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 9100	0099			Rep File			CAND	IDATE		СОМ	ITTEE	✓	LOBE	YIST		
Name of Filing C	Committee, Candid	late or L	obbyist:	F	RACE	E S	TREET	PAC									
Street Address:	1301 NORTH	31ST S	Γ														
City:	PHILADELPHI	A						State:	PA			Zip Code: 19121-4495					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2		30 DA PRIMA		POST-	3. X		AMENDMENT REPORT?		Yes	No	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION	PRE-	- 5		30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	~	
report type)								IG METH CHECK C				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•					DATE (OF ELE	CTIC	N	District Number	Office Code	Pari	ty Code	County Code	
								МО	DAY	Y	EAR		10000				
								11	L	3	2009		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY YE	AR				МО	DAY	Y	YEAR FOR OFFICE USE ONLY						
Expenditures	irom:		1 1	20	009	Т	<u> </u>	(5	8	2009						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			32,	627.90						
B. Total Monet	ary Contributions	And Rec	eipts (From Sc	hec	dule :	I)	\$			1,	00.00	00.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			33,	627.90	90					
D. Total Expen	ditures (From Sch	edule II	I)				\$			3,6	500.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			30,0	27.90						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II))	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$			74,0	00.00			•			
			А	13	[DA]	VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f this	s is	a Can	didate r	eport,	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached schedu	ıles	filed	on	paper (or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true	
Sworn to and subs	cribed before me thi	s	20							!	Signature	of Perso	n Submit	ting Rep	ort		
	Signati	Ire					- -					Prin	ted Nam	e			
My Commission Ex	_											Ema	il				
	мо	D	AY	ΥR			_		Ar	ea Co	de	Daytim	e Telep	hone Nur	nber		
Part II- If this is	a report of a can	didate's	authorized Cor	nm	ittee	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his	politi	cal	commi	ittee has	not viola	ted ar	ny provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	late			
	day of 						-					Drint-	d Name				
	Signature						-										
My Commission Exp	_											Ema	il				
	МО	D	AY	YR			-		Area	Code		Da	ytime 1	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
RACE STREET PAC	From:	1/1/200	<u>9</u> To:	6/8/2009
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)			\$	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)	\$	1,000.00
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			\$	1,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL

\$ 0.00

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		Rep	oorting P	eriod			
			Fro	m:		To) :	
					DATE		Α	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$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.

Name of Filing Committee or Candida	te		Reporting	Period				
			From:			То:		
				DA	ΛΤΕ.		Α	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sc	hedule I, Detail	ed Summary P	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 Ca	indidate			Rep	orting Pe	riod			
				Fron	n:		T	o:	
					D	ATE		AM	10UNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Princ Business	cipal Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C	on Schedule I, Detai	led Sumr	mary Page,	Section	on 3.			P <i>/</i>	AGE TOTAL 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 Perio	od	
RACE STREET PAC	From:	<u>1/1/2009</u> To:	6/8/2009

			D	ATE		AMOUNT
Full Name DELAWARE COUNTY RE	PUBLICAN FINANCE COMMITTEE		МО	DAY	YEAR	
Mailing Address 323	WEST FRONT STREET		-	24	2000	\$ 1,000.00
City MEDIA	State PA	Zip Code (Plus 4) 19063	5	21	2009	
Receipt Description	WRITTEN 3/25/09-VOIDED 5/21,	/09- CONTRIBUTION				

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

PAGE TOTAL \$ 1,000.00

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	l	
RACE STREET PAC	From:	<u>1/1/2009</u> To:	<u>6/8/2009</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		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:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	ne of Filing Committee or Candidate						
RACE STREET PAC			From	<u>1/</u>	1/2009	То:	<u>6/8/2009</u>
				DATE			AMOUNT
To Whom Paid FRIENDS OF JULIO GURIDY			мо	DAY	YEAR		
Mailing Address 623 HAN	OVER AVENUE		5	7	2009	\$	100.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18102	Descrip	otion of Exp	l penditure	:	
To Whom Paid FRIENDS OF TED ERICKSON	1		МО	DAY	YEAR		
Mailing Address PO BOX 5	564		5	13	2009	\$	1,000.00
City DREXEL HILL	State PA	Zip Code (Plus 4) 19026	Descrip	otion of Exp	penditure	:	
To Whom Paid LINDA A. CARTISANO FOR J	UDGE COMMITTEE	·	мо	DAY	YEAR		
Mailing Address 101 W. B	SALTIMORE AVENUE, 2ND	FLOOR	5	13	2009	\$	2,000.00
City MEDIA	State PA	Zip Code (Plus 4) 19063	Descrip	otion of Exp	oenditure	:	
To Whom Paid COMMITTEE TO ELECT KEN	SMITH		МО	DAY	YEAR		
Mailing Address PO BOX 4	4122		5	22	2009	\$	500.00
City SCRANTON	State PA	Zip Code (Plus 4) 18505	Descrip	otion of Ex	penditure	:	
Enter Grand Total of Expe	anditures on Pers 1. Pe	nort Cover Page Itam	<u> </u>				PAGE TOTAL
Enter Grand Total of Expe	muntures on Page 1, Re	poit Cover Page, Item	υ.			\$	3,600.00

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Reporting			ng Period							
RACE STREET PAC				From:		1/1/2009	То:		6/8/2009	
					DATE			Outstanding Balance of Debt		
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR				
Mailing Address 354 DARLINGTON ROAD				9	6	2005	\$	1,050.00		
City MEDIA		State PA	Zip Code (Plu 19063	us 4)	Description of Debt LOAN TO COMMITTEE					
									Outstanding	
						DATE Balance of Debt				
Name of Creditor MARK H. DAMBLY					МО	DAY	YEAR			
Mailing Address 354 DARLINGTON ROAD				11	3	2005	\$	5,000.00		
City MEDIA		State Zip Code (Plus 4) PA 19063				scription of Debt AN TO COMMITTEE				
<u> </u>					DATE			Outstanding Balance of Debt		
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR				
Mailing Address	354 DARLINGTON	ROAD			11	9	2005	\$	1,000.00	
City MEDIA		State PA	Zip Code (Pl 19063	us 4)	Description of Debt LOAN TO COMMITTEE					
					Outstanding DATE Balance of Debt					
Name of Creditor MARK H. DAMBLY					МО	DAY	YEAR			
Mailing Address 354 DARLINGTON ROAD				11	23	2005	\$	1,000.00		
City MEDIA		State	Zip Code (Plu	us 4)	Description of Debt					
		PA 19063				О СОММІТ				

							PAGE 13		
		DATE					standing ance of Debt		
Name of Creditor RICHARD K. BARNHART	МО	DAY	YEAR						
Mailing Address 40 EVANS	12	13	2005	\$	5,000.00				
City HARVERFORD	State PA	Zip Code (Plus 4) 19041		ption of Del					
	DATE					Outstanding Balance of Debt			
Name of Creditor MARK H. DAMBLY	МО	DAY	YEAR						
Mailing Address 354 DARI	12	21	2005	\$	2,000.00				
City MEDIA State Zip Code (Plus 4) PA 19063				Description of Debt LOAN TO COMMITTEE					
		DATE	Outstanding Balance of Debt						
Name of Creditor RICHARD K. BARNHART				DAY	YEAR				
Mailing Address 40 EVANS LANE				23	2006	\$	2,000.00		
City HARVERFORD	State PA	Zip Code (Plus 4) 19041		ption of Del					
	DATE			Outstanding Balance of Debt					
Name of Creditor MARK H. DAMBLY			мо	DAY	YEAR				
Mailing Address 354 DARI	LINGTON ROAD		3	28	2006	\$	7,500.00		
City MEDIA	State PA	Zip Code (Plus 4) 19063	Description of Debt LOAN TO COMMITTEE						
		·		DATE			standing ance of Debt		
Name of Creditor MARK H. DAMBLY	МО	DAY	YEAR						
Mailing Address 354 DARI	7	28	2006	\$	2,500.00				
City MEDIA	State PA	Zip Code (Plus 4) 19121	Description of Debt LOAN TO COMMITTEE						
	!								

							Г.	AGE 14	
					DATE			tanding nce of Debt	
Name of Creditor MARK H. DAMBLY				МО	DAY	YEAR			
Mailing Address	354 DARLINGTON ROAD			8	17	2006	\$	500.00	
City MEDIA		State Zip Code (Plus 4) PA 19121				Description of Debt LOAN TO COMMITTEE			
	· · · · · · · · · · · · · · · · · · ·						Outstanding Balance of Debt		
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR			
Mailing Address	354 DARLINGTON ROAD				7	2006	\$	250.00	
City MEDIA	MEDIA State Zip Code (Plus 4) Description of Des								
			1	DATE				Outstanding Balance of Debt	
Name of Creditor MARK H. DAMBLY				МО	DAY	YEAR			
Mailing Address	354 DARLINGTON	ROAD		9	8	2006	\$	600.00	
City MEDIA		State Zip Code (Plus 4) PA 19121			otion of Del				
				•	DATE			tanding nce of Debt	
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR			
Mailing Address	354 DARLINGTON	ROAD		9	19	2006	\$	600.00	
City MEDIA		State PA	Zip Code (Plus 4) 19063	Description of Debt LOAN TO COMMITTEE					
					DATE			tanding nce of Debt	
Name of Creditor MARK H. DAMBLY				мо	DAY	YEAR			
Mailing Address	354 DARLINGTON	ROAD		9	27	2006	\$	6,000.00	
City MEDIA	State Zip Code (Plus 4) PA 19063				Description of Debt LOAN TO COMMITTEE				

				DATE	Outstanding Balance of Debt			
Name of Creditor MARK H. DAMBLY			мо	DAY	YEAR			
4ailing Address 354 DARLINGTON ROAD				17	2006	\$ 2,000.00		
City MEDIA	State PA	Zip Code (Plus 4) 19063		otion of Del				
		DATE		Outstanding Balance of Debt				
Name of Creditor RICHARD K. BARNHART	мо	DAY	YEAR					
Mailing Address 40 EVANS LAN	IE		12	22	2006	\$ 20,000.00		
City HARVERFORD	State PA	Zip Code (Plus 4) 19041		otion of Del				
		DATE		Outstanding Balance of Debt				
Name of Creditor RICHARD K. BARNHART	мо	DAY	YEAR					
Mailing Address 40 EVANS LANE				12	2007	\$ 10,000.00		
City HAVERFORD	State PA	Zip Code (Plus 4) 19041		otion of Del				
		DATE		Outstanding Balance of Debt				
Name of Creditor MARK H. DAMBLY				DAY	YEAR			
Mailing Address 354 DARLINGTON ROAD				6	2007	\$ 2,000.00		
City MEDIA	State PA	Zip Code (Plus 4) 19063	1	otion of Del				
		DATE	Outstanding Balance of Debt					
Name of Creditor MARK H. DAMBLY	мо	DAY	YEAR					
Mailing Address 354 DARLINGTON ROAD				16	2007	\$ 5,000.00		
City MEDIA	State PA	Zip Code (Plus 4) 19063		I otion of Del TO COMMIT				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 74,000.00		