### **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	99002	.51				port ed B		CAN	DIE	DATE		COMM	4ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	Committee,	Candida	te or Lo	bbyist:		WAF	RD 1	l6 DE	M EXE	СС	ОМ								
Street Address:	2315 \	W CUMBI	ERLANI	) ST															
City:	PHILAI	DELPHIA							State:		PA			Zip Cod	l <b>e:</b> 19	132			
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		P	POST- 3.		AMENDMENT REPORT?		Yes	N	0	<b>\</b>	
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND FRIDA ELECTION	AY PRE	≣-	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	0	<b>√</b>
report type)	ANNUAL R	REPORT	7.	<b>Year</b> 2005					NG MET					PAPER		<b>\</b>	DISK	ETTE	
Name of Office S	ought by C	Candidate	e:						DATE	OI	F ELEC	CTIO	N	District Number	Office Code	Pa	rty Cod	Cour	
									МО		DAY	YE	AR		1000			51	
										11		8	2005		(SEE IN	STRUCT	ONS FO	CODES	)
Summary of		and	МО	DAY	YEAR	2			МО		DAY	YE	AR	FO	R OFFIC	E USI	ONLY	,	
Expenditures	from:			1 1	-	1	Т	0		3	2	28	2005						
A. Amount Bro	ught Forwa	ard From	Last R	eport	-			\$	-	•		2	275.17	1					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 800.00																			
C. Total Funds Available (Sum Of Lines A and B) \$ 1,075.1							75.17												
D. Total Expenditures (From Schedule III)						7	'99.35												
E. Ending Cash	Balance (S	Subtract	Line D	From Line	C)			\$				2	75.82						
F. Value Of In-	Kind Contr	ibutions	Receive	ed (From S	chedu	le II	<b>:</b> )	\$					0.00						
G. Unpaid Debt	s And Obli	gations (	From S	chedule IV	/)			\$					0.00			•			
					AFF	ID/	٩VI	T SE	CTIO	N									
PART I - If this is	s a Commit	tee repo	rt, trea	surer sign	here.	If th	is is	a Car	ndidate	re	port, c	andio	date sig	ın here.					
I swear (or affirm) correct and comple		port, inclu	ding the	attached sc	hedules	s file	d on	paper	or by el	ectr	onic me	dium	, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed befor	e me this		20						-		s	ignature	of Perso	Submitt	ing Re	port		
				·				-		-				Print	ted Name	1			_
My Commission Ex	opires	Signature	<b>e</b>							_				Emai					_
•	_	10	DA	ιΥ	YR			-		-	Are	a Cod	le		e Teleph	one Nu	ımber		_
Part II- If this is	a report o	f a candi	date's	authorized	l Comn	nitte	e, C	andid	ate sha	all s	ign he	re.							
I swear (or affirm) No 320) as amende		best of my	y knowle	dge and beli	ief this	polit	tical	comm	ittee ha	s no	t violat	ed an	y provis	ions of the	e act of Ju	ıne 3,1	.937 (P	L. 133	3,
Sworn to and subsc	ribed before	me this											s	ignature o	f Candida	ate			-
	day of — —							_						Drint-	d Name				_
	Sid	gnature						-											_
My Commission Exp	-	J								-				Emai	I				_
		мо	D/	ΛΥ	YR	l		-			Area	Code		Da	ytime To	elepho	ne Num	ber	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
WARD 16 DEM EXEC COM	From:	To:	<u>3/28/2005</u>
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)		\$	800.00
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	800.00
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		\$	800.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting				
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•			•	•		PAGE 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 Filing Committee	or Candidate		Reporting Period					
			Fro	m:		To	):	
					DATE		АМО	UNT
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			Reporting Period					
WARD 16 DEM EXEC COM  From:			From:			То:	3/2	<u>8/2005</u>
				DA	TE		АМС	DUNT
Full Name of Contributing Committee FRIENDS OF JEWELL WILLIAMS				МО	DAY	YEAR		
Mailing Address City	State	Zip Code	e (Plus 4)	1	31	2005	<b>\$</b>	800.00
						<u> </u> Г		

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

**PAGE TOTAL**800.00

### 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			Reporting Period					
			Fror	n:				
				D	ATE		АМО	UNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address State Zip Code (Plus 4)							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Code (	Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	Section	on 3.			PAG	<b>E TOTAL</b> 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammary rage,	500.011				\$	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		
WARD 16 DEM EXEC COM	From:	To:	<u>3/28/2005</u>
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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid		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					Rep	orting P	eriod			
					Froi	m:		To:		
				•			DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plu	us 4)						
Employer of Contributor	•		•			Occupat	tion		•	
Employer Mailing Address/Principal Pla Business	ce of	City	S	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch	nedule II, I	In-Kind	Contribution	ns De	taile	d				PAGE TOTAL
Summary Page, Section 3.	•									0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	me of Filing Committee or Candidate					Reporting Period					
WARD 16 DEM EXEC COM			From			То:	<u>3/28/2005</u>				
				DATE			AMOUNT				
<b>To Whom Paid</b> PGW			мо	DAY	YEAR						
Mailing Address			1	15	2005	\$	258.39				
City	State	Zip Code (Plus 4)	Descrip								
To Whom Paid CITIZENS NATIONAL BANK				DAY	YEAR						
Mailing Address				31	2005	\$	12.00				
City State Zip Code (Plus 4)				Description of Expenditure BANK FEE							
To Whom Paid VERIZON			мо	DAY	YEAR						
Mailing Address			2	2	2005	\$	37.54				
City	State	Zip Code (Plus 4)	Description of Expenditure								
To Whom Paid DIRECT TV			МО	DAY	YEAR						
Mailing Address			2	2	2005	\$	46.95				
City	State	Zip Code (Plus 4)	Description of Expenditure								
To Whom Paid WATER REVENUE DEPT			МО	DAY	YEAR						
Mailing Address	Mailing Address			2	2005	\$	32.47				
City State Zip Code (Plus 4)			Descrip	tion of Exp	enditure						

To Whom Paid			мо	DAY	YEAR		
LOO & CHOO			MO	DAT	IEAR		
Mailing Address			2	5	2005	\$	100.00
City	State	Zip Code (Plus 4)	Descrir	tion of Ex	l enditure	l .	
				RY FUNDR			
To Whom Paid			мо	DAY	YEAR		
DOCUCAPE							
Mailing Address			2	7	2005		
<b>,</b>				/	2003	\$	40.00
City	State	Zip Code (Plus 4)	Descrip				
			FUNDR				
						I	
To Whom Paid REGINA SMITH			мо	DAY	YEAR		
REGINA SMITH							
Mailing Address			2	12	2005	<b>\$</b>	100.00
	le	le: 0 1 (e) ()				, T	100.00
City	State	Zip Code (Plus 4)		otion of Exp			
				RTING PE	RIODS (R	(EPORTS)	
To Whom Paid	•						
MELVIN JAMISON			МО	DAY	YEAR		
Mailing Address			2	14	2005	\$	100.00
City	State	Zip Code (Plus 4)	Decerie	tion of Ev		<u> </u>	
			1	otion of Exp			= FFFS
			37 11 120			J	
To Whom Paid			МО	DAY	YEAR		
CITIZEN NATIONAL BANK			1.0				
Mailing Address				20	2005		
Hailing Address			2	28	2005	\$	12.00
City	State	Zip Code (Plus 4)	Descrip	tion of Ex	enditure		
			BANK F	EES			
				1	l	I	
To Whom Paid			мо	DAY	YEAR		
MELVIN JAMISON							
Mailing Address			3	5	2005	<b>\$</b>	60.00
	T <sub>2</sub> , ;					<b>,</b>	00.00
City	State	Zip Code (Plus 4)		otion of Exp			
			WARD	EXPENSES			
	ı	ı	•				PAGE TOTAL
Enter Grand Total of Expend	litures on Page 1, Re	eport Cover Page, Item D				<b>.</b>	700.05
						\$	799.35