Campaign Finance Report

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

Filer Identification 20120111 Report Filed By : CANDIDATE COMMITTEE LOBBY								YIST							
Name of Filing C	Committee, Ca	ndidate or L	obbyist:	E	D NEI	LSON						•			
Street Address:	P.O. BOX	6054													
City:	PHILA						State:	PA			Zip Cod	le: 19	9114		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	RE-	2.	30 DA PRIMA		POST- 3. X			AMENDMENT REPORT?		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P	RE-	5.	30 DA		POST-	6.		TERMINATION Yes REPORT?			No	~
report type)	ANNUAL REP	DRT 7.	Year 2022				NG METH CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Can	didate:	-				DATE ()F ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code
	,						МО	DAY	YE	AR	174	STH	DEM		couc
REPRESENTATI	VE IN THE GE	NERAL ASS	SEMBLY				11		8	2022		(SEE IN	STRUCTIO	NS FOR C	ODES)
Summary of Expenditures		d MO	DAY YEA	AR			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures			5 3	20	22 1	0	6	5	6	2022					
A. Amount Bro	ught Forward	From Last F	Report			\$				0.00					
B. Total Moneta	ary Contributi	ons And Red	eipts (From Sch	ned	ule I)	\$				0.00					
C. Total Funds	Available (Sui	n Of Lines A	and B)			\$				0.00]				
D. Total Expend	ditures (From	Schedule I	Ί)			\$				0.00					
E. Ending Cash	Balance (Sub	tract Line D	From Line C)			\$				0.00]				
F. Value Of In-	Kind Contribut	ions Receiv	ed (From Sched	lule	e II)	\$				0.00					
G. Unpaid Debt	ts And Obligat	ons (From	Schedule IV)			\$				0.00			1		
			AF	FI	DAVI	T SE	CTION								
PART I - If this is			_							_					
I swear (or affirm) correct and comple		, including th	e attached schedu	les f	filed on	paper	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before m	e this	20						s	ignature	of Perso	n Submit	ting Rep	ort	
						-					Prin	ted Name	e		
My Commission Ex	-	nature									Ema	il			
	МО	D	AY Y	'n		_		Ar	ea Cod	e		e Telepi	none Nun	nber	
Part II- If this is	a report of a	candidate's	authorized Com	ımi	ittee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende		t of my knowl	edge and belief th	iis p	oolitical	comm	ittee has ı	not viola	ted an	y provis	ions of the	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me	this						Signature of Candidate							
	day of					_									
						_					Printe	d Name			
My Commission Exp	Signat pires	ure									Ema	il			
		, D	AY Y	/R		-		Area	Code		Da	aytime T	elephone	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	_			
Name of Filing Committee or Candidate	Reporting	Period		
ED NEILSON	From:	5/3/202	<u>2</u> To:	6/6/2022
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)			\$	1,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	1,000.00
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			\$	3,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

0.00

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 Filling Committee of Candidate			Reporting Period From: To:					
			Fro	m:		10):	
					DATE		AMOUNT	
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$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 Candidate	me of Filing Committee or Candidate			Reporting Period					
ED NEILSON			From:	<u>5/</u>	<u>/3/2022</u>	То:	<u>6/6/2022</u>		
				DA	TE		АМО	UNT	
Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETA	IL DRUGGISTS			МО	DAY	YEAR			
Mailing Address 2417 WELSH RD # 3	342			_	26	2022	\$	500.00	
City PHILADELPHIA	State PA	Zip Cod 191142	e (Plus 4)	5	26	2022			
Full Name of Contributing Committee CONSTELLATION EMPLOYEE PAC				МО	DAY	YEAR			
Mailing Address 101 CONSTITUTION	AVE NW STE 400			_			\$	500.00	
City WASHINGTON	State DC	Zip Code 200012	e (Plus 4)	5	26	2022			
							P/	AGE TOTAL	

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

PAGE TOTAL \$ 1,000.00

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.

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

Name of Filing Committee or Candidate	me of Filing Committee or Candidate			orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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 Perio	d		
ED NEILSON			From:		5/3/202	<u>2</u> To:	6/6/2022
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	
FRIENDS OF 66 A WARD							
Mailing Address 10222 E KESWICK F	RD						\$ 1,000.00
City PHILADELPHIA	State	Zip Code (Plus 4)	5	26	2022	
THE SELTIN	PA	1911413	41				
Receipt Description CANCELLED CH	HECK #2241						
Full Name FRIENDS OF THE 57TH WARD				МО	DAY	YEAR	
Mailing Address 9217 ANDOVER RD				_			\$ 1,000.00
City PHILADELPHIA	State	Zip Code (Plus 4)	5	26	2022	
	PA	1911438	18				
Receipt Description CANCELLED CH	HECK 2242						

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

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 Perio	d	
ED NEILSON	From:	<u>5/3/2022</u> To:	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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	TF)		
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)	\$	613.44
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,	•	\$	613.44

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		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 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 Perio	od		
ED NEILSON	From:	5/3/2022	То:	<u>6/6/2022</u>

						DATE		AMOUNT
Full Name of Contributor IBEW LOCAL 98 COMMITTEE O	ull Name of Contributor BEW LOCAL 98 COMMITTEE ON POLITICAL EDUCATION					DAY	YEAR	
Mailing Address 1719 SPRING GARDEN ST								\$ 613.44
City PHILADELPHIA State PA Zip Code(Plus 4) 191303915				-	6	3	2022	
Employer of Contributor N/A	A .		•		Occupation N/A			
Employer Mailing Address/Princ Business	ipal Place of	City	!	State	Zip 4)	Code(Plus	Descri PRINT	ption of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Des Summary Page, Section 3.				ns Detai	led			PAGE TOTAL 613.44

STATEMENT OF EXPENDITURES

Name of Filing Comm	nittee or Candidate			Reportir	ng Period			
ED NEILSON				From	<u>5/3</u>	<u>3/2022</u>	То:	6/6/2022
					DATE			AMOUNT
To Whom Paid 4IMPRINT				МО	DAY	YEAR		
Mailing Address 10	01 COMMERCE ST			6	3	2022	\$	799.77
City OSHKOSH		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
OSHROSH		WI	549014864	GIVE A				
To Whom Paid AAA				МО	DAY	YEAR		
Mailing Address	O BOX 713444			6	3	2022	\$	124.00
City PHILADELPHIA State Zip Code (Plus 4)				Descrip	tion of Exp	enditure	l	
PA 19176				1	MEMBERSH			
To Whom Paid CHASE CARD SERVIO	CES VISA			мо	DAY	YEAR		
Mailing Address	O BOX 15153			6	3	2022	\$	1,629.12
City WILMINGTON	l	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		DE	198865153		IGN EXPEN			
To Whom Paid CHRIST THE KING CH	HURCH			МО	DAY	YEAR		
Mailing Address 32	252 CHESTERFIELD	O RD		5	26	2022	\$	350.00
City PHILADELPHI	:A	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	191141524	GOLF S	PONSORS	HIP		
To Whom Paid FRIENDS OF ARCHBI	SHOP RYAN HIGH	SCH00L		МО	DAY	YEAR		
Mailing Address	ailing Address 11201 ACADEMY RD			5	26	2022	\$	500.00
City PHILADELPHI	:A	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı	
		I	1	1				

191543303

PΑ

FLAG FOOTBALL SPONSORSHIP

MO DAY YEAR ARCHBISHOP RYAN HIGH SCHOOL SS 11201 ACADEMY RD DELPHIA State Zip Code (Plus 4) Description of Expenditure
11201 ACADEMI RD
DELPHIA State Zip Code (Plus 4) Description of Expenditure
PA 191543303 SPONSORSHIP
MO DAY YEAR
ss 500 OXFORD VALLEY RD 6 3 2022 \$ 1,978.58
HORNE State Zip Code (Plus 4) Description of Expenditure
PA 190478308 FUND RAISER EXPENSES
PA 190478308 FUND RAISER EXPENSES MO DAY YEAR UGHERTY MEMORIAL FUND
MO DAY YEAR
MO DAY YEAR SS DO DOVING
MO DAY YEAR UGHERTY MEMORIAL FUND SS PO BOX 649 Y PARK State Zip Code (Plus 4) Description of Expenditure
MO DAY YEAR SSS PO BOX 649 Y PARK State PA 190780649 MO DAY YEAR Description of Expenditure DONATION MO DAY YEAR
MO DAY YEAR SSS PO BOX 649 SY PARK State PA 190780649 MO DAY YEAR Description of Expenditure DONATION MO DAY YEAR THE PA 190780649 MO DAY YEAR THE PA 190780649
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MO DAY YEAR State PA PA PA PA PA PA PA P
ss 500 OXFORD VALLEY RD 6 3 2022 \$ 1, HORNE State Zip Code (Plus 4) Description of Expenditure

							PAGE 13
To Whom Paid PRINT AND SEW			МО	DAY	YEAR		
Mailing Address 10960 DUTT	ON RD		6	3	2022	\$	1,100.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191543204	Description of Expenditure EMBROIDERY BAGS				
To Whom Paid SALEA			МО	DAY	YEAR		
Mailing Address 11630 CAROLINE RD			5	26	2022	\$	150.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191542110	Description of Expenditure SPONSORSHIP				
To Whom Paid ST. HUBERT'S CHEERLEADERS			мо	DAY	YEAR		
Mailing Address 7320 TORRESDALE AVE			6	3	2022	\$	200.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191364104	Description of Expenditure SPONSORSHIP				
To Whom Paid THE DEMOCRATIC CAMPAIGN COMMITTEE OF PHILADELPHIA			МО	DAY	YEAR		
Mailing Address 219 SPRING GARDEN ST			5	26	2022	\$	1,500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191232925	Description of Expenditure DONATION				
To Whom Paid TOP GOLF				DAY	YEAR		
Mailing Address 2140 BYBERRY RD			6	3	2022	\$	3,438.44
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191163018	Description of Expenditure FUNDRAISER EXPENSE				
Enter Grand Total of Expend	itures on Page 1 Pe	port Cover Page Item D					PAGE TOTAL
Enter Grand Total of Expendi	itu. Ca on Fage 1, Re	port corer rage, item D	•			\$	16,986.01