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 201	50137			Repo			CANI	DIC	DATE		СОМ	ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		FRIE	NDS	S OF	NATAS	НΑ	TAYL	OR S	MITH						_
Street Address:	P O BOX 517	' 9																
City:	PHILADELPH	IA						State:		PA			Zip Cod	le: 19	9141			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	2.		30 DA PRIMA		P	OST-	3.		AMENDM REPORT		Yes	No	Y	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.	.х	30 DA ELECT		P	OST-	6.		TERMINA REPORT		Yes	No	٧	
report type)	ANNUAL REPOR	r 7.	Year 2023					IG MET CHECK					PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candid	ate:	•		<u> </u>	•		DATE	OF	FELE	СТІС	N	District Number	Office Code	Par	ty Code	County Code	,
	,							МО		DAY	ΥI	AR	DEM					
								1	11		7	2023		(SEE IN	STRUCTIO	ONS FOR O	ODES)	
	Receipts and	МО	DAY YE	EAR				МО		DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	5 Trom:		9 19	20	023	T	0	1	10	2	23	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				10,0	058.89						
B. Total Monet	ary Contributions	And Rec	eipts (From So	che	dule 1	I)	\$				4	470.34						
C. Total Funds	Available (Sum C	of Lines A	and B)				\$				10,	529.23]					
D. Total Expend	ditures (From Sc	hedule II	I)				\$				10,3	390.97						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$				1	38.66						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$				26,5	500.00			1			
			А	١FF	IDA	VI٦	ΓSE	CTIOI	N									
PART I - If this is			_									_						
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sched	lules	filed	on p	oaper (or by ele	ectro	onic me	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , true	à,
Sworn to and subs	cribed before me th	is	20						-		S	Signature	of Perso	n Submit	ting Rep	ort		•
	Signat	ura	-				-		-				Prin	ted Name	e			-
My Commission Ex	_	uie							_				Ema	il				
	мо	D	AY	YR			-		_	Are	a Coc	le	Daytim	e Teleph	none Nu	mber		•
Part II- If this is	a report of a car	ndidate's	authorized Co	mm	ittee	, Ca	andida	ate sha	II s	ign he	ere.							Ī
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 subsc		5										s	ignature o	of Candid	ate			۱ ا
	day of —— ————						-						pi*	al Nia				.
	Signature						-						Printe	d Name				
My Commission Exp	_								-				Ema	il				
	МО	D	AY	YR		_				Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF NATASHA TAYLOR SMITH	From:	9/19/202	<u>3</u> To:	10/23/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J Period	(1)	\$	228.06
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	242.28
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	242.28
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	J 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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	470.34

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		
FRIENDS OF NATASHA TAYLOR SMITH	From:	9/19/2023	То:	10/23/2023
		DATE		AMOUNT

Full Name of Contributing Committee POWERUP PAC	-					
Mailing Address 1150 1ST AVENUE SUITE 501						\$ 242.28
City KING OF PRUSSIA	State PA	Zip Code (Plus 4) 19406	6	15	2023	

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

PAGE TOTAL \$ 242.28

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

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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary 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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod				
			Fron	n:		То	:		
				D/	ATE		А	MOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	C	0.00
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupat	ion				
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 Su	ımmary Page,	Section	on 3.				PAGE TOTAL	
						_	•	0.00	0

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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
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. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i>	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	I	
FRIENDS OF NATASHA TAYLOR SMITH	From:	<u>9/19/2023</u> To:	10/23/2023
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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting F	Period			
				Fre	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Ci	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-l	Kind (Contributions D	etail	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	nndidate		Reporti	ng Period				
FRIENDS OF NATASHA TAYLOF	R SMITH		From	9/19	9/2023	То:	10/23/2023	
				DATE			AMOUNT	
To Whom Paid PAYPAL			МО	DAY	YEAR			
Mailing Address 2211 N 1ST	STREET		9	3	2003	\$	9.66	
City SAN JOSE	State	Zip Code (Plus 4)	Description of Expenditure					
	CA	95131	FEES					
To Whom Paid BRADFORD EXCHANGE	МО	DAY	YEAR					
Mailing Address 9305 N. MIL		6	8	2023	\$	14.95		
City NILES	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
-	IL	60714	CHECK					
To Whom Paid MIKE TUCKER			мо	DAY	YEAR			
Mailing Address			6	17	2023	\$	1,400.00	
City	State	Zip Code (Plus 4)	Descrip CONSU	otion of Exp	enditure			
To Whom Paid NATASHA TAYLOR SMITH	·		МО	DAY	YEAR			
Mailing Address 6405 N. 6TH	1 STREET		6	26	2023	\$	6,000.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19126		REPAYMEN				
To Whom Paid BRADFORD EXCHANGE	·		МО	DAY	YEAR			
Mailing Address 9305 N. MILWAUKEE AVENUE			7	10	2023	\$	14.95	
City NILES	State	Zip Code (Plus 4)	Description of Expenditure					

60714

IL

CHECKS

To Whom Paid EL SOL MEXICAN RESTAURANT			МО	DAY	YEAR		
Mailing Address 18 S. 3RD ST						\$	301.41
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure FUNDRAISER				
To Whom Paid NATASHA TAYLOR SMITH			МО	DAY	YEAR		
Mailing Address 6405 N. 6TH STREE	Т		8	16	2023	\$	2,500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126	Description of Expenditure LOAN REPAYMENT				
To Whom Paid DEMOCRATIC CITY COMMITTEE			МО	DAY	YEAR		
Mailing Address 219 SPRING GARDE	N ST		9	8	2023	\$	150.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure DONATION				
Enter Grand Total of Expenditures	on Page 1, Re	port Cover Page, Item D.				\$	PAGE TOTAL 10,390.97

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			Reporting Period						
FRIENDS OF NATASHA TAYLOR SMITH			From:	<u>9/19/2023</u> To:			10/23/2023		
					DATE			Outstanding Balance of Debt	
Name of Creditor NATASHA TAYLOR SMITH				мо	DAY	YEAR			
Mailing Address 6405 N. 6TH STREET				5	31	2023	\$	26,500.00	
City PHILADELPHIA	State PA	Zip Code (Pl 19126	us 4)	Description of Debt LOAN					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL	
							\$	26,500.00	