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 :	ion 2000	189			Repor Filed			CANDI	DATE		СОМІ	MITTEE	✓	LOBE	BYIST	
Name of Filing C	Committee, Candid	ate or L	obbyist:	-	PHILAD	DELP	PHI/	A FEDER	ATION	OF T	TEACHE	RS COM	1MITTEE	TO SI	JPPOR	Г
Street Address:	1816 CHESTN	NUT STR	REET													
City:	PHILADELPHI	A					2	State:	PA			Zip Co	de: 19	103		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DA) [MA]		POST- 3.			AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					DA) ECTI		POST- 6.			TERMINATION REPORT?		Yes	No	>
report type)	ANNUAL REPORT	7.	Year 2023					G METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	ought by Candida	te:						DATE O	F ELE	СТІС	N	District Number	Office Code	Par	ty Code	County Code
								мо	DAY	Y	EAR					
				_				5		16	2023		(SEE INS	TRUCTIO	ONS FOR (CODES)
	Receipts and	мо	DAY	YEAR	1		1	мо	DAY	Y	EAR	FC	R OFFIC	E USE	ONLY	
Expenditures	s from:		5 2	2	023	ГО		5		26	2023					
A. Amount Bro	ught Forward Froi	n Last F	Report				\$			824,3	389.32					
B. Total Monet	ary Contributions	And Red	ceipts (Fron	n Sche	dule I)		\$				0.00					
C. Total Funds Available (Sum Of Lines A and B)							\$			824,3	389.32					
D. Total Expen	ditures (From Sch	edule II	II)				\$			5,0	00.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		_	\$		8	819,3	89.32	-				
F. Value Of In-	Kind Contribution	s Receiv	ved (From S	chedu	le II)		\$				0.00	-				
G. Unpaid Deb	s And Obligations	(From	Schedule IV	/)			\$				0.00					
				AFF	IDAV	IT S	SEC	CTION								
PART I - If this is	s a Committee rep	ort, trea	asurer sign	here. 1	If this i	s a C	Cano	didate re	eport, o	candi	date sig	gn here.				
I swear (or affirm correct and compl) that this report, inc ete.	luding th	e attached sc	hedules	s filed or	i pape	er o	r by elect	ronic m	edium	, are to t	the best o	f my know	ledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20							5	Signature	e of Perso	n Submitt	ing Rep	ort	
	Signatu	re				_						Prin	ted Name			
My Commission E	cpires					_						Ema	il			
	мо	D	YAY	YR					Ar	ea Coo	le	Daytin	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, (Cand	lida	te shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of r ed.	ny knowl	edge and beli	ief this	political	com	nmit	tee has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ne 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me this										s	ignature	of Candida	te		
	day of					_						Printe	ed Name			
	Signature					_							•			
My Commission Exp	vires											Ema				
	мо	D	DAY	YR		_			Area	Code		D	aytime Te	lephon	e Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PHILADELPHIA FEDERATION OF TEACHERS COMMITTEE TO SUPPORT	<u>5/2/2023</u>	То:	<u>5/26/2023</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	9 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	(2)	\$	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	9 Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g 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

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 Candidat	e		Re	porting I	Period			
			Fre	om:		То	•	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	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.

PAGE 3

0.00

\$

Use this Part to ite	mize all other 0.01 to \$250.0	1 TO \$250.00 r contribution 00 in the repo	s wi ortin	ith an ng peri	aggreg iod.			ʻom
Name of Filing Committee or Candidat	e		Rep Froi	orting P	eriod	Το):	
					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	e, 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 Cand	lidate		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			Report	ing Perio	d				
			From:			То:			
				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 Period		
PHILADELPHIA FEDERATION OF TEACHERS COMMITTEE TO SUPPORT	From:	<u>5/2/2023</u> то:	<u>5/26/2023</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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Ro				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(Plus 4)								
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution

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				
PHILADELPHIA FEDERATION OF TEACHERS COMMITTEE TO SUPPORT			From	rom <u>5/2/2023</u>			<u>5/26/2023</u>
				DATE	AMOUNT		
To Whom Paid HEATHER BOYD FOR PA			мо	DAY	YEAR		
Mailing Address 315 UPLAND WAY			5	9	2023	\$	5,000.00
City DREXEL HILL	State PA	Zip Code (Plus 4) 19026	Description of Expenditure CONTRIBUTION				
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	5,000.00