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 2010 | 165 | | | | port ed B | | CAND | DATE | | СОМ | 4ITTEE | ✓ | LOBI | BYIST | | |
|--|---------------------------------|-------------|------------------------|--------|-------|--------------|----------------|-------------|-----------|--------|------------|--------------------|----------------|---------------|-----------|----------|----------|
| Name of Filing C | Committee, Candid | ate or L | obbyist: | | Stud | dent | s Firs | t PAC | | | | | | | | | _ |
| Street Address: | PO BOX 416 | | | | | | | | | | | | | | | | |
| City: | WYNNEWOOD |) | | | | | | State: | PA | | | Zip Cod | le: 19 | 9096 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | PRE- | - [| 2. | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT | | Yes | No | • | / |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. X | 2ND FRIDAY ELECTION | PRE | - | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | • | / |
| report type) | ANNUAL REPORT | 7. | Year 2010 | | | | | IG METH | | | | PAPER | | $\overline{}$ | DISKE | TTE | |
| Name of Office S | Sought by Candida | te: | • | | | | | DATE C |)F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Coun | |
| | | | | | | | | МО | DAY | YE | AR | | 10000 | | | | |
| | | | | | | | | 11 | | 2 | 2010 | | (SEE IN | STRUCTI | ONS FOR C | ODES) | , |
| | Receipts and | МО | DAY | YEAR | l | | | МО | DAY | YE | AR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | from: | | 1 1 | 20 | 010 | Т | 0 | 9 |) | 13 | 2010 | | | | | | |
| A. Amount Bro | ught Forward Froi | n Last R | eport | | | | \$ | - | | 104,2 | 267.29 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From | Sche | dule | ı) | \$ | | | 152,0 | 010.00 | | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | | \$ | | | 256,2 | 277.29 | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | 173,5 | 35.40 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) |) | | | \$ | | | 82,7 | 41.89 | | | | | | |
| F. Value Of In- | Kind Contributions | s Receiv | ed (From Sch | hedu | le II | () | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | 1 | | | |
| | | | | AFF | IDA | ٩VI | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign he | ere. I | [f th | is is | a Can | ndidate r | eport, o | candi | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | e attached sche | edules | filed | d on | paper (| or by elect | tronic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , tru | ıe' |
| Sworn to and subs | cribed before me this day of | 5 | 20 | | | | | | | S | ignature | of Perso | n Submit | ting Rep | oort | | - |
| | Signatu | re | | | | | - - | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | cpires | | | | | | | | | | | Ema | il | | | | - |
| | мо | D | AY | YR | | | | | Ar | ea Cod | le | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized C | Comm | nitte | e, C | andida | ate shall | sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of r | ny knowl | edge and belief | f this | polit | tical | commi | ittee has r | not viola | ted an | y provis | ions of th | e act of J | une 3,1 | 937 (P.L. | . 1333 | 3, |
| Sworn to and subsc | ribed before me this | | 20 | | | | | | | | S | ignature o | of Candid | ate | | | - |
| - | day of | | | | | | - | | | | | Printe | d Name | | | | - |
| | Signature | | | | | | - | | | | | | | | | | _ |
| My Commission Exp | pires | | | | | | | | | | | Ema | 11 | | | | |
| | МО | D | AY | YR | | | • | | Area | Code | | Da | aytime T | elephor | e Numbe | er | ٠ |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | Period | | |
|--|-----------|---------|--------------|------------|
| Students First PAC | From: | 1/1/201 | <u>0</u> To: | 9/13/2010 |
| 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) | | | \$ | 2,000.00 |
| TOTAL for the Reporting |) Period | (3) | \$ | 2,000.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting |) Period | (4) | \$ | 150,010.00 |
| Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 152,010.00 |

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 | e | R | Reporting | Period | | | |
|--------------------------------------|-------|-------------------|-----------|--------|------|----|--------|
| | | F | rom: | | 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.

| Name of Filing Comn | nittee or Candidate | | Repor | ting P | eriod | | | |
|------------------------|---------------------|-------------------|-------|--------|-------|------|----|------------|
| | | | From: | | | To | o: | |
| | | • | | | DATE | | | AMOUNT |
| Full Name of Contribut | or | | , | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |
| | | | | | | | | PAGE TOTAL |
| | | | | | | | | |

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 | | A | AMOUNT | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | 0.00 |
| Mailing Address | | | | | | | - \$ | | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | | |
| | | | | | | | | PAGE TO | Γ AL |
| Enter Grand Total of Part C on Scheo | dule 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 | | | | Rep | orting Pe | riod | | | | |
|---|----------------------|-----|--------------|---------|-----------|-------|--------------|------|----------|-----------|
| Students First PAC | | | | Fror | m: | 1/1/2 | <u>010</u> 1 | Го: | | 9/13/2010 |
| | | | | | D.A | ATE | | | АМ | DUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAF | 2 | \$ | 1,000.00 |
| Jay Shah | | | | | | | | | Ŧ | 1,000.00 |
| Mailing Address 330 Gypsy Lane | | | | | 6 | 24 | 201 | ا ٥ | | |
| City Wynnewood | State | Zij | p Code (Plus | 4) | | | | | | |
| | PA | 19 | 9096 | | | | | ١ | | |
| Employer Name Hersha Hospitality Tru | ıst | | | | Occupat | ion | Real E | stat | te Inves | tor |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Z | ip Code | (Plus 4) |
| Penn Mutual Towers510 Walnut Street | | | Philadelph | iia | | PA | | 1 | 9106 | |
| Full Name of Contributor | | | | | МО | DAY | YEAF | , | | |
| Christopher Bravacos | | | | | MO | DAT | TEAR | ` | \$ | 1,000.00 |
| Mailing Address 344 Maple Avenue | | | | | 7 | 20 | 201 | n | | |
| City Hershey | State | Zij | p Code (Plus | (4) |] | 20 | 201 | · | | |
| | PA | 17 | 7033 | | | | | | | |
| Employer Name The Bravo Group | | | | | Occupat | ion | Public | Ad۱ | vocacy (| Consultan |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Z | ip Code | (Plus 4) |
| 20 N. Market Street | | | Harrisburg | 9 | | PA | | 1 | 7101 | |
| Futou Cuand Tatal of Bank Care Cale | dula I. Datalla d Co | | namı Dası | Co.et! | 2 | | ſ | | PA | GE TOTAL |
| Enter Grand Total of Part C on Sche | uule 1, Detalled St | umn | nary Page, | Section | on 3. | | | \$ | | 2,000.00 |
| | | | | | | | _ | | | |

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 Can | didate | | Report | ing Perio | od | | | |
|--|-----------------------|---------------|---------|-----------|---------|---------------|----|------------|
| Students First PAC | | | From: | | 1/1/201 | <u>.0</u> To: | | 9/13/2010 |
| | | | | D | ATE | | | AMOUNT |
| Full Name Williams for Governor | | | | МО | DAY | YEAR | \$ | 150,000.00 |
| Mailing Address P.O. Box 3885 | 3 | <u> </u> | | 6 | 15 | 2010 | , | |
| City Philadelphia | State | Zip Code (F | Plus 4) | | | | | |
| | PA | 19104 | | | | | | |
| Receipt Description Refund of | contributions | • | | | • | • | • | |
| Full Name TD Bank, N.A | | | | мо | DAY | YEAR | \$ | 10.00 |
| Mailing Address 4020 City Aver | nue | | | 6 | 21 | 2010 | | |
| City Philadelphia | State | Zip Code (I | Plus 4) |] | | 2010 | | |
| | PA | 19131 | | | | | | |
| Receipt Description Refund of | bank charges | ! | | | | | • | |
| Futur Curu d Tatal of Book F and | Salandada T. Bakatlad | S D | C1. | | | | | PAGE TOTAL |
| Enter Grand Total of Part E on S | cnedule 1, Detalled | Summary Page, | Section | 4. | | | \$ | 150,010.00 |
| | | | | | | | | |

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 | | |
|--|------------------|----------------------------|-----------|
| Students First PAC | From: | <u>1/1/2010</u> To: | 9/13/2010 |
| 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 Candi | idate | | Reportin | g Period | | | |
|-----------------------------------|--------------------|------------------------|----------|----------|------|-------------|------------|
| | | | From: | | | To: | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | 7 \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| Description of Contribution: | • | | • | • | • | | |
| | | | | | | | |
| Enter Grand Total of Part F on | Schedule II, In-Ki | nd Contributions Detai | led Sum | mary Pag | ge, | | PAGE TOTAL |
| Section 2. | | | | | | \$ | 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 | | | AMOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | \$ | | 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 Zij | p Code(Plus 4) | Descr | iptio | n of Contribution | on |
| Enter Grand Total of Part G on Sch | edule II. In-K | ind | Contributions D | etaile | ed | | | | PAGE TOT | ΓAL |
| Summary Page, Section 3. | | | | | - | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Per | iod | | |
|---------------------------------------|---------------|----------|-----|-----------|
| Students First PAC | From | 1/1/2010 | То: | 9/13/2010 |

| | | | | DATE | | | AMOUNT |
|--|---------------------|-------------------|--------------|------------------|---------------|----|-----------|
| To Whom Paid | | | мо | DAY | YEAR | | |
| TD Bank, N.A. | | | | | | | |
| Mailing Address 4020 City A | Avenue | | 6 | 15 | 2010 | \$ | 10.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| | PA | 19131 | Bank Se | ervice Fee | | | |
| To Whom Paid Urban League of Philadelphia | | | мо | DAY | YEAR | | |
| · · · · · · · · · · · · · · · · · · · | ad Street 9th Floor | | 6 | 16 | 2010 | \$ | 300.00 |
| | 1 | | | | | | |
| City Philadelphia | State | Zip Code (Plus 4) | | tion of Exp | enditure | | |
| | PA | 19107 | Contribu | ution I | | | |
| To Whom Paid Friends of Andy Dinniman | | | мо | DAY | YEAR | | |
| Mailing Address 471 Spruce | Prive | | 6 | 28 | 2010 | \$ | 20,000.00 |
| City Exton | State | Zip Code (Plus 4) | Descript | l tion of Exp | L enditure | | |
| | PA | 19341 | Contribution | | | | |
| To Whom Paid | • | <u> </u> | | | | | |
| Friends of Kenyatta Johnson | | | МО | DAY | YEAR | | |
| Mailing Address P.O. Box 3 | 332 | | 6 | 28 | 2010 | \$ | 15,000.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| | PA | 19146 | Contribu | ution | | | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| Friends to Elect Vanessa Lowe | ry Brown | | -10 | | | | |
| Mailing Address 932 North | Fallon Street | | 6 | 28 | 2010 | \$ | 12,000.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| | PA | 19131 | Contribu | ution | | | |
| To Whom Paid Joseph Watkins | | | МО | DAY | YEAR | | |
| | | | 6 | 21 | 2010 | \$ | 1,500.00 |
| Mailing Address 6414 City I | ine Avenue | | 0 | | 2010 | | |
| Mailing Address 6414 City I City Philadelphia | Line Avenue State | Zip Code (Plus 4) | | tion of Exp | | | |

| | | | | | | | | OL IZ | | | |
|---------------------------------------|---------------------------------------|-------------------------|-------------------|--|----------------------------|----------------|--------|----------|--|--|--|
| To Wh | om Paid | | | МО | DAY | YEAR | | | | | |
| Joseph Watkins | | | | | | | | | | | |
| Mailing Address 6414 City Line Avenue | | | | 7 | 1 | 2010 | \$ | 4,000.00 | | | |
| City | Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| PA 19151 | | | | Consulting Fee | | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | |
| Joseph Watkins | | | | | | | | | | | |
| Mailing Address 6414 City Line Avenue | | | 7 | 22 | 2010 | \$ | 100.00 | | | | |
| City | Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| PA 19151 | | | | Consulting Fee | | | | | | | |
| To Wh | om Paid | | | МО | DAY | YEAR | | | | | |
| Josepl | n Watkins | | | | | | | | | | |
| Mailin | g Address 6414 City | Line Avenue | | 7 | 1 | 2010 | \$ | 100.00 | | | |
| City | Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | PA | 19151 | Consulti | ing Fee | | | | | | |
| To Wh | om Paid | | | МО | DAY | YEAR | | | | | |
| Josepl | n Watkins | | | | | | | | | | |
| Mailin | g Address 6414 City | Line Avenue | | 7 | 22 | 2010 | \$ | 500.00 | | | |
| City | Philadelphia | State | Zip Code (Plus 4) | Description of Expenditure Consulting Fee | | | | | | | |
| | | PA | 19151 | | | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | |
| Joseph Watkins | | | | | | | | | | | |
| Mailin | g Address 6414 City | Line Avenue | | 8 | 1 | 2010 | \$ | 5,000.00 | | | |
| City | Philadelphia | State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | |
| | PA 19151 | | | Consulting Fee | | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | |
| Joseph Watkins | | | | | | | | | | | |
| Mailin | g Address 6414 City | Line Avenue | | 8 | 15 | 2010 | \$ | 2,500.00 | | | |
| City | Philadelphia State Zip Code (Plus | | | Descript | tion of Exp | enditure | | | | | |
| | | PA 19151 | | | | Consulting Fee | | | | | |
| To Wh | om Paid | | | МО | DAY | YEAR | | | | | |
| Josepl | n Watkins | | | | | | | | | | |
| Mailin | Mailing Address 6414 City Line Avenue | | | 8 | 23 | 2010 | \$ | 1,500.00 | | | |
| City | Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| PA 19151 | | | | Consulting Fee | | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | |
| Joseph Watkins | | | | | | | | | | | |
| Mailin | Mailing Address 6414 City Line Avenue | | | 9 | 1 | 2010 | \$ | 1,500.00 | | | |
| City | Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | PA 19151 | | | | Consulting Fee | | | | | |
| 177 | | | | | | | | | | | |

| | | | | | | | AGE 13 | | |
|---------------------------------------|---|-------------------|--|----------------------------|----------------------------|------|-----------|--|--|
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Joseph Watkins | | | | | ILAK | | | | |
| Mailing Address 6414 City Line Avenue | | | | 10 | 2010 | \$ | 308.50 | | |
| City Philadelphia | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | PA | 19151 | Travel e | expense re | imbursen | nent | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Hilton - Harrisburg | | | | | I = / II \ | | | | |
| Mailing Address One North 2nd Street | | | 6 | 25 | 2010 | \$ | 1,930.00 | | |
| City Harrisburg | g State Zip Code (Plus 4) | | | Description of Expenditure | | | | | |
| | PA | 17101 | Lunched | on on 6/29 | /10 | | | | |
| To Whom Paid Geoff Bushko | | | | DAY | YEAR | | | | |
| Mailing Address 105 Grouse Co | ourt | | 6 | 28 | 2010 | \$ | 19.86 | | |
| City North Wales | State | Zip Code (Plus 4) | Descript | l tion of Exp | l enditure | | | | |
| Troiter Wales | PA | 19454 | FedEx/Postage reimbursement for documents to | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | Harrisbu | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | |
| W. Parker Weikert Associates, LL | С | | | | | | 12 500 00 | | |
| Mailing Address P.O. Box 21 | | | 7 | 23 | 2010 | \$ | 12,500.00 | | |
| City Montchanin | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| DE 19710 | | | | Website Design | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| W. Parker Weikert Associates, LLC | | | | | | | | | |
| Mailing Address P.O. Box 21 | | | 9 | 10 | 2010 | \$ | 5,940.00 | | |
| City Montchanin | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | DE | 19710 | Website Design and changes | | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| TransAmerican Office Furniture, Inc. | | | | | | | | | |
| Mailing Address 4001 Main Str | reet | | 8 | 1 | 2010 | \$ | 1,678.00 | | |
| City Philadelphia | Philadelphia State Zip Code (Plus 4) PA 19127 | | | | Description of Expenditure | | | | |
| | | | | | Office Furniture | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | |
| TransAmerica Office Furniture, Inc. | | | | | | | | | |
| Mailing Address 4001 Main Str | reet | | 8 | 1 | 2010 | \$ | 1,946.48 | | |
| City Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| PA 19127 | | | | Office Furntiture | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| Fusion | | | | | | | | | |
| Mailing Address 520 N. Columbus Blvd | | | | 1 | 2010 | \$ | 23,090.40 | | |
| City Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | PA | 19123 | School (| Choice Pro | ject | | | | |
| | | | | | | | | | |

| To Whom Paid City Line Investors, LP Mailing Address 1 Belmont Avenue Suite300 8 1 2010 \$ 2,500.00 City Bala Cynwyd State Zip Code (Plus 4) Description of Expenditure Office Rent To Whom Paid City Line Investors, LP MO DAY YEAR Mo DAY YEAR VEAR VEAR |
|---|
| City Line Investors, LP |
| City Bala Cynwyd State PA 19004 Office Rent To Whom Paid City Line Investors, LP Mailing Address 1 Belmont Avenue 9 1 2010 \$ 2,500.00 City Bala Cynwyd State PA 19004 Office Rent To Whom Paid Paid Paid PA 19004 Office Rent To Whom Paid Paid PA 19123 School Choice Project To Whom Paid PA 19123 School Choice Project To Whom Paid Paid PA 19139 Open State PA 19139 Open of Expenditure Open of Expenditure School Choice Project To Whom Paid Paid Paid Paid PA 19123 Open of Expenditure PA 19139 Open of Expenditure Open of Expenditure PA 19139 Open of Expenditure Open of Expenditure PA 19139 Open of Expenditure Open open open open open open open open o |
| To Whom Paid City Line Investors, LP Mailing Address 1 Belmont Avenue State PA 19004 City Bala Cynwyd State PA 19004 To Whom Paid Fusion Mailing Address 520 N. Columbus Blvd Suite 204 City Philadelphia State Zip Code (Plus 4) Description of Expenditure PA 19123 City Philadelphia State Zip Code (Plus 4) Description of Expenditure PA 19123 State PA 19123 City Philadelphia State Zip Code (Plus 4) Description of Expenditure PA 19123 School Choice Project To Whom Paid Dawn Chavous Mailing Address 254 S. Saint Bernard Street State Zip Code (Plus 4) Description of Expenditure PA 19139 City Philadelphia State Zip Code (Plus 4) Description of Expenditure Consulting Fee To Whom Paid Dayn Chavous MO DAY YEAR MO DAY YEAR To Whom Paid Dayn Chavous |
| To Whom Paid City Line Investors, LP |
| City Line Investors, LP Mailing Address 1 Belmont Avenue State PA 19004 Description of Expenditure Office Rent To Whom Paid Fusion Mo DAY YEAR Mo DAY YEAR State PA 19004 Mo DAY YEAR Mo DAY YEAR State PA 19123 State PA 19123 To Whom Paid PA 19123 State PA 19123 To Whom Paid PA 19123 State PA 19123 To Whom Paid PA 19123 State PA 19123 Mo DAY YEAR Mo DAY YEAR State PA 19123 To Whom Paid PA 19123 State PA 19123 Mo DAY YEAR Mo DAY YEAR To Whom Paid PA 19139 State PA 19139 To Whom Paid PA 19139 |
| City Line Investors, LP Mailing Address 1 Belmont Avenue 9 1 2010 \$ 2,500.00 City Bala Cynwyd State 2ip Code (Plus 4) 19004 Office Rent To Whom Paid Fusion 9 10 2010 \$ 35,739.30 City Philadelphia State 2ip Code (Plus 4) 19123 School Choice Project To Whom Paid Day YEAR To Whom Paid PA 19123 School Choice Project To Whom Paid Day Office Rent To Whom Paid Day PA 19139 Consulting Fee To Whom Paid Day Philadelphia State 2ip Code (Plus 4) 19139 Consulting Fee To Whom Paid Day PA 19139 Consulting Fee |
| City Philadelphia State PA I9139 Consulting Fee To Whom Paid PA I9139 |
| PA 19004 Office Rent |
| To Whom Paid Fusion Mailing Address 520 N. Columbus Blvd Suite 204 State 2ip Code (Plus 4) Description of Expenditure PA 19123 School Choice Project To Whom Paid Dawn Chavous Mailing Address 254 S. Saint Bernard Street State 2ip Code (Plus 4) Description of Expenditure PA 19123 MO DAY YEAR MO DAY YEAR School Choice Project To Whom Paid Dayn Chavous Mo DAY YEAR State 2ip Code (Plus 4) Description of Expenditure PA 19139 To Whom Paid Description of Expenditure PA 19139 To Whom Paid Dayn Chavous |
| Fusion Mailing Address 520 N. Columbus Blvd Suite 204 State Philadelphia State PA 19123 To Whom Paid Dawn Chavous Mailing Address 254 S. Saint Bernard Street State PA 19123 School Choice Project MO DAY YEAR MO DAY YEAR MO DAY YEAR ## A 19123 ## A 2010 ## A 3,000.00 ## A 3,000.00 ## A 19139 |
| Name |
| City Philadelphia State PA 19123 School Choice Project To Whom Paid Dawn Chavous Mailing Address 254 S. Saint Bernard Street State PA 19139 Zip Code (Plus 4) Philadelphia State PA 19139 PA 19139 PA 19139 PA 19139 PA 19139 PA 19139 PA PER PA 19139 PA PER PA 19139 PA PER PA |
| To Whom Paid Dawn Chavous Mo Day PA Balling Address 254 S. Saint Bernard Street City Philadelphia State PA Dawn Chavous State PA Day Day PA Day PEAR State PA Day Day PA Day PEAR PA Description of Expenditure Consulting Fee To Whom Paid Dawn Chavous |
| To Whom Paid Dawn Chavous Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR A 1 2010 \$ 3,000.00 City Philadelphia State PA 19139 Consulting Fee To Whom Paid Dawn Chavous |
| Dawn Chavous Mo DAY YEAR Mailing Address 254 S. Saint Bernard Street 8 1 2010 \$ 3,000.00 City Philadelphia State PA 19139 Description of Expenditure Consulting Fee To Whom Paid Dawn Chavous |
| Mailing Address 254 S. Saint Bernard Street 8 1 2010 \$ 3,000.00 City Philadelphia State Zip Code (Plus 4) Description of Expenditure Consulting Fee To Whom Paid Dawn Chavous |
| City Philadelphia State Zip Code (Plus 4) Description of Expenditure Consulting Fee To Whom Paid Dawn Chavous |
| To Whom Paid Dawn Chavous PA 19139 Consulting Fee MO DAY YEAR |
| To Whom Paid Dawn Chavous MO DAY YEAR |
| Dawn Chavous MO DAY YEAR |
| |
| Mailing Address |
| |
| City Philadelphia State Zip Code (Plus 4) Description of Expenditure |
| PA 19139 Consulting Fee |
| To Whom Paid MO DAY YEAR |
| Peerless Insurance Comapny |
| Mailing Address 62 Maple Avenue 9 10 2010 \$ 1,840.00 |
| City Keene State Zip Code (Plus 4) Description of Expenditure |
| NH 3431 Commercial Insurance Package |
| To Whom Paid MO DAY YEAR |
| Air Trans Airline |
| Mailing Address Dep OSF 9955 Air Tran Blvd 9 9 2010 \$ 246.80 |
| City Orlando State Zip Code (Plus 4) Description of Expenditure |
| FL 32827 Airfare for guest speaker |
| |
| To Whom Paid MO DAY YEAR |
| To Whom Paid Max and Me Catering MO DAY YEAR |
| MO DAY YEAR |
| Max and Me Catering MO DAY YEAR |

| To Whom Paid | | | | DAY | YEAR | | | |
|---|---|-------|---------------------------------------|----------|----------|------------|------------|--|
| The National Constitution Center | | | | | ILAK | | | |
| Mailing Address 525 Arch Street | | | | 25 | 2010 | \$ | 1,625.00 | |
| City Philadelphia State Zip Code (Plus 4) | | | Description of Expenditure | | | | | |
| | PA | 19106 | Rent of Space for event dated 9/14/10 | | | | /10 | |
| To Whom Paid | | | | DAY | YEAR | | | |
| The National Constitution Center | | | МО | | ILAK | | | |
| Mailing Address 525 Arch Street | | | | 2 | 2010 | \$ | 1,625.00 | |
| City Philadelphia | Philadelphia State Zip Code (Plus 4) Description of Expenditure | | | | enditure | | | |
| | PA | 19106 | Rent of Space for event dated 9/14/10 | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | |
| United States Post Office | | | | DAT | ILAK | | | |
| Mailing Address 50 East Wynnwood Road Suite 22 | | | | 19 | 2010 | \$ | 36.00 | |
| City Wynnwood | Wynnwood State Zip Code (Plus 4) Description of Expenditure | | | enditure | | | | |
| | PA | 19096 | Rental Charge for P.O. Box 416 | | | | | |
| | | | | | | PAGE TOTAL | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | \$ | 173,535.40 | |