
Williams for Senate			From:	11/2	3/2021	То:	12/31/2021	
				DA	TE		AMOUNT	
Full Name of Contributing Committee Citizens for Kenyatta Johnson				МО	DAY	YEAR		
Mailing Address PO Box 7466							<b>\$</b> 1,500.00	
<b>City</b> Philadelphia	State         Zip Code (Plus 4)           PA         191017466		12	31	2021			
Full Name of Contributing Committee  District Council 21 PAC					DAY	YEAR		
Mailing Address 2980 Southampton F  City Philadelphia	State PA	<b>Zip Code</b> 191541	e (Plus 4) 202	12	31	2021	\$ 10,000.00	
<b>Full Name of Contributing Committee</b> Friends of Monica Gibbs				МО	DAY	YEAR		
Mailing Address 6305 Lawnton Ave							<b>\$</b> 2,500.00	
City Phila	State PA	<b>Zip Code</b> 191413	e (Plus 4)	12	31	2021		
Full Name of Contributing Committee GGR Inc PAC				МО	DAY	YEAR		
Mailing Address 212 Locust St Ste 3	OO State	<b>Zip Code</b> 171011	<b>e (Plus 4)</b> 510	12	31	2021	<b>\$</b> 1,000.00	
Full Name of Contributing Committee  Laborers District Council PAC Fund				МО	DAY	YEAR		
Mailing Address 665 N Broad St							\$ 25,000.00	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code</b> 191232	e (Plus 4)	12	31	2021		

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

PAGE TOTAL

\$ 40,000.00

### 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.

Name of Filing Committee or Candidate

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

Reporting Period

Williams for Senat	te				Fron	n:	11/23/2	<u>021</u> To	:	<u>12/3</u>	1/2021	
						D.A	<b>TE</b>			AMOUN	т	
Full Name of Contri Jeffrey N Brown	ibutor					МО	DAY	YEAR				
Mailing 1 Address 1 City Philadelphia	1817 Delancey Pl	State	-	Code (Plus	4)	12	31	2021	\$	•	10,000.00	
Employer Name	Shoprite Browns Supe	PA 191036606 erstores			Occupation President							
Employer Mailing Address/Principal Place of City Business					State		Zip	Code (Plu	ıs 4)			
700 Delsea Dr		Westville				NJ		80	30931229			
Full Name of Contri Jeffrey N Brown	ibutor					MO DAY YEAR						
Mailing Address	1817 Delancey Pl							\$	;	15,000.00		
<b>City</b> Philadelphia	a	<b>State</b> PA		<b>Code (Plus</b> 1036606	4)	12	31	2021				
Employer Name	Shoprite Browns Supe	rstores				Occupation President						
Employer Mailing Ad Business	ddress/Principal Place	e of		City		l	State		Zip	Zip Code (Plus 4)		
700 Delsea Dr				Westville			NJ		80	30931229		
Full Name of Contri Charles Gibbs	ibutor					МО	DAY	YEAR				
Mailing Address	5305 Lawnton Ave								\$	<b>;</b>	2,500.00	
<b>City</b> Philadelphia	a	<b>State</b> PA	-	Code (Plus 413807	4)	12	31	2021				
Employer Name McMonagle, Perri, McHugh, Mischak, Davis Trial Lawyers			Occupat	ion A	ttorney							
Employer Mailing Ad Business	ddress/Principal Place	e of		City		State			Zip	Zip Code (Plus 4)		
1845 Walnut StFl 1	19			Philadelp	hia	PA			19	191034720		

Brian J McMonagle				DAY	YEAR		
Mailing Address 30 S 15th St Ste 701						\$ 500.00	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191024802	12	31	2021		
Employer Name McMonagle, Perri, McHugh, & McMonagle, Perri, McHugh, & McMonagle, Perri, McHugh, & McMonagle, McMonagle, Perri, McHugh, & McMonagle, McMonagle, Perri, McHugh, & McMonagle,			Occupation Partner				
Employer Mailing Address/Principal Place of Business  City			State			Zip Code (Plus 4)	
1845 Walnut St	Philadelphia	PA			191034707		

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

PAGE TOTAL
\$ 28,000.00

## 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 Candid	Name of Filing Committee or Candidate		Reporting Period					
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	·					•	
Enter Grand Total of Part E on Sci	nedule T. Detailed	d Summary Page.	Section	4.			I	PAGE TOTAL
	.caa.ca, Betanet	a cammary rage,		•			\$	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 Peri	od							
Williams for Senate	From:	<u>11/23/2021</u> <b>To:</b>	12/31/2021						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate			Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	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 Sum	mary Pag	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		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	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$ \$	0.00	
City	State	Zip Code(Plus 4)									
Employer of Contributor							Occupation				
Employer Mailing Address/Principal Plac 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			Reporti	Reporting Period							
			From								
		DATE	AMOUNT								
<b>To Whom Paid</b> AT&T	МО	DAY	YEAR								
Mailing Address 211 S Akard	12	14	2021	\$	112.89						
City         Dallas         State         Zip Code (Plus 4)           TX         752024299				Description of Expenditure Cell Phone							
To Whom Paid Compass Self Storage - Oregon Ave.				DAY	YEAR						
Mailing Address 10 - 12 Oregon Ave			12	3	2021	\$	183.88				
CityPhiladelphiaStateZip Code (Plus 4)PA19148			<b>Description of Expenditure</b> Storage Fee								
<b>To Whom Paid</b> Hilton Harrisburg			МО	DAY	YEAR						
Mailing Address 1 N 2nd St			12	22	2021	\$	395.25				
City Harrisburg State Zip Code (Plus 4) PA 171011601				otion of Exp Rental	penditure						
To Whom Paid  Meachem V. Prioleau Funeral Home			МО	DAY	YEAR						
Mailing Address 5408 N 5th St				23	2021	\$	1,000.00				
City Philadelphia State Zip Code (Plus 4)			Descrip	tion of Exp	enditure						

<b>To Whom Paid</b> Compass Self Storage - Oregon Ave.	мо	DAY	YEAR							
Mailing Address 10 - 12 Oregon Ave				3	2021	\$	183.88			
City Philadelphia State Zip Code (Plus 4) PA 19148			Description of Expenditure Storage Fee							
To Whom Paid Hilton Harrisburg				DAY	YEAR					
Mailing Address 1 N 2nd St				22	2021	\$	395.25			
<b>City</b> Harrisburg	Harrisburg State Zip Code (Plus 4) PA 171011601				Description of Expenditure Facility Rental					
<b>To Whom Paid</b> Meachem V. Prioleau Funeral Home			МО	DAY	YEAR					
Mailing Address 5408 N 5th St			12	23	2021	\$	1,000.00			
State   Zip Code (Plus 4)   PA   191202802				otion of Exp						
<b>To Whom Paid</b> NGP VAN			МО	DAY	YEAR					
Mailing Address 1101 15th St NW Ste 500				2	2021	\$	339.20			
City Washington State Zip Code (Plus 4) DC 200055006				otion of Exp Support	enditure					

To Whom Paid				мо	DAY	YEAR						
PayPal												
Mailing Address	2221 N. First St.			12	31	2021	\$	745.98				
City San Jose State Zip Code (Plus 4)				Description of Expenditure								
CA 951312021					Processing Fees							
To Whom Paid Bilal Rice					DAY	YEAR						
Mailing Address 622 N 48th St				11	30	2021	\$	5,000.00				
City Philadelphia State Zip Code (Plus 4)				Descrip	tion of Exi	l penditure	<u> </u>					
PA 191392804				Description of Expenditure Services Rendered - November 2021								
<b>To Whom Paid</b> Bilal Rice				МО	DAY	YEAR						
Mailing Address	622 N 48th St			12	23	2021	\$	5,000.00				
<b>City</b> Philadelphia	State Zip Code (Plus 4) Description of Expend					enditure						
PA 191392804					Services Rendered - December 2021							
To Whom Paid Bilal Rice				МО	DAY	YEAR						
Mailing Address 622 N 48th St				12	23	2021	\$	60.73				
<b>City</b> Philadelphia		State	Zip Code (Plus 4)	Description of Expenditure								
		PA	191392804	Reimbursement- Breakfast Meeting								
<b>To Whom Paid</b> Rudolph Taylor				мо	DAY	YEAR						
Mailing Address	110 N 4th St			12	11	2021	<b>\$</b>	127.10				
<b>City</b> Darby		State	Zip Code (Plus 4)	Descrip	tion of Exp	l Denditure	<u> </u>					
23.2,		PA	190232626		ırsement							
To Whom Paid Zoom US				МО	DAY	YEAR						
Mailing Address	55 Almaden Blvd Si	te 600		12	13	2021	\$	16.19				
<b>City</b> San Jose		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1					
CA 951131612				Campaign Expenses- Meeting Purposes								
Folian C 17 5 1	-6 P 11-	B					PA	GE TOTAL				
Enter Grand Total	of Expenditures	on Page 1, R	eport Cover Page, Item D	) <b>.</b>			\$	12,981.22				

## 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							
Williams for Senate			From:	<u>11/23/2021</u> <b>To:</b>			12/31/2021			
		DATE	Outstanding Balance of Debt							
Name of Creditor Chavous Consulting LLC					DAY	YEAR				
Mailing Address 100 S Broad St Ste 2220					28	2018	•	24,000.00		
<b>City</b> Philadelphia	State Zip Code (Plus 4) Description of Debt					bt				
	PA 191101011				Outstanding Debt - Services Rendered 2010 - 2013					
					DATE			Outstanding Balance of Debt		
Name of Creditor Chavous Consulting LLC				мо	DAY	YEAR				
Mailing Address 100 S Broad St Ste	2220			5	6	2019	١,	102,000.00		
<b>City</b> Philadelphia	State	Zip Code (Pl	us 4)	Description of Debt						
Timasapina							gust 2020 - December			
		-						PAGE TOTAL		
Enter Grand Total of Unpaid Debt	s on Page 1, Rep	ort Cover Pa	ge, Item	G.			\$	126,000.00		