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 9100	099			Repor Filed		CAN	NDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST			
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		RACE S	STREE	T PAC											
Street Address:	1301 N. 31ST	STREET	Г															
City:	PHILADELPHI	4					State	:	PA			Zip Code: 19121						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					AY IARY	Ρ	POST-	3.		AMENDN REPORT		Yes	N	C	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D ELEC	AY TION	Ρ	POST- 6. X			TERMIN/ REPORT		Yes	N	C	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2022				NG ME					PAPER		\checkmark	DISK	ETTE		
Name of Office S	L Sought by Candidat	te:					DAT	ΕO	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Cour Code		
							мо		DAY	YE	AR	Number	Code	DEN	1	51		
								11		8	2022	·	(SEE INS	TRUCTI	ONS FOR	CODES	5)	
Summary of	Receipts and	мо	DAY	YEAR	1		мо		DAY	Y	EAR	FC	R OFFIC	E USE	ONLY			
Expenditures	from:	1	10 25	2	022	ГО		11	2	28	2022							
A. Amount Bro	ught Forward From	n Last Ro	eport			\$;			1,0	084.43	1						
B. Total Monet	ary Contributions	And Reco	eipts (Fron	1 Sche	dule I)	4	5				0.00							
C. Total Funds Available (Sum Of Lines A and B)							5			1,0)84.43							
D. Total Expen	ditures (From Sch	edule II	[)			4	5				0.00							
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		4	5			1,0	84.43							
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	4	5				0.00	-						
G. Unpaid Deb	s And Obligations	(From S	chedule IV	/)		4	\$ 20,000.00											
				AFF	IDAV	IT SE	CTIC	ΟN										
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	If this i	s a Ca	ndidat	e re	eport, c	andi	date sig	gn here.						
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sc	hedules	s filed or	n paper	or by e	lecti	ronic me	dium	, are to t	the best o	f my knov	vledge	and bel	ief , tr	ue	
Sworn to and subs	cribed before me this day of	i	20							S	Gignature	e of Perso	n Submitt	ing Rep	ort		-	
	Signatu	ro	_			_						Prin	ted Name				-	
My Commission E	-							•				Ema	il				-	
	мо	DA	AY	YR		_			Are	a Cod	le	Daytin	e Teleph	one Nu	mber			
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee, (Candio	late sh	all :	sign he	ere.								
I swear (or affirm) No 320) as amendo	that to the best of n ed.	ny knowle	edge and beli	ef this	politica	l com	nittee ha	as n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,	
Sworn to and subso	ribed before me this		20								s	ignature (of Candida	ite			-	
	day of 					_						Printe	ed Name				-	
	Signature					_											_	
My Commission Exp	vires											Ema	il					
	мо	D/	AY	YR		_			Area	Code		D	aytime Te	elephor	e Numl	per	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period						
RACE STREET PAC	From:	<u>10/25/202</u>	<u>2</u> To:	<u>11/28/2022</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	\$	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)	\$	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			\$	0.00				

PAGE 3

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 Period						
			From:			То	:				
					DATE			AMOUNT			
Full Name of Contributing Committee			М	ю	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus	4)								
							Γ	PAGE TOTAL			

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

0.00

\$

PART B 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 Candidat	e		Rep	orting P	eriod				
From: To:									
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Re				Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Commit	ttee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						ſ		PAGE TOTAL		
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00		

PART D 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	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

PART E **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					porting Period					
	n: To:									
				D	ATE			AMOUNT	1	
Full Name				мо	DAY	YEAR	1			
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description						•	•			
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL	
		illi y i uge,	Section				\$		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	
RACE STREET PAC	From:	<u>10/25/2022</u> то:	<u>11/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Re				Reporting Period					
	From:			То:					
				DATE		АМО	UNT		
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting Period					
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	ption (of Contribution

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
				From			То:	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	Description of Expenditure					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
Enter Grand Total of Expenditures on Fage 1, Report Cover Page, Item D.					\$	0.00		

SCHEDULE IV 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 Reportin				ng Period						
			From:				11/28/2022			
						DATE			Outstanding Balance of Debt	
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR				
Mailing Address 354 DARLING ROAD				4	20	2016	\$	5,000.00		
City _{MEDIA}		StateZip Code (Plus 4)PA19063			Description of Debt LOAN TO COMMITTEE					
Outstanding DATE Balance of Deb							Outstanding Balance of Debt			
Name of Creditor MARK H. DAMBLY			мо	DAY	YEAR					
Mailing Address 354 DARLING ROAD				7	1	2016	\$	5,000.00		
City MEDIA		StateZip Code (Plus 4)PA19063			Description of Debt LOAN TO COMMITTEE					
				Outstanding DATE Balance of Debt						
Name of Creditor MARK H. DAMBLY			мо	DAY	YEAR					
Mailing Address 354 DARLING ROAD			10	26	2017	\$	2,500.00			
City MEDIA		State PA	Zip Code (Pl 19063	us 4)	Description of Debt LOAN TO COMMITTEE					
						DATE			Outstanding Balance of Debt	
Name of Creditor RICHARD K. BARNHART			мо	DAY	YEAR					
Mailing Address 40 EVANS LANE			7	1	2016	\$	5,000.00			
CityHAVERFORDStateZip Code (Plus 4)PA19041			Description of Debt LOAN TO COMMITTEE							

			DATE			Outstanding Balance of Debt	
Name of Creditor RICHARD K. BARNHART			мо	DAY	YEAR		
Mailing Address 40 EVANS LANE			10	26	2017	\$	2,500.00
City HAVERFORD	HAVERFORD State Zip Code (Plus 4) Description of Debt				bt		
	PA	19041		го соммі			
							PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	20,000.00