#### **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	0099			Repor Filed		CANDI	DATE		соми	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:	R	RACE S	TREE	T PAC									
Street Address:	1301 N. 31S	Γ STREE	Т													
City:	PHILADELPHI	A					State:	PA			Zip Cod	<b>ie:</b> 19	9121			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2. <b>X</b>	30 D/ PRIM		POST-	3.		AMENDM REPORT		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION	RE-	- 5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023				NG METH				PAPER DISKETTE				TTE	
Name of Office S	Sought by Candida	ite:	-				DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	,
							МО	DAY	YE	AR		1	DEN	1	51	
							11		7	2023		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
•	Summary of Receipts and MO DAY YEAR MO DAY YEAR							AR	FO	R OFFI	CE USE	ONLY				
Expenditures			3 28	20	23 1	О	5	5	1	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			1,0	84.43						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sc	hed	lule I)	\$	;			0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 1,084.43																
D. Total Expenditures (From Schedule III) \$ 0.00																
E. Ending Cash Balance (Subtract Line D From Line C)						\$			1,0	84.43						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dule	e II)	\$	). 			0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$			20,0	00.00			•			
			Al	FFI	DAV1	T SE	CTION									
	s a Committee rep	•								_						
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached schedu	iles	filed on	paper	or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true	1
Sworn to and subs	cribed before me thi day of	s	20						S	ignature	of Perso	n Submit	ting Rep	ort		
	Signati	ıre				_					Prin	ted Name	e			•
My Commission Ex	cpires					_					Ema	il				
	мо	D	AY	<b>/</b> R				Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Cor	nmi	ittee, (	Candid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his p	political	comm	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this									s	ignature o	of Candid	ate			
	day of					_					Printe	d Name				
My Commission 5	Signature					-					Ema	il				
My Commission Exp	oires										Liila	-				
	МО	D	AY	YR		_		Area	Code		Da	aytime T	elephon	e Numbe	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
RACE STREET PAC	From:	<u>3/28/202</u>	<u>:3</u> To:	5/1/2023
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
			1	
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

#### **PART A**

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

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Reporting Period					
			From:			То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

**PAGE TOTAL**\$ 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 of Candidate			Reporting Period From: To:					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candi	nme of Filing Committee or Candidate Repo		Reporting	Reporting Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

### 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.)

ame of Filing Committee or Candidate		Reporting Period						
			Fror	n:		To	То:	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupation				
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	lame 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	. Jammar y r uge,	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 Perio	od						
RACE STREET PAC	From:	3/28/2023 <b>To</b> :	<u>5/1/2023</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidat	ame of Filing Committee or Candidate		Reporting	g 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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Reporting Period					
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								- \$	0.00	
City	State		Zip Code(I	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n 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	ame 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)	Descri	ption of Ex					
							PAGE TOTAL		
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item I						<b>\$</b>	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	me of Filing Committee or Candidate Repo							
RACE STREET PAC			From:	<u>3</u>	3/28/2023	То:		5/1/2023
					DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR		
Mailing Address 354 DARLING ROA	D			4	20	2016	\$	5,000.00
City MEDIA	<b>State</b> PA	<b>Zip Code (Plu</b> 19063	us 4)	Description of Debt LOAN TO COMMITTEE				
					DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY					DAY	YEAR		
Mailing Address 354 DARLING ROAD					1	2016	\$	5,000.00
City MEDIA	State Zip Code (Plus 4) PA 19063				otion of Del			
					DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY				МО	DAY	YEAR		
Mailing Address 354 DARLING ROA	D			10	26	2017	\$	2,500.00
City MEDIA	<b>State</b> PA	<b>Zip Code (Plu</b> 19063	us 4)	_	otion of Del			
					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	
City         HAVERFORD         State         Zip Code (Plus 4)           PA         19041				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	State	Zip Code (Plus 4)	Description of Debt				
	PA	19041	LOAN TO COMMITTEE				
	I						PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	20,000.00