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 9900	251				port ed B		CA	NDI	DATE		COMN	AITTEE	Y	LUB	D1131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		War	d 16	5 Den	nocra	tic E	xecuti	ve C	ommitte	ee				
Street Address:	2315 W CUME	BERLAN	D ST														
City:	PHILADELPHIA	4						State	e:	PA			Zip Co	de: 19	9132		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		P	POST-	3.		AMENDMENT REPORT?		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pre	-	5.	30 DA		P	POST-	6.		TERMINA REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7. X	Year 2010					NG ME					PAPER		$ \checkmark $	DISKE	TTE
Name of Office S	ought by Candida	te:			_			DAT	ΈΟ	F ELEC	CTIC	ON	District Number	Office Code	Pai	rty Code	County Code
DEDDECENTATI	VE IN THE GENER	۸۱ ۸۵۵	EMRIV					МО		DAY	Y	EAR		STH			51
REFRESENTATI	VE IN THE GENER	AL ASS	CMBLI						11		2	2010		(SEE IN	STRUCTI	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	R			МО		DAY	Y	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		1 1	2	010	Т	0		12	13)	31	2010					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				3,	951.69					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	Sche	dule	: I)	\$					0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				3,	951.69					
D. Total Expend	ditures (From Sch	edule II	I)				\$;	160.69					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$				3,7	791.00					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	()	\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	')			\$					0.00					
				AFF	ID/	٩VI	T SE	CTI	NC								
	a Committee report, incl	•	_									_		of my kno	wledge	and belie	ef , true
correct and comple	ete.													,			
Sworn to and subs	cribed before me this day of	•	20				_				:	Signature	of Perso	n Submit	ting Re	port	
	Signatu	re					_						Prin	ted Name	•		
My Commission Ex	rpires						_		•				Ema	il			
	МО	D	AY	YR						Are	a Co	de	Daytin	ne Teleph	one Nu	mber	
	a report of a cand					•											
No 320) as amende		iy knowi	eage and bei	er this	poin	ticai	comm	ittee r	ias n	ot violai	ea ai	ny provis	ions or th	e act or J	une 3,1	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20									Si	ignature	of Candid	ate		
	<u> </u>		-				_						Printe	ed Name			
My Commission Exp	Signature ires						_						Ema	nil			-
	МО	D	AY	YR			-			Area	Code		D	aytime T	Felephone Number		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
Ward 16 Democratic Executive Committee	From:	1/1/201	<u>0</u> To:	12/31/2010
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)			\$	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)	\$	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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

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	o :	
					DATE		P	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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	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 Scho	edule 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				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
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/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	•			\$	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		
Ward 16 Democratic Executive Committee	From:	<u>1/1/2010</u> To:	<u>12/31/2010</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 Candid	ate		Reportin	g Period			
			From:			To:	
				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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary 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 Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or 0	Candidate		Reporti	ng Period				
Ward 16 Democratic Executiv	e Committee		From	From <u>1/1/2010</u> To:				
				DATE			AMOUNT	
To Whom Paid Citizens Bank			мо	DAY	YEAR			
Mailing Address 1500 N. Broad St				30	2010	\$	12.00	
City Philadelphia	State PA	Zip Code (Plus 4)	1	otion of Exp y Bank Fee				
To Whom Paid Comcast			МО	DAY	YEAR			
Mailing Address P.O. Box 3	006		12	21	2010	\$	148.69	
City Southeastern State Zip Code (Plus 4)			1	otion of Exp			erland St	

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

PAGE TOTAL

160.69