# **Campaign Finance Report**

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

				<u> </u>			_			_					
Filer Identificati Number :	ion 2016	0354			Report Filed B		CANDI	DATE	C	сомм	ITTEE	✓	LOBI	BYIST	
Name of Filing (	Name of Filing Committee, Candidate or Lobbyist: CANTY, DEBORAH COMMITTEE TO ELECT														
Street Address:	Street Address: 441 W ROOSEVELT BLVD														
City:	PHILADELPHIA	4					State:	PA			Zip Coc	<b>de:</b> 19	120		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 D. PRIM		POST- 3.			AMENDMENT REPORT?		Yes	✓ No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	Y PRE-	- 5. <b>X</b>	30 D. ELEC	DAY I CTION	POST-	6.		TERMINA REPORT?		Yes	No	$\checkmark$
							NG METHO				PAPER		$\checkmark$	DISKE	TTE
Name of Office Sought by Candidate:							DATE O	F ELEO	CTION		District Number	Office Code	Par	ty Code	County Code
JUDGE OF THE COURT OF COMMON PLEAS - PHILADELPHIA															
			45 - PRILA	DELFIN			11		7 2	2017		(SEE INS	TRUCTI	ONS FOR (	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAF	R	FO	OR OFFIC	E USE	ONLY	
Expenditures	s from:		9 19	20	)17 <b>T</b>	0	10	2	23 2	2017					
A. Amount Bro	ought Forward From	n Last Re	eport		- 	\$	\$		1,024	4.20					
B. Total Monet	tary Contributions A	And Rece	eipts (From	۱ Sched	lule I)	\$	\$		310	0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	\$		1,334	4.20					
D. Total Expen	nditures (From Sche	adule III	()			\$	\$		647	7.00					
E. Ending Cash	n Balance (Subtract	Line D	From Line (	C)		4	5		687	7.20					
F. Value Of In-	-Kind Contributions	Receive	ed (From Se	chedule	e II)	\$	\$		0	0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$	\$		0	0.00					
				AFFI	DAVI	T SE	ECTION								
PART I - If this is	is a Committee repo	ort, treas	surer sign l	here. If	f this is	a Ca	ndidate re	aport, c	andidat	te sig	n here.				
I swear (or affirm correct and compl	i) that this report, inclu lete.	uding the	attached sch	hedules f	filed on	paper	or by elect	ronic me	edium, ar	re to ti	he best o	f my know	/ledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	;	20						Sign	nature	of Perso	n Submitti	ing Rep	oort	
	Signatur		·			-					Prin	ted Name			
My Commission E	-	e									Emai	il			
	мо	DA	4Y	YR				Are	ea Code		Daytim	ne Telepho	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee, C	andic	date shall	sign he	ere.						
I swear (or affirm) No 320) as amende	) that to the best of m led.	ıy knowle	dge and beli	ef this p	political	comm	nittee has n	iot violat	ted any p	provisi	ons of the	e act of Ju	ne 3,1	937 (P.L	. 1333,
Sworn to and subso	cribed before me this									Si	gnature d	of Candida	te		
20											Duinte	- N			
	Signature					_					Printe	ed Name			
My Commission Exp	Signature pires										Ema	il			
	мо	DA	4Y	YR		-		Area	Code		Di	aytime Te	lephor	ie Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CANTY, DEBORAH COMMITTEE TO ELECT From: <u>9/19/2017</u> **To:** 10/23/2017 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)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 310.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 310.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candidate			Reporting Period					
Fro			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

\$

PAGE 3

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	orting P	eriod			
			Fro	m:		То	):	
					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					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	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		АМС	DUNT
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 Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	iedule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE 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				ing Perio	d			
CANTY, DEBORAH COMMIT	TEE TO ELECT		From:		<u>9/19/201</u>	<u>7</u> To:		<u>10/23/2017</u>
				D	ATE			AMOUNT
Full Name								
PNC				мо	DAY	YEAR		
Mailing Address PO Box (				4	\$ 250			
City Pittsburgh	State	Zip Code (I	Plus 4)	10	6	201	7	
rittsburgn	PA	15230						
Receipt Description red	eposited cashier check(no	t used for intended	purpose	)				
<b>Full Name</b> Walter Parnell				мо	DAY	YEAR		
Mailing Address 5515 Ell	iot St						1	\$ 60
City Phiadelphia	State	Zip Code (I	Plus 4)	9	22	201	7	
- Theory ind	PA	19143						
Receipt Description Ref	unded Square Fee						I	
			_					PAGE TOTAL
Enter Grand Total of Part E	on Schedule I, Detailed	l Summary Page,	Section	4.			\$	310.00

### 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		
CANTY, DEBORAH COMMITTEE TO ELECT	From:	<u>9/19/2017</u> <b>то:</b>	<u>10/23/2017</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 PAR	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 R			Reporting Period					
Fi						То:		
				DATE		АМО	UNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address	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	

0.00

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

Name of Filing Committee or Candidate					Reporting Period				
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	l tion		I	
Employer Mailing Address/Princip Business	al Place of	City	Sta	te	Zip 4)	Code(Plus	Descri	ption of	Contribution
		·	<u> </u>						PAGE TOTAL

_ 1	Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAG

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period				
CANTY, DEBORAH COMMITTEE 1	TO ELECT		From	<u>9/19</u>	9/2017	То:	<u>10/23/2017</u>	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
PNC								
Mailing Address PO Box 609			10	2	2017	\$	12.00	
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	otion of Exp	Denditure			
	PA	15230	Bank F	ee				
To Whom Paid			мо	DAY	YEAR			
Patricia West								
Mailing Address MUST GET AD	DRESS		10	3	2017	\$	250.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	Denditure			
PA 19111				ising Conce	ert Prom	otion Casł	nier ck#	
<b>To Whom Paid</b> Patricia West			мо	DAY	YEAR			
Mailing Address MUST GET AD	DRESS		10	10	2017	\$	125.00	
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19111	Fundraising Concert Promotion ck#					
To Whom Paid Ebony Gibbs			мо	DAY	YEAR			
Mailing Address MUST GET AD	DRESS		10	10	2017	\$	125.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<b>I</b>		
	PA	19111	Fundra	ising Conce	ert Prom	otion ck#		
To Whom Paid	•		мо	DAY	YEAR			
Strassheim Printing								
Mailing Address 1500 Spring g	garden St		10	19	2017	\$	135.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure	•		
	PA	19130	Printing	9				
	·						PAGE TOTAL	
Enter Grand Total of Expendit	ures on Page 1, Re	eport Cover Page, Item I	D.			\$	647.00	