

Campaign Finance Report

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

| | | | | | | | | | | | | |
|---|--------------------------|-----------|-------------------------|------------------------------------|----------------------|-------------------------|--|--|------------------------------|-------------------------------------|-------------------|--------------------|
| Filer Identification Number : | | 20150283 | | Report Filed By : | | CANDIDATE | | COMMITTEE <input checked="" type="checkbox"/> | | LOBBYIST | | |
| Name of Filing Committee, Candidate or Lobbyist: Williams for Senate | | | | | | | | | | | | |
| Street Address: PO Box 6313 | | | | | | | | | | | | |
| City: Philadelphia | | | | | | State: PA | | Zip Code: 19139 | | | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE-PRIMARY | 2. | 30 DAY POST-PRIMARY | 3. | AMENDMENT REPORT? | Yes | No | <input checked="" type="checkbox"/> | | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5. | 30 DAY POST-ELECTION | 6. | TERMINATION REPORT? | Yes | No | <input checked="" type="checkbox"/> | | |
| | ANNUAL REPORT | 7. X | Year 2023 | FILING METHOD () CHECK ONE | | | PAPER <input checked="" type="checkbox"/> | DISKETTE | | | | |
| Name of Office Sought by Candidate: | | | | | | DATE OF ELECTION | | | District Number | Office Code | Party Code | County Code |
| | | | | | | MO | DAY | YEAR | | | | |
| | | | | | | 11 | 7 | 2023 | | | | |
| | | | | | | | | | (SEE INSTRUCTIONS FOR CODES) | | | |
| Summary of Receipts and Expenditures from: | | MO | DAY | YEAR | TO | MO | DAY | YEAR | FOR OFFICE USE ONLY | | | |
| | | 11 | 28 | 2023 | | 12 | 31 | 2023 | | | | |
| A. Amount Brought Forward From Last Report | | | | | | \$ 63,788.39 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | | \$ 21,200.00 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | \$ 84,988.39 | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ 14,008.25 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | \$ 70,980.14 | | | | | | |
| F. Value Of In-Kind Contributions Received (From Schedule II) | | | | | | \$ 0.00 | | | | | | |
| G. Unpaid Debts And Obligations (From Schedule IV) | | | | | | \$ 132,000.00 | | | | | | |

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

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 subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period |
| Williams for Senate | From: <u>11/28/2023</u> To: <u>12/31/2023</u> |

| | |
|--|---------|
| 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) | \$ 250.00 |
| All Other Contributions (Part B) | \$ 650.00 |
| TOTAL for the Reporting Period (2) | \$ 900.00 |

| | |
|---|--------------|
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | |
| Contributions Received From Political Committees (Part C) | \$ 7,500.00 |
| All Other Contributions (Part D) | \$ 12,800.00 |
| TOTAL for the Reporting Period (3) | \$ 20,300.00 |

| | |
|--|---------|
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) | |
| TOTAL for the Reporting Period (4) | \$ 0.00 |

| | |
|---|--------------|
| Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.) | \$ 21,200.00 |
|---|--------------|

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 Candidate Williams for Senate | Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u> | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table> | | DATE | AMOUNT |
| DATE | AMOUNT | | |

| | | | | | | | |
|---|-----------------|------------------------------------|--|-----------|------------|-------------|-----------|
| Full Name of Contributing Committee 4 B Neighbors | | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 4 Interplex Dr | | | | 12 | 31 | 2023 | |
| City Feasterville Trevose | State PA | Zip Code (Plus 4) 190536944 | | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 250.00 |

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 Candidate Williams for Senate | Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u> |
|---|--|

| | | | | DATE | | | AMOUNT | |
|---------------------------------------|--|----------|-----------------------------|------|-----|------|-----------|--|
| Full Name of Contributor | | | | MO | DAY | YEAR | \$ 250.00 | |
| Pete Cona | | | | | | | | |
| Mailing Address Information Requested | | | | | | | | |
| City Philadelphia | | State PA | Zip Code (Plus 4) 19139 | 12 | 31 | 2023 | | |
| Full Name of Contributor | | | | MO | DAY | YEAR | \$ 250.00 | |
| Joseph & Linda Hand | | | | | | | | |
| Mailing Address 21 Tradesville Dr | | | | | | | | |
| City Doylestown | | State PA | Zip Code (Plus 4) 189012991 | 12 | 31 | 2023 | | |
| Full Name of Contributor | | | | MO | DAY | YEAR | \$ 150.00 | |
| Daniel Muroff | | | | | | | | |
| Mailing Address PO Box 1215 | | | | | | | | |
| City Media | | State PA | Zip Code (Plus 4) 190638215 | 12 | 31 | 2023 | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 650.00 |

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 Williams for Senate | Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u> |
|---|--|

| | | | | DATE | | AMOUNT | |
|---|--|----------|-----------------------------|------|-----|--------|-------------|
| Full Name of Contributing Committee | | | | MO | DAY | YEAR | \$ 1,000.00 |
| CSX Corporation Good Government Fund | | | | 12 | 31 | 2023 | |
| Mailing Address 1331 Pennsylvania Ave Northwest National Pl Suite 560 | | | | | | | |
| City Washington | | State DC | Zip Code (Plus 4) 20004 | | | | |
| Full Name of Contributing Committee | | | | MO | DAY | YEAR | \$ 3,000.00 |
| Rampar Associates | | | | 12 | 31 | 2023 | |
| Mailing Address 735 Birch Ave | | | | | | | |
| City Bensalem | | State PA | Zip Code (Plus 4) 190207207 | | | | |
| Full Name of Contributing Committee | | | | MO | DAY | YEAR | \$ 1,000.00 |
| Sprinkler Fitters Local Union #692 | | | | 12 | 31 | 2023 | |
| Mailing Address 14002 McNulty Rd | | | | | | | |
| City Philadelphia | | State PA | Zip Code (Plus 4) 191541106 | | | | |
| Full Name of Contributing Committee | | | | MO | DAY | YEAR | \$ 2,500.00 |
| Steamfitters' Local Union 420 Committee on Political Education Fund | | | | 12 | 31 | 2023 | |
| Mailing Address 14420 Townsend Rd | | | | | | | |
| City Philadelphia | | State PA | Zip Code (Plus 4) 191541030 | | | | |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

| |
|-------------------|
| PAGE TOTAL |
| \$ 7,500.00 |

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 Williams for Senate | Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u> |
|---|--|

| | | | | DATE | | AMOUNT | |
|--|---------|----------------------------|--------------|---------------------|-------|--------|-------------------|
| Full Name of Contributor | | | | MO | DAY | YEAR | \$1,000.00 |
| James Anderson | | | | 12 | 31 | 2023 | |
| Mailing Address6958 Torresdale Ave Ste 200 | | | | | | | |
| CityPhiladelphia | StatePA | Zip Code (Plus 4)191351937 | | | | | |
| Employer NameAnderson Construction | | | | OccupationOwner | | | |
| Employer Mailing Address/Principal Place of Business | | | City | | State | | Zip Code (Plus 4) |
| 6958 Torresdale AveSte 200 | | | Philadelphia | | PA | | 191351937 |
| Full Name of Contributor | | | | MO | DAY | YEAR | \$500.00 |
| Rhonda Demoss Adams | | | | 12 | 31 | 2023 | |
| Mailing Address1403 Shirley Ln | | | | | | | |
| CityPerkasie | StatePA | Zip Code (Plus 4)189442868 | | | | | |
| Employer NameApplewood Enterprises, Inc. | | | | OccupationPresident | | | |
| Employer Mailing Address/Principal Place of Business | | | City | | State | | Zip Code (Plus 4) |
| 331 Maple AveSte 1 | | | Horsham | | PA | | 190442148 |
| Full Name of Contributor | | | | MO | DAY | YEAR | \$500.00 |
| George Grigos | | | | 12 | 31 | 2023 | |
| Mailing Address119 Camelot Ln | | | | | | | |
| CityNewtown Square | StatePA | Zip Code (Plus 4)190734412 | | | | | |
| Employer NameAramingo Diner | | | | OccupationPresident | | | |
| Employer Mailing Address/Principal Place of Business | | | City | | State | | Zip Code (Plus 4) |
| 3356 Aramingo Ave | | | Philadelphia | | PA | | 191344506 |
| Full Name of Contributor | | | | MO | DAY | YEAR | \$2,500.00 |
| Scott Haines | | | | 12 | 31 | 2023 | |
| Mailing Address2052 Lucon Rd | | | | | | | |
| CitySkippack | StatePA | Zip Code (Plus 4)19474 | | | | | |
| Employer NameH&K Group, Inc. | | | | OccupationPresident | | | |
| Employer Mailing Address/Principal Place of Business | | | City | | State | | Zip Code (Plus 4) |
| 2052 Lucon Rd | | | Skippack | | PA | | 19474 |

| | | | | | | | |
|---|--------------------|---------------------------------------|--------------|---|--------------------------|-------------|--------------------|
| Full Name of Contributor Quincy Harris | | | | MO | DAY | YEAR | \$ 2,500.00 |
| Mailing Address 3603 Carriage Ct | | | | 12 | 31 | 2023 | |
| City North Wales | State PA | Zip Code (Plus 4) 194543789 | | | | | |
| Employer Name Information Requested | | | | Occupation Information Requested | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| | | | | | | | |
| Full Name of Contributor Jeremy Kramer | | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address 417 Gladstone Rd | | | | 12 | 31 | 2023 | |
| City Langhorne | State PA | Zip Code (Plus 4) 190471927 | | | | | |
| Employer Name Kramer Marketing | | | | Occupation Marketing | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| 417 Gladstone Rd | | | Langhorne | PA | 190471927 | | |
| Full Name of Contributor Marshall P H Mitchell | | | | MO | DAY | YEAR | \$ 2,500.00 |
| Mailing Address 610 Summit Ave | | | | 12 | 19 | 2023 | |
| City Jenkintown | State PA | Zip Code (Plus 4) 190463237 | | | | | |
| Employer Name Salem Baptist Church of Jenkintown | | | | Occupation Pastor | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| 610 Summit Ave | | | Jenkintown | PA | 190463237 | | |
| Full Name of Contributor Joseph Mulvihill | | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address 1063 Anna Rd | | | | 12 | 31 | 2023 | |
| City Huntingdon Valley | State PA | Zip Code (Plus 4) 190068610 | | | | | |
| Employer Name Ambric Technology Corp | | | | Occupation Owner/P.E. | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| 100 Pine St | | | Darby | PA | 190233125 | | |
| Full Name of Contributor Jose Ramos | | | | MO | DAY | YEAR | \$ 300.00 |
| Mailing Address 7033 Sheaff Ln | | | | 12 | 31 | 2023 | |
| City Fort Washington | State PA | Zip Code (Plus 4) 190342005 | | | | | |
| Employer Name Ramos & Associates, Inc. | | | | Occupation Highway Contractor | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| 300 Domino Ln | | | Philadelphia | PA | 191284352 | | |
| Full Name of Contributor Chris Sullivan | | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address 1324 W Clearfield St | | | | 12 | 31 | 2023 | |
| City Philadelphia | State PA | Zip Code (Plus 4) 191322423 | | | | | |
| Employer Name Information Requested | | | | Occupation Information Requested | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| | | | | | | | |

| | | | | | | | |
|---|--------------------|---------------------------------------|------------------------|------------------------------------|--------------------|-----------------------------------|------------------|
| Full Name of Contributor Michael C Thomson | | | | MO 12 | DAY 31 | YEAR 2023 | \$ 500.00 |
| Mailing Address 11 Periwinkle Dr | | | | | | | |
| City Mount Laurel | State NJ | Zip Code (Plus 4) 080545701 | | | | | |
| Employer Name Santilli & Thomson, LLC | | | | Occupation Business Manager | | | |
| Employer Mailing Address/Principal Place of Business 601 NJ-73 Suite# 302 | | | City Marlton | | State NJ | Zip Code (Plus 4) 08053 | |

| | | | | | | | |
|--|--------------------|---------------------------------------|------------------------|---|--------------------|---------------------------------------|------------------|
| Full Name of Contributor Murty S. Vepuri | | | | MO 12 | DAY 31 | YEAR 2023 | \$ 500.00 |
| Mailing Address 1707 Scott Dr | | | | | | | |
| City Newtown | State PA | Zip Code (Plus 4) 189402900 | | | | | |
| Employer Name Pharmatech Advisors LLC | | | | Occupation Pharmaceutical Consultant | | | |
| Employer Mailing Address/Principal Place of Business 1707 Scott Dr | | | City Newtown | | State PA | Zip Code (Plus 4) 189402900 | |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

| |
|---------------------|
| PAGE TOTAL |
| \$ 12,800.00 |

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 | Reporting Period From: To: |
|---------------------------------------|--|

| | | | | DATE | AMOUNT | | |
|---------------------|-------|-------------------|--|------|--------|------|---------|
| Full Name | | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | | |
| City | State | Zip Code (Plus 4) | | | | | |
| Receipt Description | | | | | | | |

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

| |
|-------------------|
| PAGE TOTAL |
| \$ 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>11/28/2023</u> To: <u>12/31/2023</u> | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | |
| TOTAL for the Reporting Period | | (1) | \$ 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F) | | | |
| TOTAL for the Reporting Period | | (2) | \$ 0.00 |
| 3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Period | | (3) | \$ 0.00 |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.) | | | \$ 0.00 |

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period From: To: |
|--|---|

| | | | DATE | | | AMOUNT |
|--|--------------|--------------------------|-----------|------------|-------------|----------------------------------|
| Full Name of Contributor | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| Description of Contribution: | | | | | | |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2. | | | | | | PAGE TOTAL \$ 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 | | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | | |
| City | State | Zip Code(Plus 4) | | | | | |
| Employer of Contributor | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Business | | City | State | Zip Code(Plus 4) | Description 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 Candidate | Reporting Period |
| Williams for Senate | From <u>11/28/2023</u> To: <u>12/31/2023</u> |

| DATE | | | | AMOUNT |
|--|-----------------|------------------------------------|---|--------------|
| To Whom Paid | MO | DAY | YEAR | |
| American Express | | | | |
| Mailing Address PO Box 1270 | 12 | 18 | 2023 | \$ 125.00 |
| City Newark | State NJ | Zip Code (Plus 4) 071011270 | Description of Expenditure Multiple Campaign Expenses- reim. | |
| To Whom Paid | MO | DAY | YEAR | |
| AT&T | | | | |
| Mailing Address 211 S Akard St | 12 | 12 | 2023 | \$ 186.18 |
| City Dallas | State TX | Zip Code (Plus 4) 752024207 | Description of Expenditure Cell Phone- November & December | |
| To Whom Paid | MO | DAY | YEAR | |
| Chavous Consulting LLC | | | | |
| Mailing Address 100 S Broad St Ste 2220 | 11 | 29 | 2023 | \$ 12,000.00 |
| City Philadelphia | State PA | Zip Code (Plus 4) 191101011 | Description of Expenditure Services Rendered Oct-Nov 2021 | |
| To Whom Paid | MO | DAY | YEAR | |
| Compass Self Storage - Oregon Ave. | | | | |
| Mailing Address 10 OREGON Ave 12 | 12 | 4 | 2023 | \$ 201.16 |
| City Philadelphia | State PA | Zip Code (Plus 4) 19148 | Description of Expenditure Storage Fee | |
| To Whom Paid | MO | DAY | YEAR | |
| NGP VAN | | | | |
| Mailing Address 1101 15th St NW Ste 500 | 12 | 4 | 2023 | \$ 345.60 |
| City Washington | State DC | Zip Code (Plus 4) 200055006 | Description of Expenditure Admin. Support | |
| To Whom Paid | MO | DAY | YEAR | |
| PayPal | | | | |
| Mailing Address 2221 N 1st St | 12 | 31 | 2023 | \$ 150.31 |
| City San Jose | State CA | Zip Code (Plus 4) 951312021 | Description of Expenditure Processing Fees | |

| | | | | | | |
|--|--------------------|---------------------------------------|---|------------|-------------|--|
| To Whom Paid Rick for Philly | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address 4712 Baltimore Ave | | | 12 | 21 | 2023 | |
| City Philadelphia | State PA | Zip Code (Plus 4) 191433558 | Description of Expenditure Contribution | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL \$ 14,008.25 |

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 Williams for Senate | Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u> |
|---|--|

| | | | | DATE | | | Outstanding Balance of Debt |
|---|--|----------|-----------------------------|--|-----|------|--------------------------------|
| Name of Creditor | | | | MO | DAY | YEAR | |
| Chavous Consulting LLC | | | | | | | |
| Mailing Address | | | | 5 | 5 | 2019 | \$ 132,000.00 |
| City Philadelphia | | State PA | Zip Code (Plus 4) 191101011 | Description of Debt | | | |
| | | | | Services Rendered -Oct 2021 - Dec 2023 | | | |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | | | PAGE TOTAL |
| | | | | | | | \$ 132,000.00 |