

Campaign Finance Report

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

Filer Identification Number :		20150283		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Williams for Senate												
Street Address: 6313 Cobbs Creek Pkwy												
City: Philadelphia						State: PA			Zip Code: 19143			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2022		FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	8	2022				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	29	2022		12	31	2022				
A. Amount Brought Forward From Last Report						\$ 36,926.24						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 5,500.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 42,426.24						
D. Total Expenditures (From Schedule III)						\$ 19,861.33						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 22,564.91						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 121,312.50						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Williams for Senate	From: <u>11/29/2022</u> To: <u>12/31/2022</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 Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 5,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 5,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 5,500.00
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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 Candidate	Reporting Period
	From: To:

DATE					AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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 Williams for Senate	Reporting Period From: <u>11/29/2022</u> To: <u>12/31/2022</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee Committee for a Better Tomorrow				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 121 S Broad St Ste 600				12	13	2022	
City Philadelphia	State PA	Zip Code (Plus 4) 191074544					
Full Name of Contributing Committee Z PAC PA Anesthesiologists' PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 1400 N Providence Rd Building 2, Suite 1040				12	13	2022	
City Media	State PA	Zip Code (Plus 4) 190632043					

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

PAGE TOTAL \$ 5,500.00

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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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	Reporting Period From: To:
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			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE TOTAL	
\$	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	
Williams for Senate		From: <u>11/29/2022</u> To: <u>12/31/2022</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Williams for Senate	From <u>11/29/2022</u> To: <u>12/31/2022</u>

DATE				AMOUNT		
To Whom Paid American Express			MO	DAY	YEAR	\$ 3,999.99
Mailing Address PO Box 1270			12	20	2022	
City Newark	State NJ	Zip Code (Plus 4) 071011270	Description of Expenditure Multiple Campaign Expenses - reim.			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 82.58
Mailing Address 211 S Akard St			12	13	2022	
City Dallas	State TX	Zip Code (Plus 4) 752024299	Description of Expenditure Cell Phone			
To Whom Paid Compass Self Storage - Oregon Ave.			MO	DAY	YEAR	\$ 201.16
Mailing Address 10 - 12 Oregon Ave			12	5	2022	
City Philadelphia	State PA	Zip Code (Plus 4) 19148	Description of Expenditure Storage Fee			
To Whom Paid Make a Difference PAC			MO	DAY	YEAR	\$ 15,000.00
Mailing Address 6113 Cobbs Creek Pkwy			12	19	2022	
City Philadelphia	State PA	Zip Code (Plus 4) 191432908	Description of Expenditure Contribution			
To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 345.60
Mailing Address 1101 15th St NW Ste 500			12	5	2022	
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure Admin. Support			

To Whom Paid RKM Catering			MO	DAY	YEAR	
Mailing Address 604 Fairview Rd			12	14	2022	
City Woodlyn	State PA	Zip Code (Plus 4) 190941015	Description of Expenditure Event Caterer			

To Whom Paid V&S Lanes			MO	DAY	YEAR	
Mailing Address 7235 Elmwood Ave			12	14	2022	
City Philadelphia	State PA	Zip Code (Plus 4) 191421513	Description of Expenditure Staff Holiday Party			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 19,861.33

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 Williams for Senate				Reporting Period From: <u>11/29/2022</u> To: <u>12/31/2022</u>			
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DATE				Outstanding Balance of Debt		
Name of Creditor Chavous Consulting LLC			MO	DAY	YEAR	\$ 120,000.00
Mailing Address 100 S Broad St Ste 2220			5	6	2019	
City Philadelphia	State PA	Zip Code (Plus 4) 191101011	Description of Debt Services Rendered -May 2021 - December 2022			
DATE				Outstanding Balance of Debt		
Name of Creditor Milan Morris			MO	DAY	YEAR	\$ 1,112.50
Mailing Address 2308 N 51st St			12	31	2022	
City Philadelphia	State PA	Zip Code (Plus 4) 191312411	Description of Debt Services Rendered July-Dec 2022			
DATE				Outstanding Balance of Debt		
Name of Creditor Paula Wright			MO	DAY	YEAR	\$ 200.00
Mailing Address 6113 Cobbs Creek Pkwy			12	31	2022	
City Philadelphia	State PA	Zip Code (Plus 4) 191432908	Description of Debt Services Rendered July-Dec 2022			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 121,312.50