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 200)4233			Rep File			CAND	IDATI	E	CON	MITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		FRA	TER	NAL (ORDER (OF PO	LICE	LODGE	5					
Street Address:	11630 CAR	OLINE RD)														
City:	PHILADELPH							Zip Code: 19154									
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY				30 DA		POST-	POST- 3.			AMENDMENT REPORT?		N	0	√		
(place X to the right of	6TH TUESDAY PRE-ELECTION				TERMINATION REPORT?				Yes	N	0	\					
report type)	ANNUAL REPOR								PAPER		V	DISK	ETTE				
Name of Office S	ought by Candid	late:	_					DATE	OF EL	ECT	ION	District Number	Office Code	Pa	rty Code	Cour	
								МО	DAY	1	YEAR		•			•	
								1	1	5	202	1	(SEE IN	STRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAR				МО	DAY	1	YEAR	FC	OR OFFI	CE USE	ONLY		
Expenditures	Trom:		3 5	2	024	Т	0		4	8	202	4					
A. Amount Bro	ught Forward Fr	om Last F	Report				\$			15	6,417.2	3					
B. Total Moneta	ary Contribution	s And Red	eipts (Fron	n Sche	dule	I)	\$			2	2,714.6	7					
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			17	9,131.9	5					
D. Total Expend	ditures (From So	hedule II	II)				\$				5,500.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			173	3,631.95						
F. Value Of In-	Kind Contributio	ns Receiv	red (From S	chedu	le II)	\$				0.00	닠					
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	/)			\$				0.00)					
				AFF	IDA	١V	T SE	CTION									
PART I - If this is			_						=	-		_	£ 1				
I swear (or affirm) correct and comple		icluaing th	e attacned sc	neaules	s filed	ı on	paper	or by elec	tronic	meai	um, are to	tne best o	or my knov	wieage	and bei	ieτ, tr	ue
Sworn to and subs	cribed before me to day of	his	20								Signatu	re of Perso	n Submit	ting Re	port		
	Signa	ture					-					Prin	ted Name	•			
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR						Area	Code	Daytin	ne Teleph	one Nu	ımber		$\underline{}$
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign	here							
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ief this	polit	ical	comm	ittee has	not vio	lated	any prov	sions of th	e act of J	une 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me th day of	is	20									Signature	of Candida	ate			_
							-					Printe	ed Name				-
	Signatur	e					-					Ema	.ii				_
My Commission Exp	ires						_										
	МО	D	AY	YR			_		Are	ea Co	de	D	aytime T	elepho	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRATERNAL ORDER OF POLICE LODGE 5	From:	3/5/202	<u>4</u> To:	4/8/2024
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	21,851.86
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)			\$	835.00
TOTAL for the Reporting	Period	(2)	\$	835.00
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)	\$	27.81
Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	22,714.67

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	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•	•		•	•		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 or Candidat	Name of Filing Committee or Candidate					eporting Period				
FRATERNAL ORDER OF POLICE LODG	E 5		From:			2024 T o): 	4/8/2024		
					DATE			AMOUNT		
Full Name of Contributor Rebekah Anderson			мс)	DAY	YEAR				
Mailing Address 5933 Nassau Rd							\$	25.00		
City Philadelphia	State PA	Zip Code (Plus 4) 19151		3	6	2024				
Full Name of Contributor										
Rebekah Anderson			МС)	DAY	YEAR				
Mailing Address 5933 Nassau Rd							\$	25.00		
City Philadelphia	State	Zip Code (Plus 4)		3	20	2024				
	PA	19151								
Full Name of Contributor Rebekah Anderson			мс)	DAY	YEAR				
Mailing Address 5933 Nassau Rd							\$	25.00		
City Philadelphia	State	Zip Code (Plus 4)		4	3	2024				
	PA	19151								
Full Name of Contributor			мс)	DAY	YEAR				
Miquon Wilson										
Mailing Address 319 W Champlost A	ve						\$	20.00		
City Philadelphia	State	Zip Code (Plus 4)		3	6	2024				
	PA	19120								
Full Name of Contributor			МС)	DAY	YEAR				
Miquon Wilson										
Mailing Address 319 W Champlost A	ve						\$	20.00		
City Philadelphia	State	Zip Code (Plus 4)		3	20	2024				
	PA									

							FAGL 5
Full Name of Con	tributor						
Miquon Wilson				МО	DAY	YEAR	
Mailing Address	319 W Champlost A	Ave					\$ 20.00
City Philadelp	hia	State	Zip Code (Plus 4)	4	3	2024	
		PA	19120				
Full Name of Con Claudia Johnson				мо	DAY	YEAR	
Mailing Address	511 S 48th St						\$ 20.00
City Philadelp	shia	State	Zip Code (Plus 4)	3	6	2024	
Timadeip	mia	PA	19143				
Full Name of Con Claudia Johnson				мо	DAY	YEAR	
Mailing Address	511 S 48th St						\$ 20.00
City Philadelp	hia	State	Zip Code (Plus 4)	3	20	2024	
	····	PA	19143				
Full Name of Con Claudia Johnson				мо	DAY	YEAR	
				МО	DAY	YEAR	\$ 20.00
Claudia Johnson Mailing Address	511 S 48th St	State	Zip Code (Plus 4)	MO	DAY 3	YEAR 2024	\$ 20.00
Claudia Johnson Mailing Address	511 S 48th St	State PA	Zip Code (Plus 4) 19143				\$ 20.00
Claudia Johnson Mailing Address	511 S 48th St						\$ 20.00
Claudia Johnson Mailing Address City Philadelp Full Name of Con	511 S 48th St			4	DAY	2024 YEAR	\$ 20.00 \$ 20.00
Claudia Johnson Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address	511 S 48th St white the state of the state			4	3	2024	
Claudia Johnson Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address	511 S 48th St white the state of the state	PA	19143	мо	DAY	2024 YEAR	
Claudia Johnson Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address	511 S 48th St shia atributor 4526 Millett St	PA State	19143 Zip Code (Plus 4)	мо	DAY	2024 YEAR	
Claudia Johnson Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address City Philadelp Full Name of Con	511 S 48th St shia atributor 4526 Millett St	PA State	19143 Zip Code (Plus 4)	MO	DAY 6	2024 YEAR 2024	
Claudia Johnson Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address	511 S 48th St Shia Stributor 4526 Millett St Shia 4526 Millett St	PA State	19143 Zip Code (Plus 4)	MO	DAY 6	2024 YEAR 2024	\$ 20.00
Claudia Johnson Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address City Philadelp Full Name of Con Deborah Gore Mailing Address	511 S 48th St Shia Stributor 4526 Millett St Shia 4526 Millett St	State PA	19143 Zip Code (Plus 4) 19136	мо мо	3 DAY 6	2024 YEAR 2024	\$ 20.00

						17.62 0
Full Name of Contributor				DAY	VEAD	
Deborah Gore			МО	DAY	YEAR	
Mailing Address 4526 Mill	ett St					\$ 20.00
City Philadelphia	State	Zip Code (Plus 4)	4	3	2024	
i imade.piila	PA	19136				
Full Name of Contributor Hamilton Marshmond			МО	DAY	YEAR	
Mailing Address 4416 Car	withian Rd					\$ 20.00
City Philadelphia	State	Zip Code (Plus 4)	3	6	2024	
rimacipila	PA	19136				
Full Name of Contributor Hamilton Marshmond			МО	DAY	YEAR	
Mailing Address 4416 Car	withian Rd					\$ 20.00
City Philadelphia	State	Zip Code (Plus 4)	3	20	2024	
	PA	19136				
Full Name of Contributor Hamilton Marshmond			МО	DAY	YEAR	
Mailing Address 4416 Car	withian Rd					\$ 20.00
City Philadelphia	State	Zip Code (Plus 4)	4	3	2024	
	PA	19136				
Full Name of Contributor Dawn Thomas			МО	DAY	YEAR	
Mailing Address 7724 Wo	odlawn Ave					\$ 20.00
City Elkins Park	State	Zip Code (Plus 4)	3	6	2024	
	PA	19027				
Full Name of Contributor Dawn Thomas			МО	DAY	YEAR	
Mailing Address 7724 Wo	odlawn Ave					\$ 20.00
City Elkins Park	State	Zip Code (Plus 4)	3	20	2024	
	PA	19027				
	1	ı	1	I	ı	

							FAGL /
Full Name of C	Contributor					l	
Dawn Thomas	5			МО	DAY	YEAR	
Mailing Addres	ss 7724 Wood	dlawn Ave					\$ 20.00
City Elkins	Park	State	Zip Code (Plus 4)	4	3	2024	
		PA	19027				
Full Name of C				МО	DAY	YEAR	
Mailing Addres	ss 440 Railroa	ad Ave					\$ 20.00
City Amble	r	State	Zip Code (Plus 4)	3	6	2024	
, while		PA	19002				
Full Name of C		·	·	МО	DAY	YEAR	
Mailing Addres	ss 440 Railroa	ad Ave					\$ 20.00
City Amble	r	State	Zip Code (Plus 4)	3	20	2024	
		PA	19002				
Full Name of C				МО	DAY	YEAR	
Mailing Addres	ss 440 Railroa	ad Ave					\$ 20.00
City Amble	r	State	Zip Code (Plus 4)	4	3	2024	
		PA	19002				
Full Name of C				МО	DAY	YEAR	
Mailing Addres	ss 407 W Dur	ham St					\$ 100.00
City Philade	elphia	State	Zip Code (Plus 4)	4	3	2024	
	•	PA	19119				
Full Name of C				МО	DAY	YEAR	
					1		
Mailing Addres	ss 5400 Wissa	ahickon Ave Unit 2					\$ 20.00
	3400 W1336	ahickon Ave Unit 2 State	Zip Code (Plus 4)	3	6	2024	\$ 20.00
	3400 W1336		Zip Code (Plus 4) 19144	3	6	2024	\$ 20.00

							PAGE	
Full Name of Contril	butor							
Frank Emblen IV				МО	DAY	YEAR		
Mailing Address	5400 Wissahickon A	Ave Unit 2					\$	20.00
City Philadelphia	<u> </u>	State	Zip Code (Plus 4)	3	20	2024		
, imageipine	•	PA	19144					
Full Name of Contril	butor			МО	DAY	YEAR		
Frank Emblen IV								
Mailing Address	5400 Wissahickon A	Ave Unit 2					\$	20.00
City Philadelphia		State	Zip Code (Plus 4)	4	3	2024		
		PA	19144					
Full Name of Contril Malcolm McCoy	butor			МО	DAY	YEAR		
Mailing Address	1624 N 29th ST						\$	20.00
City Philadelphia	<u> </u>	State	Zip Code (Plus 4)	3	6	2024		
·		PA	19121					
Full Name of Contril Malcolm McCoy	butor			МО	DAY	YEAR		
	butor 1624 N 29th ST			МО	DAY	YEAR	\$	20.00
Malcolm McCoy Mailing Address	1624 N 29th ST	State	Zip Code (Plus 4)	MO	DAY 20	YEAR 2024	\$	20.00
Mailing Address	1624 N 29th ST	State PA	Zip Code (Plus 4) 19121				\$	20.00
Malcolm McCoy Mailing Address	1624 N 29th ST				20		\$	20.00
Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril	1624 N 29th ST			3	20 DAY	2024 YEAR	\$	20.00
Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Malcolm McCoy Mailing Address	1624 N 29th ST butor 1624 N 29th ST			3	20	2024		
Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Malcolm McCoy Mailing Address	1624 N 29th ST butor 1624 N 29th ST	РА	19121	мо	20 DAY	2024 YEAR		
Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Malcolm McCoy Mailing Address	1624 N 29th ST butor 1624 N 29th ST	PA	19121 Zip Code (Plus 4)	мо	20 DAY	2024 YEAR		
Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril	1624 N 29th ST butor 1624 N 29th ST	State PA	19121 Zip Code (Plus 4)	MO 4	20 DAY 3	2024 YEAR 2024		
Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Jeffrey Bascomb Mailing Address	1624 N 29th ST butor 1624 N 29th ST a butor 31202 Delaire Land	State PA	19121 Zip Code (Plus 4)	MO 4	20 DAY 3	2024 YEAR 2024	\$	20.00
Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Malcolm McCoy Mailing Address City Philadelphia Full Name of Contril Jeffrey Bascomb Mailing Address	1624 N 29th ST butor 1624 N 29th ST a butor 31202 Delaire Land	State PA	19121 Zip Code (Plus 4) 19121	мо 4	20 DAY 3	2024 YEAR 2024	\$	20.00

								1,102 9
Full Na	ame of Contributo	or						
Jeffrey	/ Bascomb				МО	DAY	YEAR	
Mailin	g Address 31							
Mailin	31	202 Delaire Land	ing Rd					\$ 20.00
City	Philadelphia		State	Zip Code (Plus 4)	3	20	2024	
_	Filliadeipilla		PA	19114				
Full Na	ame of Contributo	or			МО	DAY	YEAR	
Jeffrey	/ Bascomb				МО	DAT	TEAR	
Mailin	g Address 31	202 Delaire Land	ing Pd					
	- 31.	202 Delaire Lariu	ilig Ku			_		\$ 20.00
City	Philadelphia		State	Zip Code (Plus 4)	4	3	2024	
	·		PA	19114				
	ame of Contributo	or			МО	DAY	YEAR	
Hayde	n McKinstry							
Mailin	g Address 35	39 Carey Rd						± 20.00
		, 	.		3	6	2024	\$ 20.00
City	Philadelphia		State	Zip Code (Plus 4)]	0	2024	
			PA	19154				
			ı					<u> </u>
	ame of Contributo n McKinstry	or			мо	DAY	YEAR	
Tiayue	in McKinstry							
Mailin	g Address 35	39 Carey Rd						\$ 20.00
6:1			State	Zip Code (Plus 4)	3	20	2024	
City	Philadelphia		PA					
			PA	19154				
Full Na	ame of Contributo	or						
	n McKinstry				МО	DAY	YEAR	
Mailin	g Address 35							
Mailing	35:	39 Carey Rd						\$ 20.00
City	Philadelphia		State	Zip Code (Plus 4)	4	3	2024	
_	Filliadeipilla		PA	19154				
Full Na	ame of Contributo	or			140	DAY	VEAD	
Lymar	ys Rodriguez				МО	DAY	YEAR	
Mailin	g Address 46	12 Doyonos:::: Ct						
	46	12 Devereaux St						\$ 20.00
								1
City	Philadelphia		State	Zip Code (Plus 4)	3	6	2024	
City	Philadelphia		State PA	Zip Code (Plus 4) 19135	3	6	2024	

Full Name of Contributor Lymarys Rodriguez			мо	DAY	YEAR	
Mailing Address 4612 Deve	ereaux St					\$ 20.00
City Philadelphia	State PA	Zip Code (Plus 4) 19135	3	20	2024	
Full Name of Contributor Lymarys Rodriguez			мо	DAY	YEAR	
	ereaux St		MO	DAY 3	YEAR 2024	\$ 20.00

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

PAGE TOTAL
\$ 835.00

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		Α	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 Repo		orting Pe	riod					
			Fron	n:		То	:	
				D	ATE		A	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address						\$	0.00	
City	State	Zip Code (Plus	5 4)					
Employer Name				Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Cod	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary 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 Candidate	Reporting Period					
FRATERNAL ORDER OF POLICE LODGE 5	From:	3/5/2024 To:	<u>4/8/2024</u>			

			D	ATE		AMOUNT	
Full Name Philadelphia Federal Credit Union	1		МО	DAY	YEAR		
Mailing Address 12800 Townsend Rd		3	31	2024	\$ 27.	81	
City Philadelphia	State PA	Zip Code (Plus 4) 19154	3	31	2024		
Receipt Description Interest							

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

PAGE TOTAL \$ 27.81

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					
FRATERNAL ORDER OF POLICE LODGE 5	From:	3/5/2024 To:	<u>4/8/2024</u>			
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 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

Name of Filing Committee or Candidate			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	те Г		PAGE TOTAL	
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	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 Cit	ty	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-K	Cind C	Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
FRATERNAL ORDER OF POLICE LODGE 5			From	From <u>3/5/2024</u> To:			4/8/2024	
				DATE			AMOUNT	
To Whom Paid FRIENDS OF PAT GALLAGHER			МО	DAY	YEAR			
Mailing Address PO BOX 6093			3	5	2024	\$	1,000.00	
City PHILADELPHIA	IA State Zip Code (Plus 4) PA 19114			Description of Expenditure DONATION				
To Whom Paid OML FOR PHL			МО	DAY	YEAR			
Mailing Address 2008 CHESTN	UT ST		3	5	2024	\$	1,000.00	
City PHILADELPHIA	State PA	,			Description of Expenditure DONATION			
To Whom Paid PEOPLE FOR PARKER			МО	DAY	YEAR			
Mailing Address PO BOX 2764	7		3	11	2024	\$	2,500.00	
City PHILADELPHIA State Zip Code (Plus 4) PA 19118			Descrip DONAT	otion of Exp	penditure			
To Whom Paid			МО	DAY	YEAR			

Zip Code (Plus 4)

19118

3

DONATION

26

Description of Expenditure

2024

NINA FOR PHILLY

Mailing Address

PHILADELPHIA

City

PO BOX 27339

State

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PΑ

5/4/2024	11.21.2	72 AM

1,000.00

5,500.00

PAGE TOTAL