

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 : 20120111		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: NEILSON FOR THE NORTHEAST											
Street Address: PO BOX 6054											
City: PHILADELPHIA					State: PA		Zip Code: 19114				
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. X	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.	Year 2024	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	174	STH	DEM	51
					11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		4	9	2024			5	13	2024		
A. Amount Brought Forward From Last Report					\$		102,179.70				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		9,500.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		111,679.70				
D. Total Expenditures (From Schedule III)					\$		18,102.24				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		93,577.46				
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
NEILSON FOR THE NORTHEAST	From: <u>4/9/2024</u> To: <u>5/13/2024</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 Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 6,000.00
All Other Contributions (Part D)	\$ 3,500.00
TOTAL for the Reporting Period (3)	\$ 9,500.00

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.)	\$ 9,500.00
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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
NEILSON FOR THE NORTHEAST	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
ARCHER PENNSYLVANIA PAC				5	2	2024	
Mailing Address 1007 N FRONT ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 171023320					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
IATSE LOCAL 8 PAC				4	18	2024	
Mailing Address 2401 S SWANSON ST							
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191484113					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
LOCAL UNION 712 IBEW COPE				4	18	2024	
Mailing Address 217 SASSAFRAS ALY							
City BEAVER	State PA	Zip Code (Plus 4) 150091709					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 2,500.00
MALADY & WOOTEN PAC				4	18	2024	
Mailing Address 604 N 3RD ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 171011114					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA HORSEBREEDER'S ASSOCIATION INC.				4	29	2024	
Mailing Address 701 E BALTIMORE PIKE STE E							
City KENNETT SQUARE	State PA	Zip Code (Plus 4) 193482400					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
RAMPAR ASSOCIATES				4	18	2024	
Mailing Address 735 BIRCH AVE							
City BENSALEM	State PA	Zip Code (Plus 4) 190207207					

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

PAGE TOTAL

\$ 6,000.00

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 NEILSON FOR THE NORTHEAST	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor LICENSE PLATES OF TEXAS, LLC				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 7301 N FM 620 RD #155-185				4	18	2024	
City AUSTIN	State TX	Zip Code (Plus 4) 787264539					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor ROBERT S TAYLOR				MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 6349				4	18	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171120349					
Employer Name SELF				Occupation LOBBYIST			
Employer Mailing Address/Principal Place of Business PO BOX 6349			City HARRISBURG		State PA	Zip Code (Plus 4) 171120349	

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

PAGE TOTAL \$ 3,500.00

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	
NEILSON FOR THE NORTHEAST		From: <u>4/9/2024</u> To: <u>5/13/2024</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:

				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
NEILSON FOR THE NORTHEAST	From <u>4/9/2024</u> To: <u>5/13/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
CHASE CARD SERVICES VISA				
Mailing Address PO BOX 15153	5	3	2024	\$ 2,127.24
City WILMINGTON	State DE	Zip Code (Plus 4) 198865153	Description of Expenditure CAMPAIGN EXPENSES	
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF 56 WARD DEMOCRATIC COMMITTEE				
Mailing Address 7408 RISING SUN AVE	4	14	2024	\$ 1,500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191113635	Description of Expenditure EDAY	
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF NATE DAVIDSON				
Mailing Address PO BOX 5447	4	14	2024	\$ 1,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 171100447	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF THE 57TH WARD				
Mailing Address 9217 ANDOVER RD	4	14	2024	\$ 1,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191143818	Description of Expenditure EDAY	
To Whom Paid	MO	DAY	YEAR	
GK4 FOUNDATION				
Mailing Address 141 DIMARCO DR	4	19	2024	\$ 500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191544301	Description of Expenditure WALK 2024	
To Whom Paid	MO	DAY	YEAR	
PATRICK HASSON HASSON				
Mailing Address REQUESTED INFORMATION	5	3	2024	\$ 600.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154	Description of Expenditure EDAY	

To Whom Paid IBEW LOCAL 269			MO	DAY	YEAR	\$ 550.00
Mailing Address 670 WHITEHEAD RD			5	3	2024	
City LAWRENCE TOWNSHIP	State NJ	Zip Code (Plus 4) 086484440	Description of Expenditure AD BOOK DONATION			

To Whom Paid MCKAY SERVICES			MO	DAY	YEAR	\$ 1,600.00
Mailing Address 3312 CHALFONT DR			5	3	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154	Description of Expenditure EDAY OPERATIONS			

To Whom Paid NFC			MO	DAY	YEAR	\$ 6,500.00
Mailing Address PO BOX 6054			4	28	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191140654	Description of Expenditure PRIMARY DONATION			

To Whom Paid PARKWOOD SOFT PRETZEL FACTORY			MO	DAY	YEAR	\$ 712.50
Mailing Address 12363 ACADEMY RD			4	23	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191541927	Description of Expenditure E DAY			

To Whom Paid PARKWOOD SOFT PRETZEL FACTORY			MO	DAY	YEAR	\$ 712.50
Mailing Address 12363 ACADEMY RD			4	23	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191541927	Description of Expenditure E DAY			

To Whom Paid PSLC LLC			MO	DAY	YEAR	\$ 1,300.00
Mailing Address 601 FRANKLIN MILLS CIR			4	14	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191543124	Description of Expenditure CONSULT			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 18,102.24

