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	20200	026				port ed B		CA	NDII	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, (Candida	te or Lo	obbyist:		GRE	EN	FOR S	SAFE	AND	ACCC	UNT	ABLE C	OMMUN:	ITIES				
Street Address:																			
City:	PHILAD	ELPHIA							State	e:	PA			Zip Cod	le: 19	132			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA PRIMARY	AY PRE	- 2	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N)	\
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FRIDA ELECTION		≣-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N)	√
report type)	ANNUAL RE	PORT	7. X	Year 2021	l				IG ME CHEC		_			PAPER		\checkmark	DISK	TTE	
Name of Office S	- Sought by Ca	andidate	e:						DAT	ΈO	F ELE	CTIO	N	District Number	Office Code	Pai	ty Code	Cour	
									МО		DAY	YE	AR						
										11		2	2021		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	МО	DAY	YEAR	ł			МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	Trom:			1	1 2	021	Т	0		12	,	31	2021						
A. Amount Bro	ught Forwa	rd From	Last R	eport				\$				5,6	99.25						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 2,000.00																			
C. Total Funds Available (Sum Of Lines A and B) \$ 7,699.25																			
D. Total Expend	ditures (Fro	m Sche	dule II	I)				\$				4,5	34.80						
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)			\$				3,1	64.45						
F. Value Of In-	Kind Contrib	outions	Receive	ed (From S	Schedu	le II	:)	\$					0.00						
G. Unpaid Debt	s And Oblig	ations (From S	chedule I	V)			\$					0.00						
					AFF	IDA	\VI	T SE	CTIC	NC									
PART I - If this is	a Committ	ee repo	rt, trea	surer sign	here.	If th	is is	a Car	ndidat	te re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		ort, inclu	iding the	attached s	chedule	s filed	d on	paper	or by e	electr	onic m	edium	, are to t	he best of	f my knov	vledge	and bel	ief , tr	ue,
Sworn to and subs	cribed before day of	me this		20								s	ignature	of Perso	n Submitt	ing Re	oort		_
		Signatur	e					-						Print	ted Name				-
My Commission Ex	rpires							_						Emai	il				_
	МО)	D/	ΛY	YR						Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of	a candi	idate's	authorize	d Comn	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	edge and be	lief this	polit	tical	comm	ittee h	as no	ot viola	ted an	y provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before r	ne this		20									S	ignature o	f Candida	ite			-
								-						Printe	d Name				-
	Sig	nature						-											_
My Commission Exp	ires													Emai	ıı				
		мо	DA	AY	YR	l		•			Area	Code		Da	ytime Te	elephor	ne Num	oer	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
GREEN FOR SAFE AND ACCOUNTABLE COMMUNITIES	From:	1/1/202	<u>1</u> To:	12/31/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
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)	\$	0.00		
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
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)	\$	2,000.00
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			\$	2,000.00

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	R	eporting	Period			
		F	rom:		То	:	
		1		DATE			AMOUNT
Full Name of Contributing C	ommittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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		Rep	oorting P	eriod			
		From: To):			
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
							$\overline{}$	PAGE TOTAL

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

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d 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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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.

Reporting Period

GREEN FOR SAFE AND ACCOUNTABLE	COMMUNITIES		From:		1/1/202	<u>1</u> To:		12/31/2021
				D	ATE			AMOUNT
Full Name Department of Treasury - IRS				МО	DAY	YEAR	\$	600.00
Mailing Address				1	4	2021		
City Philadelphia	State	Zip Code (Plus 4)	_	•	2021		
	PA	19106						
Receipt Description mistaken deposi	t of tax refund							
Full Name				мо	DAY	YEAR	\$	1,400.00
Department of Treasurer - IRS							ļ .	_,
Mailing Address				3	17	2021		
City Philadelphia	State	Zip Code (Plus 4)		1	-321	1	

19106

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

mistaken deposit of tax refund

PΑ

Name of Filing Committee or Candidate

Receipt Description

PAGE TOTAL \$ 2,000.00

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		
GREEN FOR SAFE AND ACCOUNTABLE COMMUNITIES	From:	<u>1/1/2021</u> To:	12/31/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	me of Filing Committee or Candidate		Reporting	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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
GREEN FOR SAFE AND ACCOUNTABLE COMMUNITIES	From	1/1/2021	То:	<u>12/31/2021</u>

				DATE			AMOUNT		
To Whom Paid			МО	DAY	YEAR				
NGP-VAN			140		ILAK				
Mailing Address			1	12	2021	\$	263.80		
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	DC	20005	databas	se					
To Whom Paid			мо	DAY	YEAR				
godaddy.com			1-10						
Mailing Address			1	25	2021	\$	39.34		
City Tempe	State	Zip Code (Plus 4)	Description of Expenditure						
	AR	85284	campai	gn technol	ogy				
To Whom Paid			МО	DAY	YEAR				
TD Bank			1.0						
Mailing Address			1	29	2021	\$	10.00		
City Cherry Hill	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	NJ	08034	service	fees					
To Whom Paid			мо	DAY	YEAR				
TD Bank			110		7 = 7 1111				
Mailing Address			2	5	2021	\$	420.00		
City Cherry Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	NJ	08034	reverse	provisiona	l credit				
To Whom Paid			мо	DAY	YEAR				
TD Bank			110		7 = 7 1111				
Mailing Address			2	26	2021	\$	10.00		
City Cherry Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	NJ	08034	service	fees					
To Whom Paid			мо	DAY	YEAR				
TD Bank									
Mailing Address			3	31	2021	\$	10.00		
City Cherry Hill State Zip Code (Plus 4)) Description of Expenditure							
NJ 08034			service fees						

					ı						
	nom Paid	мо	DAY	YEAR							
TD Ba											
Mailing Address					30	2021	\$	10.00			
City	Cherry Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		NJ	08034	service	fees						
To WI	nom Paid	мо	DAY	YEAR							
Jeanr	e Trent-Dow	140		ILAK							
Mailing Address					20	2021	\$	3,691.66			
City Philadelphia State Zip Code (Plus 4)				Description of Expenditure							
		PA	19132	refund of mistaken IRS tax refund deposits				eposits			
To Whom Paid					l _{DAY}	VEAD					
TD Ba	ank			МО	DAY	YEAR					
Mailir	g Address			5	28	2021	\$	10.00			
City	Cherry Hill	State	Zip Code (Plus 4)	Description of Expenditure							
		NJ	08034	service fees							
To WI	nom Paid			мо	DAY	YEAR					
TD Ba	ank			МО	DAI	ILAK					
Mailing Address					30	2021	\$	10.00			
City	Cherry Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		NJ	08034	service fees							
To WI	nom Paid			МО	DAY	YEAR					
TD Ba	ank	МО	DAY	TEAK							
Mailir	Mailing Address					2021	\$	10.00			
City	Cherry Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		NJ	08034	service fees							
To WI	nom Paid			МО	DAY	YEAR					
TD Ba	ank			МО	DAY	TEAK					
Mailir	g Address			8	31	2021	\$	10.00			
City	Cherry Hill	State	Zip Code (Plus 4)	Descript	l tion of Exp	l enditure					
	, · · · · · ·	NJ	08034	service fees							
To WI	nom Paid	<u> </u>			l nav	VEAD					
TD Ba	ank			МО	DAY	YEAR					
Mailir	g Address	9	30	2021	\$	10.00					
City	Cherry Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l				
		NJ	08034	service	fees						
To WI	nom Paid	140	DAY	VEAD							
TD Ba	ank	МО	DAY	YEAR							
Mailing Address					29	2021	\$	10.00			
City	Cherry Hill	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	l				
	,	NJ	08034	service fees							
1 1 0000 .					3017100 1003						

To Whom Paid	МО	DAY	YEAR				
TD Bank	140		ILAK				
Mailing Address	11	30	2021	\$	10.00		
City Cherry Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp			
	NJ	08034	service fees				
To Whom Paid	мо	DAY	YEAR				
TD Bank	110		1 L/ux				
Mailing Address	12	31	2021	\$	10.00		
City Cherry Hill	State	Zip Code (Plus 4)	Description of Expenditure				
	NJ	08034	service	fees			
		PAGE TOTAL					
Enter Grand Total of Expenditures	\$	4,534.80					