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	20140	382			Repo Filed			CAND	IDA	TE		COMN	1ITTEE	✓ [LOB	BYIS	Γ	
Name of Filing C	ommittee, Ca	andidat	te or Lo	bbyist:		EXCE	LLE	NT S	CHOOL	S PA	١								-
Street Address:	150 S IN	IDEPEN	IDENC	E MALL WI	EST 12	:00													
City:	PHILADE	LPHIA							State:	PA	Α			Zip Cod	l e: 19	106			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		l.	2ND FRIDA PRIMARY	Y PRE	- 2.		30 DA		POS	ST-	3.		AMENDM REPORT?		Yes		No	/
(place X to the right of	6TH TUESDAY PRE-ELECTIO		1.	2ND FRIDA ELECTION	AY PRE	- 5.		30 DA		POS	ST-	6.		TERMINA REPORT?		Yes] [No	\
report type)	ANNUAL REI	PORT 7	7.	Year 2022					NG METH CHECK (PAPER		\	DIS	KETTE	
Name of Office S	ought by Car	ndidate):			-			DATE	OF E	ELEC	TIO	N	District Number	Office Code	Pa	rty Co	de Cou Cod	
									МО	DA	AY	YE	AR					51	
									1	1		8	2022		(SEE IN	STRUCT	IONS FO	OR CODES	5)
Summary of		nd	МО	DAY	YEAR				МО	DA	AY	YE	AR	FO	R OFFIC	E USI	ONL	Y	
Expenditures	from:			3 29) 2	022	T	0		5		2	2022						
A. Amount Bro	ught Forward	d From	Last R	eport				\$			1	.25,8	34.05						
B. Total Moneta	ary Contribut	ions Aı	nd Rec	eipts (Fron	n Sche	dule 1	()	\$					0.00						
C. Total Funds	Available (Sι	ım Of L	ines A	and B)				\$			1	.25,8	34.05						
D. Total Expend	ditures (Fron	n Sched	dule III	[)				\$				65,0	00.00						
E. Ending Cash	Balance (Su	btract I	Line D	From Line	C)			\$				60,8	34.05						
F. Value Of In-	Kind Contribu	utions I	Receive	ed (From S	chedu	le II)		\$					0.00						
G. Unpaid Debt	s And Obliga	tions (From S	chedule I\	/)			\$					0.00						
					AFF	IDA۱	/I٦	SE	CTION										
PART I - If this is		-	•								•				•			-1:-¢ A	
I swear (or affirm) correct and comple		rt, inclu	aing the	attacned sc	neaules	s filea (on p	paper	or by elec	ctron	ic me	aium	, are to t	ne best of	ту кпоч	vieage	and b	eller , t	rue
Sworn to and subs	cribed before n day of	ne this		20								s	ignature	of Persor	Submitt	ing Re	port		
		ignature	1					-		_				Print	ed Name	ı			-
My Commission Ex		•												Emai	I				_
	мо		DA	lΥ	YR						Are	a Cod	e	Daytim	e Teleph	one Nı	ımber		
Part II- If this is	a report of a	a candi	date's	authorized	Comn	nittee	, Ca	ndid	ate shal	l sig	n he	re.							
I swear (or affirm) No 320) as amende		st of my	knowle	dge and bel	ief this	politic	al (comm	ittee has	not v	/iolat	ed an	y provisi	ons of the	act of Ju	ıne 3,1	1937 (P.L. 133	33,
Sworn to and subsc		e this								_			Si	gnature o	f Candida	ate			- $ $
	day of 									_				Printe	d Name				_
	Signa	ature						•											_
My Commission Exp	_													Emai	I				
	М	10	D/	λΥ	YR					A	Area (Code		Da	ytime To	elepho	ne Nu	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
EXCELLENT SCHOOLS PA	From:	3/29/202	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	j Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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 C	andidate	R	eporting	Period			
		Fi	rom:		То	•	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		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	e or Candidate		Reporting Period						
			Fro	m:		To):		
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4))						
								PAGE TOTAL	

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:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary 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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	4.			\$	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 Perio	od							
EXCELLENT SCHOOLS PA	From:	3/29/2022 To :	<u>5/2/2022</u>						
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 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

all Name of Contributor ailing Address ty State Zip Code (Plus 4)			Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								֓֟֟֝֟֓֓֓֟֟֓֓֓֓֟֟֓֓֓֟֟֓֓֟֓֟֓֓֟֟֓֓֟֓֓֟֓֓֟֓	\$ 0	.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Zi	p Code(Plus 4)	Descr	ipti	on of Contribution	1
Enter Grand Total of Part G on Sch	edule II. In-Kir	nd (Contributions D	etaile	ed				PAGE TOTA	,L
Summary Page, Section 3.									0	.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
EXCELLENT SCHOOLS PA	From	3/29/2022	То:	5/2/2022	

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
Citizens for Amen Brown			140		ILAK			
Mailing Address P. O. Box 42857	,		5	2	2022	\$	20,000.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19101	Campai	gn Contrib	ution			
To Whom Paid			мо	DAY	YEAR			
Friends of James Wright			М		ILAK			
Mailing Address P. O. Box 24042	2		5	2	2022	\$	15,000.00	
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19139	Campai	gn Contrib	ution			
To Whom Paid			мо	DAY	YEAR			
Williams For Senate								
Mailing Address P. O. Box 6313			5	2	2022	\$	10,000.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19139	Campai	gn Contrib	ution			
To Whom Paid			МО	DAY	YEAR			
Friends of Mike Giangiordano								
Mailing Address 1608 East Passy	unk Avenue		5	2	2022	\$	5,000.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	19148	Campai	gn Contrib	ution			
To Whom Paid			мо	DAY	YEAR			
Friends of Isabella Fitzgerald			PIO		ILAK			
Mailing Address 1976 Penfield Street			5	2	2022	\$	15,000.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19138	Campai	gn Contrib	ution			
							PAGE TOTAL	
Enter Grand Total of Expenditur	es on Page 1, Re	port Cover Page, Item D).			\$	65,000.00	