

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 : 20200106		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: Friends of Parker								
Street Address: 7715 Crittenden St, Ste #390								
City: Philadelphia				State: PA		Zip Code: 19118		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO DAY YEAR			198	STH
				11 5 2024			DEM 51	
							(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		FOR OFFICE USE ONLY	
		1	1	2024	4 8 2024			
A. Amount Brought Forward From Last Report				\$ 21,360.62				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 625.00				
C. Total Funds Available (Sum Of Lines A and B)				\$ 21,985.62				
D. Total Expenditures (From Schedule III)				\$ 4,956.96				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 17,028.66				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 0.00				

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
Friends of Parker	From: <u>1/1/2024</u> To: <u>4/8/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 75.00

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)	\$ 550.00
TOTAL for the Reporting Period (2)	\$ 550.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 625.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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 Friends of Parker	Reporting Period From: <u>1/1/2024</u> To: <u>4/8/2024</u>
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DATE	AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
Devon Allen						
Mailing Address			1	19	2024	
7318 Hiola Rd						
City	Philadelphia	State				
		PA				
		Zip Code (Plus 4)				
		191281413				

Full Name of Contributor Sherri Irvis-Hill			MO	DAY	YEAR	\$ 100.00
Mailing Address 5859 Overbrook Ave			1	21	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191311220				

Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
Leguyen Vu						
Mailing Address 4858 D St			1	29	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191204330				

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

PAGE TOTAL
\$ 550.00

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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:
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			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	
Friends of Parker		From: <u>1/1/2024</u> To: <u>4/8/2024</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 RECIEVED - 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:
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			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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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
Friends of Parker	From <u>1/1/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT		
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 6.00
Mailing Address PO Box 441146			2	5	2024	
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure Fee			
To Whom Paid Citizen's Bank			MO	DAY	YEAR	\$ 10.00
Mailing Address PO Box 7000			1	29	2024	
City Providence	State RI	Zip Code (Plus 4) 029407000	Description of Expenditure Fee			
To Whom Paid Commonwealth of PA			MO	DAY	YEAR	\$ 100.00
Mailing Address 210 North Ofc BLDG			1	29	2024	
City Harrisburg	State PA	Zip Code (Plus 4) 171011124	Description of Expenditure Petition Filing			
To Whom Paid Intuit Quickbooks			MO	DAY	YEAR	\$ 10.78
Mailing Address 2700 Coast Ave			1	24	2024	
City Mountain View	State CA	Zip Code (Plus 4) 940431140	Description of Expenditure Software			
To Whom Paid Intuit Quickbooks			MO	DAY	YEAR	\$ 64.80
Mailing Address 2700 Coast Ave			1	25	2024	
City Mountain View	State CA	Zip Code (Plus 4) 940431140	Description of Expenditure Software			

To Whom Paid Intuit Quickbooks			MO	DAY	YEAR	\$ 63.60
Mailing Address 2700 Coast Ave			2	26	2024	
City Mountain View	State CA	Zip Code (Plus 4) 940431140	Description of Expenditure Software			

To Whom Paid Intuit Quickbooks			MO	DAY	YEAR	\$ 63.60
Mailing Address 2700 Coast Ave			3	25	2024	
City Mountain View	State CA	Zip Code (Plus 4) 940431140	Description of Expenditure Software			

To Whom Paid Angela Jenkins			MO	DAY	YEAR	\$ 750.00
Mailing Address 7808 Winston Rd			1	2	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191183533	Description of Expenditure Finance Director			

To Whom Paid Angela Jenkins			MO	DAY	YEAR	\$ 500.00
Mailing Address 7808 Winston Rd			1	29	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191183533	Description of Expenditure Reimbursement			

To Whom Paid Angela Jenkins			MO	DAY	YEAR	\$ 750.00
Mailing Address 7808 Winston Rd			2	5	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191183533	Description of Expenditure Finance Director			

To Whom Paid Angela Jenkins			MO	DAY	YEAR	\$ 750.00
Mailing Address 7808 Winston Rd			3	4	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191183533	Description of Expenditure Finance Director			

To Whom Paid Angela Jenkins			MO	DAY	YEAR	\$ 750.00
Mailing Address 7808 Winston Rd			4	4	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191183533	Description of Expenditure Finance Director			

To Whom Paid K. Montes Art KM8			MO	DAY	YEAR	\$ 200.00
Mailing Address 4542 Fernhill Rd			2	7	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191444223	Description of Expenditure Expenditure			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 810.00
Mailing Address 1101 15th St NW Ste 500			2	20	2024	
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure Quarterly payment			

To Whom Paid Quinn Center			MO	DAY	YEAR	\$ 100.00
Mailing Address 5537 Germantown Ave			3	20	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191442225	Description of Expenditure Donation			

To Whom Paid Staples			MO	DAY	YEAR	\$ 18.35
Mailing Address 1500 Chestnut St			1	30	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191022737	Description of Expenditure Supplies			

To Whom Paid Vantiv eCommerce			MO	DAY	YEAR	\$ 9.33
Mailing Address 8500 Governors Hill Dr			2	9	2024	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Fee			

To Whom Paid Vantiv eCommerce			MO	DAY	YEAR	
Mailing Address 8500 Governors Hill Dr			3	11	2024	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Fee			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 4,956.96

