

# 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 : 20210193		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF TRACEY GORDON										
Street Address:										
City:				State:		Zip Code:				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	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.	Year 2023	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	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY
		3	28	2023			5	1	2023	
A. Amount Brought Forward From Last Report					\$ 24,268.00					
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 10,226.00					
C. Total Funds Available (Sum Of Lines A and B)					\$ 34,494.00					
D. Total Expenditures (From Schedule III)					\$ 23,894.00					
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 10,600.00					
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00					
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00					

## 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF TRACEY GORDON	From: <u>3/28/2023</u> To: <u>5/1/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 8,536.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 100.00
<b>All Other Contributions (Part B)</b>	\$ 820.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 920.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 1,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 10,456.00
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**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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF TRACEY GORDON	<b>Reporting Period</b>  <b>From:</b> <u>3/28/2023</u> <b>To:</b> <u>5/1/2023</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><b>DATE</b></td> <td style="width: 40%;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> FRIENDS OF 65TH WARD			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			4	13	2023	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19136				

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

<b>PAGE TOTAL</b>
\$ 100.00

# 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF TRACEY GORDON	From: <u>3/28/2023</u> To: <u>5/1/2023</u>

				DATE			AMOUNT
Full Name of Contributor ANNIE M. ADDISON				MO 4	DAY 11	YEAR 2023	\$ 100.00
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19140				
Full Name of Contributor DARLENE BOYKIN				MO 4	DAY 11	YEAR 2023	\$ 60.00
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19138				
Full Name of Contributor SHEILA RANDALL				MO 4	DAY 11	YEAR 2023	\$ 60.00
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19141				
Full Name of Contributor PAUL H MASCIANTONIE ESQ				MO 4	DAY 21	YEAR 2023	\$ 250.00
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19130				
Full Name of Contributor AMY F. STEERMAN ESQ				MO 4	DAY 24	YEAR 2023	\$ 100.00
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				
Full Name of Contributor LAW OFFICES OF PARK & ASSOCIATE PC				MO 4	DAY 25	YEAR 2023	\$ 250.00
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19147				

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

<b>PAGE TOTAL</b>
\$ 820.00

**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	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF TRACEY GORDON	<b>Reporting Period</b>  <b>From:</b> <u>3/28/2023</u> <b>To:</b> <u>5/1/2023</u>
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			DATE	AMOUNT
<b>Full Name of Contributor</b> NICHOLAS J STARINIERI			<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City LANSDALE      State PA      Zip Code (Plus 4) 19446			4	24
			2023	\$ 500.00
<b>Employer Name</b>			<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>
			<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> FRANK CAMPESE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> City PHILADELPHIA      State PA      Zip Code (Plus 4) 19148			4	11	2023	
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	

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

<b>PAGE TOTAL</b>
\$ 1,000.00

## 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: <span style="float: right;">To:</span>
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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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF TRACEY GORDON		From: <u>3/28/2023</u> To: <u>5/1/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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.						<b>PAGE TOTAL</b>  \$ 0.00

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## SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF TRACEY GORDON	From <u>3/28/2023</u> To: <u>5/1/2023</u>

DATE				AMOUNT
<b>To Whom Paid</b>				
1ST WARD - SAM ARNOLD				
<b>Mailing Address</b>				
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
GOTV				
<b>To Whom Paid</b>				
NINTH WARD				
<b>Mailing Address</b>				
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
GOTV				
<b>To Whom Paid</b>				
NATIONAL BARBERS SUNSHINE CLUB				
<b>Mailing Address</b>				
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
FUNDRAISER				
<b>To Whom Paid</b>				
FLYERS				
<b>Mailing Address</b>				
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
FLYERS				
<b>To Whom Paid</b>				
VANESSA BROWN-LOWERY				
<b>Mailing Address</b>				
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
LITRATURE				
<b>To Whom Paid</b>				
DIRECTED BY J. TECH				
<b>Mailing Address</b>				
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
PHOTO SHOOT				

To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
RONALD HOLT						
Mailing Address			4	18	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure CONSULTANT			

To Whom Paid			MO	DAY	YEAR	\$ 500.00
18TH WARD						
Mailing Address			4	19	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure ENDORSEMENT			

To Whom Paid			MO	DAY	YEAR	\$ 363.00
CITY WINERY LLC						
Mailing Address			4	17	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure FUNDRAISER			

To Whom Paid			MO	DAY	YEAR	\$ 200.00
WAZIR EL						
Mailing Address			4	20	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure LITERATURE			

To Whom Paid			MO	DAY	YEAR	\$ 455.98
CITY WINERY LLC						
Mailing Address			4	27	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure FUNDRAISER			

To Whom Paid			MO	DAY	YEAR	\$ 600.00
KEITH HARRIS						
Mailing Address			5	1	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure LITERATURE			

To Whom Paid			MO	DAY	YEAR	\$ 500.00
JACQUELINE BARENETT						
Mailing Address			5	1	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure CONSULTANT			

To Whom Paid			MO	DAY	YEAR	\$ 8,303.00
PNC DEBIT CARD						
Mailing Address			5	1	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure 01/05/23 - 05/01/23			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL**

\$ 15,271.98

