

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b> 20200026		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> RONI GREEN FOR 190											
<b>Street Address:</b>											
<b>City:</b> PHILADELPHIA				<b>State:</b> PA		<b>Zip Code:</b> 19132					
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2024	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	190	STH	DEM	51
					11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		5	14	2024		9	16	2024			
<b>A. Amount Brought Forward From Last Report</b>					\$		24,038.84				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		1,275.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		25,313.84				
<b>D. Total Expenditures (From Schedule III)</b>					\$		14,276.27				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		11,037.57				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
RONI GREEN FOR 190	From: <u>5/14/2024</u> To: <u>9/16/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 25.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 250.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 1,000.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 1,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 1,275.00
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**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.**

<b>Name of Filing Committee or Candidate</b>  RONI GREEN FOR 190	<b>Reporting Period</b>  <b>From:</b> <u>5/14/2024</u> <b>To:</b> <u>9/16/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><b>DATE</b></td> <td style="width: 40%;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> PA AFL CIO COPE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			8	30	2024	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101-1092				

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

<b>PAGE TOTAL</b>
\$ 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)					

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

<b>PAGE TOTAL</b>	
\$	0.00

## 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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
RONI GREEN FOR 190	<b>From:</b> <u>5/14/2024</u> <b>To:</b> <u>9/16/2024</u>

				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
MCCLINTON, JOANNA FRIENDS OF						
Mailing Address				6	17	2024
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19139-9998
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
CVS HEALTH POLITICAL ACTION COMMITTEE						
Mailing Address				8	30	2024
City	WASHINGTON	State	DC	Zip Code (Plus 4)		20004
						\$ 500.00

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

<b>PAGE TOTAL</b>
\$ 1,000.00

**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	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.**

<b>PAGE TOTAL</b>	
\$	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: <span style="float: right;">To:</span>
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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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
RONI GREEN FOR 190		From: <u>5/14/2024</u> To: <u>9/16/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <span style="float: right;"><b>To:</b></span>
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			DATE			AMOUNT
<b>Full Name of Contributor</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.00
<b>Mailing Address</b>						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
<b>Description of Contribution:</b>						
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>						<b>PAGE TOTAL</b>  <b>\$ 0.00</b>

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
RONI GREEN FOR 190	From <u>5/14/2024</u> To: <u>9/16/2024</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
TD Bank				
<b>Mailing Address</b>	5	17	2024	\$ 3.00
<b>City</b> Cherry Hill	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 08003	<b>Description of Expenditure</b> ATM Fee	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Malcolm for PA PAC				
<b>Mailing Address</b>	6	14	2024	\$ 1,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	<b>Description of Expenditure</b> Contribution	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
PA HDCC				
<b>Mailing Address</b>	6	24	2024	\$ 1,500.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> Contribution	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Ultimate Services Nationwide, Inc				
<b>Mailing Address</b>	6	20	2024	\$ 337.00
<b>City</b> OCEANSIDE	<b>State</b> NY	<b>Zip Code (Plus 4)</b> 11572	<b>Description of Expenditure</b> Waste management for event	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Citizens for Keith Harris				
<b>Mailing Address</b>	8	13	2024	\$ 500.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	<b>Description of Expenditure</b> Contribution	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
28th Ward Democratic Executive Committee				
<b>Mailing Address</b>	8	13	2024	\$ 800.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	<b>Description of Expenditure</b> Contribution	

To Whom Paid PA HDCC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			8	21	2024	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			
To Whom Paid ActBlue Technical Services			MO	DAY	YEAR	\$ 0.38
Mailing Address			7	31	2024	
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure Credit Card Processing			
To Whom Paid Stripe			MO	DAY	YEAR	\$ 0.78
Mailing Address			7	31	2024	
City South San Francisco	State CA	Zip Code (Plus 4) 94080	Description of Expenditure Credit Card Processing			
To Whom Paid TD Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address			8	22	2024	
City Cherry Hill	State NJ	Zip Code (Plus 4) 08003	Description of Expenditure ATM Fee			
To Whom Paid TD Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address			8	22	2024	
City Cherry Hill	State NJ	Zip Code (Plus 4) 08003	Description of Expenditure ATM Fee			
To Whom Paid WristbandBros.com			MO	DAY	YEAR	\$ 307.40
Mailing Address			8	29	2024	
City Pawtucket	State RI	Zip Code (Plus 4) 02860	Description of Expenditure Wristband printing			
To Whom Paid Concerned Women on the Move			MO	DAY	YEAR	\$ 600.00
Mailing Address			8	30	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 19104	Description of Expenditure Event sponsorship			
To Whom Paid GWENDOLYN VERONICA GREEN			MO	DAY	YEAR	\$ 700.00
Mailing Address			9	6	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19132	Description of Expenditure Reimbursement for Canvassers			

<b>To Whom Paid</b> DuBose Printing			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 977.22
<b>Mailing Address</b>			9	16	2024	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19151	<b>Description of Expenditure</b> Printing			

<b>To Whom Paid</b> PA HDCC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 6,000.00
<b>Mailing Address</b>			9	9	2024	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> Contribution			

<b>To Whom Paid</b> T-Tyme Entertainment			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 200.00
<b>Mailing Address</b>			8	22	2024	
<b>City</b> Glenolden Park	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19036	<b>Description of Expenditure</b> DJ for event			

<b>To Whom Paid</b> Payment Alliance International, Inc			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 4.49
<b>Mailing Address</b>			8	22	2024	
<b>City</b> Louisville	<b>State</b> KY	<b>Zip Code (Plus 4)</b> 40245	<b>Description of Expenditure</b> ATM Fee			

<b>To Whom Paid</b> GWENDOLYN VERONICA GREEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 120.00
<b>Mailing Address</b>			5	17	2024	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19132	<b>Description of Expenditure</b> Partial Reimbursement for Meetings/Meals			

<b>To Whom Paid</b> GWENDOLYN VERONICA GREEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 220.00
<b>Mailing Address</b>			9	16	2024	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19132	<b>Description of Expenditure</b> Partial Reimbursement for event expenses			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 14,276.27

