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 :	ion 202	00026			Repor Filed		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST		
	Committee, Candi	date or L	obbyist:			-	N FOR 190)								
Street Address:	3519 W ALL	EGHENY	AVENUE													
City:	PHILADELPH	IA					State:	PA			Zip Co	Zip Code: 19132				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2. X	30 D PRIM	I IARY I	POST- 3.			AMENDMENT REPORT?		Yes	N	D	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	ay pre	- 5.	30 D ELEC	DAY I CTION	POST- 6.		TERMINATION REPORT?		Yes	N	D	\checkmark	
report type)	ANNUAL REPOR	T 7.	Year 2024	1			NG METH				PAPER	\checkmark	DISK	TTE		
Name of Office S	⊥ Sought by Candid	ate:					DATE O	FELE	СТІС	N	District Number	Office Code	Par	ty Code	Cour	
DEDDECENTATI	IVE IN THE GENE						мо	DAY	YI	EAR	190	STH	DEN	1	51	
REPRESENTATI	IVE IN THE GENE	KAL ASS					11		5	2024		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1 :	1 2	024	0	4		8	2024						
A. Amount Brought Forward From Last Report \$								3,	553.85							
B. Total Monetary Contributions And Receipts (From Schedule						5	\$		19,8	870.00						
C. Total Funds Available (Sum Of Lines A and B)						5	\$		23,4	423.85						
D. Total Expen	ditures (From Sc	hedule II	11)			5	\$		2,0	066.94						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$		21,3	856.91	-					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	Schedu	le II)	5	\$			0.00	-					
G. Unpaid Deb	ts And Obligation	s (From S	Schedule I	V)		5	\$			0.00		,				
				AFF	IDAV	IT SI	ECTION									
	s a Committee re	•	-							-	-					
I swear (or affirm correct and compl) that this report, in ete.	cluding th	e attached so	chedule	s filed or	рареі	r or by elect	ronic m	edium	, are to i	the best o	f my knov	vledge	and bel	ief , tr	ue,
Sworn to and subs	cribed before me th day of	iis	20						5	Signature	e of Perso	n Submitt	ing Rep	oort		_
	Signat	ure				_					Prin	ted Name				-
My Commission E	xpires					_					Ema	il				_
	мо	D	AY	YR				Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		
	a report of a car that to the best of ed.							-		ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subso	cribed before me thi	s								s	ignature o	of Candida	ite			-
	day of										Printe	ed Name				-
	Signature	•				_										_
My Commission Exp	bires										Ema	ul				
MO DAY YR						_		Area	Code		D	aytime Te	elephon	e Numl	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period RONI GREEN FOR 190** From: <u>1/1/2024</u> **To:** 4/8/2024 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 100.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 500.00 **Contributions Received From Political Committees (Part A)** 620.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 1,120.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 17,150.00 1,500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 18,650.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 19,870.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candida	te		Re	eporting I	Period		
RONI GREEN FOR 190			Fre	om:	<u>1/1/20</u>	0 <u>24</u> To	<u>4/8/2024</u>
					DATE	AMOUNT	
Full Name of Contributing Committee STREET, SHARIF FRIENDS OF				мо	DAY	YEAR	
Mailing Address 658 N 63RD ST PO BOX 28854							\$ 250.00
City PHILADELPHIA	State PA	Zip Code (Plus	4)	4	5	2024	
Full Name of Contributing Committee				мо	DAY	YEAR	
Mailing Address PO BOX 22							\$ 250.00
City SWARTHMORE	State PA	Zip Code (Plus	4)	3	20	2024	
		•					PAGE TOTAL
nter Grand Total of Part A on Schedule I, Detailed Summary Page, Sect				on 2.			\$ 500.00

Use this Part	\$5 to itemize all o \$50.01 to \$2	PART B R CONTRIE 50.01 TO \$250.00 ther contribution 50.00 in the repo om political comm	s with an orting per	aggreg iod.			rom
Name of Filing Committee or C	andidate		Reporting P	eriod			
RONI GREEN FOR 190			From:	<u>1/1/</u>):	<u>4/8/2024</u>	
DATE							AMOUNT
Full Name of Contributor Stanley Carn III			мо	DAY	YEAR		
Mailing Address 1931 N. Myrtlewood St City Philadelphia State Zip Code (Plus 4) PA 19121				5	2024	\$	220.00
Full Name of Contributor Douglas Anthony Perry			мо	DAY	YEAR		
Mailing Address 2001 W. Ma	yfield St					\$	200.00
City Philadelphia	State PA	Zip Code (Plus 4) 19132	4	5	2024		
Full Name of Contributor Charles Burke, Jr			мо	DAY	YEAR		
Mailing Address 551 W Abbo City Philadelphia	ttsford Rd State PA	Zip Code (Plus 4) 19144	4	5	2024	\$	100.00
Full Name of Contributor Gregory Penn	I		мо	DAY	YEAR		
Mailing Address 2606 W. Ox	ford St					\$	100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19121	3	30	2024		
Enter Grand Total of Part	A on Cohodula T					 	PAGE TOTAL 620.00

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			
RONI GREEN FOR 190			From:	<u>1/</u>	<u>1/2024</u>	То:	<u>4/8/2024</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee LOCAL 0032BJ PA AMERICAN DREAM FU	JND			мо	DAY	YEAR	
Mailing Address 25 WEST 18TH ST							\$ 3,000.00
City NEW YORK	State NY	Zip Code 10011	e (Plus 4)	2	27	2024	
Full Name of Contributing Committee REPRESENT! PAC				мо	DAY	YEAR	
Mailing Address 1735 MARKET ST, ST	E 125, #480 State PA	Zip Code 19103	e (Plus 4)	4	5	2024	\$ 1,000.00
Full Name of Contributing Committee BRENNAN, TIM FRIENDS OF				мо	DAY	YEAR	
Mailing Address 102 SHEWELL AVE City DOYLESTOWN	State PA	Zip Code 18901	e (Plus 4)	4	5	2024	\$ 500.00
Full Name of Contributing Committee Philly's Voice PAC				мо	DAY	YEAR	
Mailing Address 201 Chesnut St. Unit City Philadelphia	402 State PA	Zip Code 19106	e (Plus 4)	4	5	2024	\$ 1,000.00
Full Name of Contributing Committee FRIENDS OF TARIK KHAN				мо	DAY	YEAR	
Mailing Address 261 LEMONTE STREE	State PA	Zip Code 19128-4	e (Plus 4) 4519	4	5	2024	\$ 300.00

Full Name of Contributing Comm SCHLOSSBERG, MIKE FRIENDS			мо	DAY	YEAR		
Mailing Address 1620 POND F	RD, STE 200					\$	500.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104-2255	3	5	2024		
Full Name of Contributing Comm MCCLINTON, JOANNA FRIENDS			мо	DAY	YEAR		
Mailing Address PO BOX 1666	3	20	2024	\$	500.00		
Full Name of Contributing Committee DAVIS, TINA FRIENDS OF				DAY	YEAR		
Mailing Address 505 GRANT A	AVE State PA	Zip Code (Plus 4) 19021	3	20	2024	\$	350.00
Full Name of Contributing Comm PA SEIU COPE (SOC SVCS)	ittee		мо	DAY	YEAR		
Mailing Address 1500 N 2ND ST STE 11 City HARRISBURG State Zip Code (Plus 4)			3	5	2024	\$	10,000.00
	PA 17102-2527						PAGE TOTAL
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						\$	17,150.00

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	me of Filing Committee or Candidate				Reporting Period				
RONI GREEN FOR 190			From	n:	<u>1/1/2</u>	<u>024</u> То	b: <u>4/8/2024</u>		
				DA	TE		AMOUNT		
Full Name of Contributor Lisa Solomon				мо	DAY	YEAR			
Mailing 2123 Parkwyn Rd Address State Zip Code (Plus 4)							\$ 1,500.00		
City Philadelphia	State PA	Zip Code (Plus	; 4)	3	26	2024			
Employer Name Pitney Bowes				Occupation Director					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)		
2000 Hamilton St		Philadelp	hia		РА		19130		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	immary Page,	Sectio	on 3.			PAGE TOTAL \$ 1,500.00		

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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		Report	ting Perio	bd					
			From:	From: To				:		
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	i	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description				I						
Enter Grand Total of Part E c	n Schedule I. Detailer	l Summary Page	Section	4				PAGE TOT	AL	
	in Schedule I, Detailet	i Summaly Paye,	Section	4.			\$		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		
RONI GREEN FOR 190	From:	<u>1/1/2024</u> 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	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate			Reporting Period				
			From:			То:	
				DATE		AMOU	INT
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 Schedule II, In-Kind Contributions Detailed Su Section 2.				mary Pag	je,	PAGE 1	TOTAL
					4	i	0.00

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	Period			
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State	te Zip Code(Plus 4)								
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In	n-Kind	Contributio	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
RONI GREEN FOR 190			From	<u>1/</u>	<u>1/2024</u>	То:	<u>4/8/2024</u>	
				DATE			AMOUNT	
To Whom Paid Keith Harris			мо	DAY	YEAR			
Mailing Address 13 N 62nd St			2	2	2024	\$	1,500.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Descrip Canvas	otion of Exp sing	penditure	3		
To Whom Paid Commonwealth of PA			мо	DAY	YEAR			
Mailing Address 500 North Office Bu	ilding		2	5	2024	\$	100.00	
City HarrisburgStateZip Code (Plus 4)PA17120				Description of Expenditure Filing Fee				
To Whom Paid Fine Wine and Good Spirits			мо	DAY	YEAR			
Mailing Address 3413 Fox Street			4	4	2024	\$	288.84	
City Philadelphia	State PA	Zip Code (Plus 4) 19129	Description of Expenditure Event catering					
To Whom Paid North Penn Beverage			мо	DAY	YEAR			
Mailing Address 2241 W Clearfield S	t		4	5	2024	\$	132.01	
CityPhiladelphiaStateZip Code (Plus 4)PA19132				otion of Exp	penditure	3		
To Whom Paid Dollar Plus			мо	DAY	YEAR			
Mailing Address 6928 Elmwood Ave			4	8	2024	\$	26.09	
City Philadelphia State Zip Code (Plus 4) PA 19142				Description of Expenditure Event catering				

To Who r TD Bank				мо	DAY	YEAR		
Mailing	Address 1701 Marlton Pike	E, Sutie 200		3	26	2024	\$	20.00
City	City Cherry Hill State Zip Code (Plus 4) Description of Expenditure PA 08003 Returned Check Fee							
Enter G	Grand Total of Expenditures	\$	PAGE TOTAL 2,066.94					
							L	