Campaign Finance Report

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

Filer Identificat	ion 2015	0283			Report		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST	
Number :	Committee, Candid	ato or Lo	hhvict		Filed B Williams	-	Sonato								
	PO Box 6313		ibbyist.		winants	5101.	Senate								
Street Address:	FO B0X 0313						1								
City:	Philadelphia						State:	PA			Zip Co	de: 19	9139		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST-	3. X		AMENDN REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2023 FILING MET () CHECK								PAPER		\checkmark	DISKE	TTE
Name of Office 9	Sought by Candidat	te:					DATE O	FELE	СТІС	N	District Number	Office Code	Par	ty Code	County Code
							МО	DAY	YI	EAR	Number	Code			Code
							11		7	2023	├──	(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		5 2	2	023 T	0	6		5	2023					
A. Amount Bro	ught Forward From	n Last Re	eport	1		\$	1		88,0	009.98	1				
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I							\$ 18,000.00							
C. Total Funds Available (Sum Of Lines A and B)									106,0	009.98					
D. Total Expenditures (From Schedule III)									9,2	226.03					
E. Ending Cash	Balance (Subtract	t Line D l	From Line	C)		\$			96,7	783.95					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	()		\$	\$ 139,000.00								
				AFF	IDAVI	T SE	CTION								
PART I - If this i	s a Committee repo	ort, treas	surer sign	here. I	If this is	a Cai	ndidate re	eport, o	andi	date sig	gn here.				
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedules	s filed on	paper	or by elect	ronic m	edium	, are to	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	5	20						5	Signaturo	e of Perso	n Submitt	ing Rep	ort	
			·			-					Prin	ted Name			
My Commission E	Signatu xpires	re									Ema	il			
	мо	DA	Y	YR		-		Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a canc	lidate's a	authorized	Comn	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	dge and beli	ef this	political	comm	ittee has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	cribed before me this									s	ignature	of Candida	ite		
	day of 		20			-					Printe	ed Name			
	Signature					-									
My Commission Exp											Ema	il			
	мо	DA	Y	YR	1	-		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>5/2/2023</u> **To:** Williams for Senate <u>6/5/2023</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 18,000.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 18,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 18,000.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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					
			From: To:):		
					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.

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 Fror	orting P	eriod	Τα):		
					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 Schedule I, Detailed Summary Page, Section 2.								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			Reporting	Period			
Williams for Senate			From:	<u>5/</u>	2/2023	То:	<u>6/5/2023</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee AFSCME AFL-CIO Council 13 Political &a	ımp; Legislative			мо	DAY	YEAR	
Mailing Address 4031 Executive Park	Dr						\$ 2,500.00
City Harrisburg	State PA	Zip Code	e (Plus 4) 507	5	15	2023	
Full Name of Contributing Committee Citizens for Kenyatta Johnson				мо	DAY	YEAR	
Mailing Address PO Box 7466 City Philadelphia	State PA	Zip Code 1910174	e (Plus 4) 466	5	30	2023	\$ 1,000.00
Full Name of Contributing Committee Duane Morris LLP Govt. Comm. State &	amp; Local Fund			мо	DAY	YEAR	
Mailing Address 30 S 17th St City Philadelphia	State PA	Zip Code	e (Plus 4) 001	5	18	2023	\$ 500.00
Full Name of Contributing Committee Education Opportunity PAC		•		мо	DAY	YEAR	
Mailing Address PO Box 837 City Valley Forge	State PA	Zip Code 194820	e (Plus 4) 837	5	30	2023	\$ 10,000.00
Full Name of Contributing Committee Friends of Joanna McClinton				мо	DAY	YEAR	
Mailing Address 100 S Broad St Ste : City Philadelphia	1216 State PA	Zip Code	e (Plus 4) 015	5	30	2023	\$ 1,000.00

						_	
Full Name of Contributing Comn	nittee		мо	DAY	YEAR		
GGR Inc PAC							
Mailing Address 212 Locust S	it Ste 300					\$	500.00
City Harrisburg	State	Zip Code (Plus 4)	5	18	2023		
	PA	171011510					
Full Name of Contributing Comn PA Optometric PAC	nittee		мо	DAY	YEAR		
Mailing Address 218 North St	t					\$	500.00
City Harrisburg	State	Zip Code (Plus 4)	5	15	2023		
City Harrisburg	PA	171011141					
Full Name of Contributing Comn	nittee		мо	DAY	YEAR		
Mailing Address 2301 Market St S15-1						\$	1,000.00
	Ctata	Zin Code (Dive 4)	5	18	2023	Ť	1,000100
City Philadelphia	State	Zip Code (Plus 4)	_				
	PA	191031338					
Full Name of Contributing Comn PSEA PACE (PAC for Education)			мо	DAY	YEAR		
Mailing Address 400 N 3rd St	t P.O. Box 1724					\$	500.00
City Harrisburg	State	Zip Code (Plus 4)	5	15	2023		
	PA	171011346					
		•			VEAD		
Full Name of Contributing Com			мо	DAY	YEAR		
Wojdak for the Commonwealth			мо	DAY	YEAR	L.,	
-						\$	500.00
Wojdak for the Commonwealth Mailing Address 30 N 3rd St		Zip Code (Plus 4)	мо	DAY 18	2023	\$	500.00
Wojdak for the Commonwealth Mailing Address 30 N 3rd St	Ste 950	Zip Code (Plus 4) 171011741				\$	500.00
Wojdak for the Commonwealth Mailing Address 30 N 3rd St	Ste 950					\$	500.00
Wojdak for the Commonwealth Mailing Address 30 N 3rd St	Ste 950 State PA	171011741	- 5			\$	

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		АМО	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C on Sc	hedule I, Deta	iled Sumr	nary Page, Secti	on 3.		Γ	PAG	E TOTAL
	·						\$	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	2		Report	ting Perio	od					
			From:			То:				
				D	ATE			AMOUNT	ſ	
Full Name				мо	DAY	YEAR				
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	·					•	•			
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL	
			20000				\$		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>5/2/2023</u> то:	<u>6/5/2023</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 PART	ſF)		
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			Reporting	g 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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

PAGE 11

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

Name of Filing Committee or Candidate					Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•		Occupation					
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions De				taile	ed				PAGE TOTAL	
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
Williams for Senate			From	<u>5/2</u>	2/2023	То:	<u>6/5/2023</u>		
				DATE			AMOUNT		
To Whom Paid American Express			мо	DAY	YEAR				
Mailing Address PO Box 1270			5	18	2023	\$	1,000.05		
City Newark	State NJ	Zip Code (Plus 4) 071011270		Description of Expenditure Multiple campaign expenses- reim.					
To Whom Paid American Express				DAY	YEAR				
Mailing Address PO Box 1270			6	5	2023	\$	988.42		
City Newark State Zip Code (Plus 4) NJ 071011270			-	Description of Expenditure Multiple campaign expenses- reim.					
To Whom Paid AT&T			мо	DAY	YEAR				
Mailing Address 211 S Akard St			5	12	2023	\$	93.65		
City Dallas	State TX	Zip Code (Plus 4) 752024299	Descrip Cell Ph	otion of Exp one	penditure	1			
To Whom Paid Compass Self Storage - Oregon Ave.			мо	DAY	YEAR				
Mailing Address 10 - 12 Oregon Ave			6	3	2023	\$	201.16		
City Philadelphia	State PA	Zip Code (Plus 4) 19148	Descrip Storage	otion of Exp e Fee	penditure				
To Whom Paid Democratic State Senate Campaign Committee			мо	DAY	YEAR				
Mailing Address PO Box 3792	Mailing Address PO Box 3792			3	2023	\$	2,000.00		
City Harrisburg	State PA	Zip Code (Plus 4) 171053792	Descrip Election	otion of Exp n Day	benditure				

To Whom Paid Hilton Harrisburg			мо	DAY	YEAR		
Mailing Address 1 N 2nd St			5	11	2023	\$	866.25
City Harrisburg	State	Zip Code (Plus 4)	Descrir	tion of Ev	anditura		
City Harrisburg	PA	171011601	Description of Expenditure Facility Rental				
To Whom Paid NGP VAN			мо	DAY	YEAR		
Mailing Address 1101 15th St NW Ste 500			5	8	2023	\$	345.60
City Washington	State	Zip Code (Plus 4)	Decerie	tion of Eve			
City Washington	DC	200055006	Description of Expenditure Admin. Support				
To Whom Paid Senate Dining Club			мо	DAY	YEAR		
Mailing Address 501 N 3rd St			5	3	2023	\$	920.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure		
hamobarg	PA	171200302	Senate Dining Club 2021-2023				
To Whom Paid Rudolph Taylor			мо	DAY	YEAR		
Mailing Address 110 N 4th St			5	24	2023	\$	2,000.00
City Darby	State	Zip Code (Plus 4)	Descrir	tion of Exr	oenditure		
City Darby	РА	190232626	Description of Expenditure GOTV				
To Whom Paid Shari Williams			мо	DAY	YEAR		
Mailing Address 5939 Cobbs Creek Pkwy			5	23	2023	\$	810.90
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure				
- Filladelpilla	РА	191433025	Reimbursement: SD 8 political dinner				
						PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	9,226.03	

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

Reporting Period					
<u>6/5/2023</u>					
Outstanding Balance of Debt					
139,000.00					
Description of Debt					
y 2023					
PAGE TOTAL					
139,000.00					
r y					