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 9100	099			Repoi		CAI	NDI	DATE		СОМІ	MITTEE	Y	LUBB	1131	
Name of Filing C	Committee, Candid	ate or L	obbyist:	•	RACE S	STREE	T PAC				•					
Street Address:	1301 N. 31ST	STREE	Т													
City:	PHILADELPHIA	A					State	e:	PA			Zip Co	121			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM					AMENDMENT Yes REPORT?			No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D/ ELEC					TERMIN/ REPORT		Yes	No	✓	
report type)	ANNUAL REPORT	7.	Year 2024				NG METHOD CHECK ONE				PAPER		$ \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$	DISKE	ΓΤΕ	
Name of Office S	Sought by Candidat	te:	-			-	DAT	ΕO	F ELE	СТІС	N	District Number	Office Code	Part		County Code
							МО		DAY	YI	AR			DEM		51
								11		5	2024		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YI	EAR	FC	R OFFIC	E USE	ONLY	
Expenditures from: 1 1 2024						ТО		3		4	2024					
A. Amount Brought Forward From Last Report						\$				1,0	084.43					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																
C. Total Funds Available (Sum Of Lines A and B)						\$;			1,0	084.43					
D. Total Expenditures (From Schedule III)						\$	1				0.00					
E. Ending Cash Balance (Subtract Line D From Line C)					\$				1,0	84.43						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$					0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)		\$	1			20,0	00.00					
				AFF	IDAV	IT SE	CTIC	NC								
I swear (or affirm)	s a Committee repo that this report, incl	*	_								_		f my knov	vledge a	nd belie	ef , true
correct and comple																
Sworn to and subs	cribed before me this day of —	•	20			_				9	Signature	of Perso	n Submitt	ing Rep	ort	
	Signatu	re				_						Prin	ted Name	l		
My Commission Ex	cpires											Ema	il			
	МО	D	AY	YR				_	Are	ea Cod	le	Daytin	e Teleph	one Nun	nber	_
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee,	Candid	late sh	nall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ief this	politica	l comm	ittee h	as n	ot viola	ted an	y provis	ions of th	e act of Ju	ıne 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature (of Candida	ate		
	<u> </u>					_			Printed Name							
My Commission Exp	Signature pires					_			Email				-			
	мо	D	AY	YR		_			Area Code Daytime Teleph					elephone	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	_			
Name of Filing Committee or Candidate	Reporting	Period		
RACE STREET PAC	From:	1/1/202	<u>4</u> To:	<u>3/4/2024</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)			\$	0.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	\$	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) Period	(3)	\$	0.00
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 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

	this Part to itemize only with an aggregate valu								
Name of Filing Comm	Name of Filing Committee or Candidate			Reporting Period					
			From: To) :			
		<u> </u>			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)						
	•	·			•	•	$\overline{}$	DACE TOTAL	

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

PAGE TOTAL \$ 0.00

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	e or Candidate		Reporting Period					
			From: T			ō:		
					DATE		A	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.

ame of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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			Reporting Period						
				Froi	From: To:				
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address State Tip Code (Blus 4)							\$	0.00	
City	State	Zi	p Code (Plus	i 4)					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE TOTAL
								•	0.00

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 C	Name of Filing Committee or Candidate			Reporting Period						
			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. Detailed	d Summary Page.	Section	4.				PAGE TOTA	ıL	
		· • • • • • • • • • • • • • • • • • • •					\$	C	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 Perio	d							
RACE STREET PAC	From:	<u>1/1/2024</u> To:	3/4/2024						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

lame 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)						
Description of Contribution:								
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL	
Section 2.						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
					From:			To:	То:		
							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 Business City State					Zi _Į 4)	Code(Plus	Descri	ption	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					
	From			То:					
	DATE AMO								
To Whom Paid				DAY	YEAR				
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)				Description of Expenditure					
							PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item I						\$	0.00		

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			Reportir	ng Period	1			
RACE STREET PAC			From:		1/1/2024	То:		<u>3/4/2024</u>
					DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR		
Mailing Address 354 DARLING ROA	AD			4	20	2016	\$	5,000.00
City MEDIA	State	Zip Code (Pl	us 4)	Descrip				
	PA	19063		LOAN	ГО СОММІТ	IEE		
					DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY					DAY	YEAR		
Mailing Address 354 DARLING ROAD					1	2016	\$	5,000.00
City MEDIA	State Zip Code (Plus 4) PA 19063				otion of Del			
	•				DATE			Outstanding Balance of Debt
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR		
Mailing Address 354 DARLING ROA	AD			10	26	2017	\$	2,500.00
City MEDIA	State PA	Zip Code (Pl 19063	us 4)		otion of Del			
					DATE		Outstanding Balance of Debt	
Name of Creditor RICHARD A. BARNHART				мо	DAY	YEAR		
Mailing Address 40 EVANS LANE			7	1	2016	\$	5,000.00	
City HAVERFORD State Zip Code (Plus 4)			Description of Debt					
PA 19041				LOAN T	ГО СОММІТ	TEE		

				DATE			Outstanding Balance of Debt
Name of Creditor RICHARD K. BARNHART			МО	DAY	YEAR		
Mailing Address 40 EVANS LANE		10	26	2017	\$	2,500.00	
City HAVERFORD	State	Zip Code (Plus 4)	Description of Debt				
	PA	19041	LOAN TO COMMITTEE				
	I						PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	20,000.00