### **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 20042	233			Repo Filed		<b>/</b> :	CA	NDI	DATE		COMM	4ITTEE	<b>✓</b> [	LOB	BYIS	Г	
Name of Filing C	ommittee, Candida	ate or L	obbyist:	·	FRATE	ΞRΝ	IAL C	DRDE	R O	F POLI	CE L	ODGE 5	;					
Street Address:																		
City:	PHILADELPHIA	١						State	e:	PA			Zip Cod	<b>ie:</b> 19	154			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.		30 DA PRIMA			OST-	3.		AMENDM REPORT		Yes	] [	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA		Р	OST-	6. <b>X</b>	(	TERMINA REPORT		Yes	1 [	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2024					IG ME			•		PAPER		<b>V</b>	DIS	KETTE	
Name of Office S	ought by Candidat	e:	•			-		DAT	ΈO	F ELE	СТІ	ON	District Number	Office Code	Pa	rty Co	de Cou Cod	
								МО		DAY		'EAR						
									11		5	2024		(SEE IN	STRUCT	IONS FO	OR CODE	s)
Summary of Expenditures		МО	DAY	YEAR				МО		DAY	Y	'EAR	FO	R OFFI	CE US	ONL	Y	
		-	10 22	20	)24	TC	<i>)</i>		11		25	2024						
A. Amount Bro	ught Forward From	ı Last R	eport				\$					612.92						
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sched	dule I	)	\$				16,	,959.58						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				284,	572.50						
D. Total Expenditures (From Schedule III)						\$				14,	038.00							
E. Ending Cash Balance (Subtract Line D From Line C)				C)			\$				270,	534.50						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			'			
				AFF:	IDAV	/IT	SE	CTIO	NC									
	a Committee repo		_									_						
I swear (or affirm) correct and comple	that this report, incluete.	uding the	attached sc	hedules	filed o	on p	aper (	or by e	electi	ronic m	ediun	n, are to t	he best o	f my knov	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me this day of		20									Signature	of Perso	n Submit	ing Re	port		
	Signatur	e				_							Prin	ted Name	1			_
My Commission Ex	pires								•				Ema	il				
	МО	D	AY	YR						Ar	ea Co	de	Daytim	e Teleph	one N	ımber		_
Part II- If this is	a report of a cand	idate's	authorized	Comm	ittee,	Ca	ndid	ate sl	hall s	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	y knowle	edge and beli	ief this	politica	al c	omm	ittee h	nas no	ot viola	ted a	ny provis	ions of th	e act of J	une 3,1	1937 (	P.L. 13	33,
Sworn to and subsc	ribed before me this day of		20									s	ignature o	of Candida	ate			
						_							Printe	d Name				-
My Commission Exp	Signature ires												Ema	il				-
	МО	D	AY	YR		_				Area	Code	1	Da	aytime T	elepho	ne Nu	nber	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRATERNAL ORDER OF POLICE LODGE 5	From:	10/22/20	24 <b>To</b> :	11/25/2024
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	16,847.88
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)			\$	66.00
TOTAL for the Reporting	Period	(2)	\$	66.00
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)	\$	45.70
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 Page			\$	16,959.58

#### **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	e		Reporting	Period			
		1	From:		То	:	
		·		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)

Name of Filing Committee or Candidate

**Reporting Period** 

FRATERNAL ORDER OF POLICE LODGE 5

From: <u>10/22/2024</u> To:

11/25/2024

				DATE		AMOUNT
Full Name of Contributor			мо	DAY	YEAR	
Natasha Matthews			1-10	אמ	IZAK	
Mailing Address			]			\$ 33.00
City Lancaster	State	Zip Code (Plus 4)	11	13	2024	
	PA	17603				
Full Name of Contributor			мо	DAY	YEAR	
Natasha Matthews			1-10	DAI	ILAK	
Mailing Address						\$ 33.00
City Lancaster	State	Zip Code (Plus 4)	10	30	2024	
	PA	17603				

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

**PAGE TOTAL \$** 66.00

#### **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:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
<u> </u>	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$		0.00

## 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 or Candidate				Repo	orting Pe	riod					
				Fron	n:		1	Го:			
					D	ATE			AN	MOUNT	
Full Name of Contributor					МО	DAY	YEAR	2	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		Zi	ip Cod	e (Plus 4)	)
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	umm	ary Page,	Section	on 3.				P	AGE TOTA	<b>L</b>
								\$		C	0.00

## 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	Reporting Pe	eriod	
FRATERNAL ORDER OF POLICE LODGE 5	From:	<u>10/22/2024</u> <b>To:</b>	11/25/2024

			D	ATE		AMOUNT	
Full Name			МО.	DAY	VEAD		
Philadelphia Federal Credit Unic	on		МО	DAY	YEAR	\$	45.70
Mailing Address			10	31	2024		
<b>City</b> Philadelphia	State	Zip Code (Plus 4)	10		2021		
	PA	19154					
Receipt Description Interes	t	•		•		•	

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

**PAGE TOTAL \$**45.70

#### **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 Peri	od	
FRATERNAL ORDER OF POLICE LODGE 5	From:	<u>10/22/2024</u> <b>To:</b>	<u>11/25/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	ł	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Candidate			Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b> </b>		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## STATEMENT OF EXPENDITURES

wame	e of Filing Committee or C	andidate		Reporti	ng Period			
FRAT	ERNAL ORDER OF POLIC	E LODGE 5		From	10/2	2/2024	То:	11/25/2024
					DATE			AMOUNT
To W	om Paid			МО	DAY	YEAR		
Harrit	y for Council			110				
Mailin	g Address			10	29	2024	\$	2,500.00
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	19134	Donatio	n			
To W	om Paid			МО	DAY	YEAR		
Barat	z & Associates, P.A.			1-10		12/11		
Mailin	g Address			10	29	2024	\$	1,700.00
City	Marlton	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		NJ	08053	Account	ing Fees			
To Wi	om Paid			МО	DAY	VEAD		
Philac	elphia Police Home Assoc	2		МО	DAY	YEAR		
Mailing Address				10	30	2024	\$	3,719.00
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	19154	Fundraising reception for Brian O'Neill				
To W	om Paid			мо	DAY	YEAR		
Friend	ls of 66B			140		ILAK		
Mailin	g Address			11	1	2024	\$	500.00
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19154	Donatio	n			
	nom Paid edy Printing Company			МО	DAY	YEAR		
	g Address			10	24	2024	\$ \$	2,619.00
		State	Zip Code (Plus 4)		tion of Exp			
City	Philadelphia	PA	19143	General		alm card		n signs for
To Wi	nom Paid						<u>- '</u>	
Card	Member Services			МО	DAY	YEAR		
Mailin	g Address			11	8	2024	\$	3,000.00
City	St. Louis	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	<u> </u>	
		МО	63179	Fundrais	ser for Ker	nyatta Jo	hnson	
		•	•	•				
								PAGE TOTAL