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 202	220323			Report		CANDI	ANDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Cand	idate or L	obbyist:	F	RIEND	S OF	JOSE GII	RAL							
Street Address:															
City:	PHILADELPH -	IIA					State:	PA			Zip Cod	de: 19	9120		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	RE-	2.	30 DA		POST-	3. X		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPOR	T 7.	Year 2024				NG METHO				PAPER		/	DISKE	ΓΤΕ
Name of Office S	- Sought by Candic	late:			-		DATE 0	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
REDRESENIT∆TI	VE IN THE GEN	ΕΡΔΙ ΔΟΟ	EMBI Y				МО	DAY	YE	AR	180	STH	DEM	1	51
KEIKESENIAII	VE IN THE OEM		EMBET				11		5	2024		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY YEA	AR			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
Expenditures	s trom:		4 9	20	24 T	0	5	,	13	2024					
A. Amount Bro	ught Forward Fr	om Last R	eport			\$			10,4	122.05					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 23,325.00															
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			33,7	47.05					
D. Total Expend	ditures (From So	hedule II	I)			\$			1,6	00.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			\$			32,1	47.05					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Sched	lule	II)	\$				0.00					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00					
			AF	FI	DAVI	T SE	CTION								
PART I - If this is	s a Committee re	port, trea	surer sign here	. If	this is	a Car	ndidate re	eport, o	candio	date sig	jn here.				
I swear (or affirm) correct and comple		cluding the	e attached schedu	les f	filed on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me to day of	nis	20						s	ignature	of Perso	n Submit	ting Rep	ort	
	Signa	ture				- -					Prin	ted Name	e		
My Commission Ex	cpires					_					Ema	il			
	МО	D	AY Y	'R				Are	ea Cod	e	Daytim	e Teleph	one Nu	mber	•
Part II- If this is	a report of a ca	ndidate's	authorized Com	ımi	ttee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende		my knowl	edge and belief th	is p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc		is								s	ignature (of Candid	ate		
	day of 					_					Printe	ed Name			
	Signatur	e				-									
My Commission Exp	ires										Ema	il			
	МО	D	AY Y	/R		-		Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JOSE GIRAL	From:	4/9/202	<u>4</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)			\$	2,325.00
TOTAL for the Reporting) Period	(2)	\$	2,325.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,000.00
All Other Contributions (Part D)			\$	18,000.00
TOTAL for the Reporting) Period	(3)	\$	21,000.00
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			\$	23,325.00

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 Candidat	Name of Filing Committee or Candidate		Reporting Period						
		F	rom:		To	I			
		•		DATE			AMOUNT		
Full Name of Contributing Committee			МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

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

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)

Nar	ne of Filing Committee or Candida	ite		Rep	oorting P	eriod				
FRI	ENDS OF JOSE GIRAL			Fro	m:	4/9/	2024 T o):	<u>5/13/2024</u>	
				ı		DATE			AMOUNT	
Full N	ame of Contributor				мо	DAY	YEAR			
ANDR	EA GONZALEZ KIRWIN				1-10	DAI	ILAK			
Mailin	ng Address							\$	200.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024			
		PA	19130							
Full N	ame of Contributor				мо	DAY	YEAR			
BIG A	APPLIANCES LLC				1-10	DAI	ILAK			
Mailin	ng Address							\$	250.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	25	2024			
		PA	19124							
Full N	ame of Contributor				мо	DAY	YEAR			
CASI	NO WHITE									
Mailin	ng Address		T					\$	50.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024			
		PA	19146							
Full N	ame of Contributor				мо	DAY	YEAR			
CESA	R GALVIS									
Mailin	ng Address	_						\$	250.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024			
		PA	19115							
Full N	ame of Contributor				мо	DAY	YEAR			
DANI	EL MUROFF				1-10	DAI	ILAK			
Mailin	ng Address							\$	100.00	
City	MEDIA	State	Zip Code (Plus 4)	4	30	2024			
		PA	19063							
Full N	ame of Contributor				мо	DAY	YEAR			
GERM	IAN R VEGA				МО	DAT	TEAR			
Mailin	ng Address							\$	250.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	29	2024			
		PA	19133							
Full N	ame of Contributor				мо	DAY	YEAR			
HECT	OR SERRANO				1-10	DAI	ILAK			
Mailin	ng Address							\$	250.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	29	2024			
		PA	19140							

							TAGE 5
Full N	ame of Contributor			МО	DAY	YEAR	
JENN:	IFER L ALBANDOZ			1410	DAI	ILAK	
Mailin	g Address						\$ 150.0
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024	
		PA	19115				
Full N	ame of Contributor			мо	DAY	YEAR	
JOLAI	NDA TORRES			1-10	DAI	ILAK	
Mailin	ıg Address						\$ 25.0
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024	
		PA	19137				
Full Name of Contributor					DAY	YEAR	
NEFTALI LEONARDO							
Mailin	niling Address]			\$ 250.0
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024	
		PA	19140				
Full N	ame of Contributor			МО	DAY	YEAR	
RAYM	OND A YABOR						
Mailin	g Address]			\$ 100.0
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024	
		PA	19114				
Full N	ame of Contributor			МО	DAY	YEAR	
WILL	IAM J HEENEY						
Mailin	g Address	_]			\$ 200.0
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	30	2024	
		PA	19105				
Full N	ame of Contributor			МО	DAY	YEAR	
YRIS XIOMARA CONTRERAS				MO	DAY	TEAK	
Mailing Address							\$ 250.0
	PHILADELPHIA	State	Zip Code (Plus 4)	4	29	2024	
City	PHILADELPHIA	State	Zip Code (Plus 4)	7	23	2027	
City	PHILADELPHIA	PA	19140		23	2024	

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

PAGE TOTAL \$ 2,325.00

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 Repo			Reporting	Reporting Period				
FRIENDS OF JOSE GIRAL			From:	<u>4/9/2024</u> To:		То:	o: <u>5/13/202</u> 4	
				DA	TE		AMOUN'	Г
Full Name of Contributing Committee				мо	DAY	YEAR		
FRIENDS OF JOANNA MCCLINTON							\$	500.00
Mailing Address				4	15	2024	·	
City PHILADELPHIA	State	Zip Code	e (Plus 4)]		2024		
	PA	19139						
Full Name of Contributing Committee				мо	DAY	YEAR		
GREATER PA CARPENTERS PEC				110	JA.	ILAK	\$	2,500.00
Mailing Address				4	30	2024		,
City PHILADELPHIA	State	Zip Code	e (Plus 4)]	30	2024		
	PA	19130						

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

PAGE TOTAL \$ 3,000.00

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 of Candidate					orting Pei	riod				
FRIENDS OF JOSE GIRAL				Fron	n:	4/9/2	<u>024</u> To	: <u>5/13/2024</u>		<u>3/2024</u>
					DA	ATE		,	TNUOMA	Ī
Full Name of Contributor					мо	DAY	YEAR			
GRAFICOLORS 7 LLC					MO	DAT	TEAR	\$		500.00
Mailing Address					4	30	2024	7		
City PHILADELPHIA	State	Zip	Code (Plus	4)		30	2024			
	PA	19134								
Employer Name					Occupation					
Employer Mailing Address/Principal Place of Business City				State		Zip Co	de (Plus	s 4)		
Full Name of Contributor					мо	DAY	YEAR	Ι.		
JOSE CARLOS LAGE					MO	DAT	TEAR	\$		500.00
Mailing Address						26	2024			
City NORTH WALES	State	Zip	Code (Plus	4)	4	20	2024			
	PA	l ₁₉₄	154							
Employer Name JOSE CARLOS LAGE					Occupat	ion :	SELF EM	1PLOYE	D	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus	s 4)
			NORTH W	ALES		PA		19454	ļ	
Full Name of Contributor		-				,				
KENNETH TRUJILLO					МО	DAY	YEAR	\$		3,000.00
Mailing Address								7		
City PHILADELPHIA	State	Zip	Code (Plus	4)	4	15	2024			
	l _{PA}	191	103	-						
Employer Name KENNETH TRUJILLO					Occupat	ion				
Employer Mailing Address/Principal Place	e of Business		City		· · ·	State		Zip Co	de (Plus	s 4)
, , , , , , , , , , , , , , , , , , ,			PHILADEL	PHIA		PA		19103		•
Full Name of Contributor					мо	DAY	YEAR			
LUIS CRUZ					МО	DAY	YEAK	\$		1,000.00
Mailing Address					4	15	2024	7		
City PHILADELPHIA	State	Zip	Code (Plus	4)		13	2021			
	PA	l ₁₉₁	122							
Employer Name LUIS CRUZ				Occupation						
Employer Mailing Address/Principal Plac	e of Business		City		State Zip Code (Plus			5 4)		
PHILADELPHIA			A PA 19122			2				

Full Name of Contributor				мо	DAY	YEAR	 	500.00
MELISSA MAISONET							ļ [*]	300.00
Mailing Address		_		4	15	2024		
City PHILADELPHIA	State		Code (Plus 4)					
	I PA I	191	125				I	
Employer Name MELISSA MAISONET				Occupat	ion			
Employer Mailing Address/Principal Pla	ce of Business		City		State		Zip Code	(Plus 4)
			PHILADELPHIA		PA		19125	
Full Name of Contributor				мо	DAY	YEAR		1 000 00
SHAHE KUPA				MO	DAI	ILAK	\$	1,000.00
Mailing Address				4	15	2024		
City PHILADELPHIA	State	Zip	Code (Plus 4)	'				
	l _{PA}	191	125					
Employer Name SHAHE KUPA				Occupat	ion			
Employer Mailing Address/Principal Pla	ce of Business		City		State		Zip Code	(Plus 4)
			PHILADELPHIA		PA		19125	
Full Name of Contributor								
TIMOTHY T FARUOL JR				МО	DAY	YEAR	\$	2,000.00
Mailing Address					4.5	2024	1	
City PHILADELPHIA	State	Zip	Code (Plus 4)	4	15	2024		
	_{PA}	191	125					
Employer Name TIMOTHY T FARUOL 3	IR			Occupat	ion			
I			City	•	State		Zip Code	(Plus 4)
			PHILADELPHIA		l _{PA}		19125	
Full Name of Contributor		_			_			
ALFREDO CALDERON				МО	DAY	YEAR	\$	3,000.00
Mailing Address							1	
City PHILADELPHIA	State	Zip	Code (Plus 4)	4	15	2024		
	PA	191						
Employer Name ALFREDO CALDERON				Occupat	ion	•	-	
Employer Mailing Address/Principal Place			City	Тоссирия	State		Zip Code	(Plus 4)
Employer Flaming Address/11mcipal Fla	ce or business		PHILADELPHIA		PA		19125	(1143 4)
			FIIILADELFIIIA		I FA		1912J	
Full Name of Contributor								F00.00
ANTHONY CIANFRANI				МО	DAY	YEAR	\$	500.00
I Malling Aggress				МО	DAY	YEAR	\$	500.00
Mailing Address	Tours T	7:	Code (Dive 4)	MO 4	DAY 15	YEAR 2024	\$	500.00
City PHILADELPHIA	State	•	Code (Plus 4)				\$	500.00
City PHILADELPHIA	PA	Zip 191	,	4	15		\$ -	500.00
City PHILADELPHIA Employer Name ANTHONY CIANFRAN	I PA	•	151		15			
City PHILADELPHIA	I PA	•	City	4	15 ion State		Zip Code	
City PHILADELPHIA Employer Name ANTHONY CIANFRAN	I PA	•	151	4	15			
City PHILADELPHIA Employer Name ANTHONY CIANFRAN	I PA	•	City	4	15 ion State		Zip Code 19151	(Plus 4)
City PHILADELPHIA Employer Name ANTHONY CIANFRANT Employer Mailing Address/Principal Place Full Name of Contributor ANTHONY F. BOYLE	I PA	•	City	4 Occupat	ion State PA	2024	Zip Code	
City PHILADELPHIA Employer Name ANTHONY CIANFRAN Employer Mailing Address/Principal Plan Full Name of Contributor ANTHONY F. BOYLE Mailing Address	PA I ce of Business	191	City PHILADELPHIA	4 Occupat	ion State PA	2024	Zip Code 19151	(Plus 4)
City PHILADELPHIA Employer Name ANTHONY CIANFRANT Employer Mailing Address/Principal Place Full Name of Contributor ANTHONY F. BOYLE	I PA	191	City	Occupat	ion State PA DAY	2024 YEAR	Zip Code 19151	(Plus 4)
City PHILADELPHIA Employer Name ANTHONY CIANFRANT Employer Mailing Address/Principal Place Full Name of Contributor ANTHONY F. BOYLE Mailing Address City PHILADELPHIA	PA I ce of Business	191	City PHILADELPHIA Code (Plus 4)	Occupat	ion State PA DAY	2024 YEAR	Zip Code 19151	(Plus 4)
City PHILADELPHIA Employer Name ANTHONY CIANFRAN Employer Mailing Address/Principal Plan Full Name of Contributor ANTHONY F. BOYLE Mailing Address	PA I ce of Business State	191 Zip	City PHILADELPHIA Code (Plus 4)	Occupat	ion State PA DAY	2024 YEAR	Zip Code 19151	(Plus 4)
City PHILADELPHIA Employer Name ANTHONY CIANFRANT Employer Mailing Address/Principal Place Full Name of Contributor ANTHONY F. BOYLE Mailing Address City PHILADELPHIA	PA II ce of Business State PA	191 Zip	City PHILADELPHIA Code (Plus 4)	Occupate MO 4	ion State PA DAY	2024 YEAR	Zip Code 19151	(Plus 4) 500.00

Full Name of Contributor				МО	DAY	YEAR	\$	500.00
CASEY ODONNELL							-	
Mailing Address	Ta	Τ		4	15	2024		
City HUNTINGDON	State		p Code (Plus 4)					
	I PA	I 19	9006		l	l	I	
Employer Name CASEY ODONNELL			1	Occupat	tion	ı		
Employer Mailing Address/Principal P	lace of Business		City		State		Zip Code	(Plus 4)
			HUNTINGDON		PA		19006	
Full Name of Contributor				МО	DAY	VEAD		
CLARIBEL COLLAZO				МО	DAY	YEAR	 \$	500.00
Mailing Address				4	15	2024	1	
City PHILADELPHIA	State	Zi	p Code (Plus 4)]	13	2024		
	l _{PA}	1 19	9120					
Employer Name CLARIBEL COLLAZO)		· · · · ·	Occupat	tion			
Employer Mailing Address/Principal P			City		State		Zip Code	(Plus 4)
			PHILADELPHIA		PA		19120	(1.1)
			FIIILADELFIIIA	1	FA		19120	
Full Name of Contributor				мо	DAY	YEAR	_{\$}	2,000.00
FREDERICK RAMIREZ							1	2,000.00
Mailing Address	1	-		4	15	2024		
City PHILADELPHIA	State	Zi	p Code (Plus 4)					
	I PA	1 19	9140		l	l	l	
Employer Name FREDERICK RAMIREZ					tion			
Employer Mailing Address/Principal P	lace of Business		City		State		Zip Code	(Plus 4)
			PHILADELPHIA		PA		19140	
Full Name of Contributor			-					
LUIS CRUZ				МО	DAY	YEAR	\$	1,000.00
Mailing Address							1	
City WILLINGBORO	State	Zi	p Code (Plus 4)	4	15	2024		
	l _{NJ}	0.8	3046					
Employer Name LUIS CRUZ	. 113	. 00	30.10	Occupat	tion	-	-	
Employer Mailing Address/Principal P	lace of Rusiness		City	Тоссири	1		7in Code	(Plus 4)
Employer Planning Address/Frincipal Fi	idce of business		1 -				Zip Code (Plus 4)	
			WILLINGBORO	_	NJ		08046	
Full Name of Contributor				мо	DAY	YEAR	\$	500.00
DANIELLE GINOCCHIO							↓ Ť	300.00
Mailing Address	1			4	15	2024	1	
City KEW GARDENS	State	Zi	p Code (Plus 4)					
	I _{NY}	l 11	1415		l	l	1	
Employer Name DANIELLE GINOCCH	HIO			Occupat	tion			
Employer Mailing Address/Principal P	lace of Business		City		State		Zip Code	(Plus 4)
			KEW GARDENS		NY		11415	
Full Name of Contributor								
MANOLI GALANAKIS				МО	DAY	YEAR	\$	1,000.00
Mailing Address							1	
City QUEENS	State	Zi	p Code (Plus 4)	4	15	2024	1	
, QUELINO	NY							
Frankrich Name - MANOLT CALANAGE		1 1.	1103	0		'	•	
Employer Name MANOLI GALANAKIS			l	Occupat		ı		(5)
Employer Mailing Address/Principal P	lace of Business		City		State		Zip Code	(Plus 4)
			QUEENS		NY		11103	

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

PAGE TOTAL

18,000.00

\$

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		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (I	Plus 4)				
Receipt Description	•	•			•		
Futor Count Total of Boot	Fan Cabadula I Batailad	Comment Dans	Castian	4			PAGE TOTAL
Enter Grand Total of Part	c on schedule 1, Detailed	Summary Page,	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							
FRIENDS OF JOSE GIRAL	From:	<u>4/9/2024</u> To:	5/13/2024					
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

Name of Filing Committee or Ca	ndidate		Reportin					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						 	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
				_	Г			
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.				nmary Pa	ge,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period							
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	1	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor Occupation										
Employer Mailing Address/Principal Place of Business		Cit	ty	Stat		e Zip Code(Plus 4)		Description of Contribution		
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	AL
Summary Page, Section 3.					-					0.00

\$

1,600.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
FRIENDS OF JOSE GIRAL			From <u>4/9/2024</u>			То:	5/13/2024
			DATE				AMOUNT
To Whom Paid			МО	DAY	YEAR		
45TH WARD PAC							
Mailing Address			4	25	2024	\$	1,100.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19134	ELECTION DAY EXPENSES				
To Whom Paid			МО	DAY	YEAR		
LOVE SHOULDN'T HURT PHILL	Υ		МО	DAI	ILAK		
Mailing Address			4	25	2024	\$	500.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19154	DONAT	ION FOR C	ICE		
			•				PAGE TOTAL

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