Commonwealth of Pennsylvania

Campaign Finance Report

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

Filer Identification Number:	1776356	Report Filed By:	CANDIDATE 1.	COMMITTEE 2. X	LOBBYIST 3.

Name of Filing Committee, Candidate or Lobbyist: PhilPAC

Street Address: 1341 N Delaware Ave. Suite 200

City: Philadelphia | State: PA | Zip Code: 19125-4300

TYPE OF REPORT										
	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	YES	NO	X
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	YES	NO	X
	Annual Report	7. X	YEAR	2014						

Name of Office Sought by Candidate:	DATE OF ELECTION MO.	DAY	YEAR	District Number:	Office Code:	Party Code:	County Code:
Other					OTH		51

Summary of Receipts and Expenditures from: MO. 11 DAY 25 YEAR 2014 To MO. 12 DAY 31 YEAR 2014

A. Amount Brought Forward From Last Report	$	32,609.57
B. Total Monetary Contributions and Receipts (From Schedule I)	$	10,131.76
C. Total Funds Available (Sum of Lines A and B)	$	42,741.33
D. Total Expenditures (From Schedule III)	$	704.00
E. Ending Cash Balance (Subtract Line D from Line C)	$	42,037.33
F. Value of In-Kind Contributions Received (From Schedule II)	$	0
G. Unpaid Debts and Obligations (From Schedule IV)	$	0

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PHILA CITY COMMISSIONERS

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, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 3rd day of February 20 15

Signature of Notary Public

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
RONI NEUMANN
PHILADELPHIA CITY, PHILADELPHIA COUNTY
My Commission Expires Jul 16, 2017

My commission expires MO. DAY 2017 YEAR

Charlotte Kormann
Signature of Person Submitting Report

Charlotte Kormann
Printed Name

215 423-9381
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

My commission expires MO. DAY YEAR

Signature of Candidate

Printed Name

Area Code Daytime Telephone Number

SCHEDULE I

Contributions And Receipts

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - $50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	$ 0

2. CONTRIBUTIONS $50.01 TO $250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		$ 0
All Other Contributions (Part B)		$ 0
TOTAL for the Reporting Period	(2)	$ 0

3. CONTRIBUTIONS OVER $250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		$ 10,130.10
All Other Contributions (Part D)		$ 0
TOTAL for the Reporting Period	(3)	$ 10,130.10

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
TOTAL for the Reporting Period	(4)	$ 1.66

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 Page 1, Report Cover Page, Item B.)	$ 10,131.76

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 Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

Full Name of Contributing Committee	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributing Committee	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributing Committee	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributing Committee	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributing Committee	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributing Committee	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

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

Part A Total

Part B

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 Committe or Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

Full Name of Contributor	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributor	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributor	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributor	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributor	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

Full Name of Contributor	MO. DAY YEAR	
Mailing Address		
City	State	Zip Code (Plus 4)

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

Part B 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 over $250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

Full Name of Contributing Committee	MO.	DAY	YEAR	
PARPAC	12	4	2014	$ 10,130.10

Mailing Address		
500 N 12th ST		
City	State	Zip Code (Plus 4)
Lomoyne	PA	17043

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

Part C Total $ 10,130.10

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
PhilPAC	From 11/25/2014 To 12/31/2014

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Employer Name		Occupation	
Employer Mailing Address/Principal Place of Business			

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Employer Name		Occupation	
Employer Mailing Address/Principal Place of Business			

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Employer Name		Occupation	
Employer Mailing Address/Principal Place of Business			

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

Part D Total

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
PhilPAC	From 11/25/2014 To 12/31/2014

Full Name	MO.	DAY	YEAR	$
Citizen Bank	11	30	2014	0.72

Mailing Address		
P O Box 7000		
City: Providence	State: RI	Zip Code (Plus 4): 02940

Receipt Description: interest

Full Name	MO.	DAY	YEAR	$
Citizen Bank	12	31	2014	0.94

Mailing Address		
P O Box 7000		
City: Providence	State: RI	Zip Code (Plus 4): 02940

Receipt Description: interest

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

Part E Total $ 1.66

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 Committe or Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF $50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	$ 0

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF $50.01 TO $250.00 (FROM PART F)		
TOTAL for the Reporting Period	(2)	$ 0

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER $250 (FROM PART G)		
TOTAL for the Reporting Period	(3)	$ 0

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2 and 3; also enter this amount on Page 1, Report Cover Page, Item F.	$ 0

SCHEDULE II

Part F

In-kind Contributions Received

VALUE OF $50.01 TO $250.00

Name of Filing Committee or Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Description of Contribution			

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Description of Contribution			

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Description of Contribution			

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Description of Contribution			

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

Part F Total

SCHEDULE II
Part G

In-kind Contributions Received

VALUE OVER $250.00

Name of Filing Committee or Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Employer of Contributor		Occupation	
Employer Mailing Address/Principal Place of Business		Description of Contribution	

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Employer of Contributor		Occupation	
Employer Mailing Address/Principal Place of Business		Description of Contribution	

Full Name of Contributor			MO. DAY YEAR
Mailing Address			
City	State	Zip Code (Plus 4)	
Employer of Contributor		Occupation	
Employer Mailing Address/Principal Place of Business		Description of Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

Part G Total

SCHEDULE III

Statement Of Expenditures

Name of Filing Committe or Candidate	Reporting Period
PhilPAC	From 11/25/2014 To 12/31/2014

To Whom Paid	MO.	DAY	YEAR	
Friends of Cindy Bass	12	4	2014	$ 700.00

Mailing Address		
PO Box 18906		
City	State	Zip Code (Plus 4)
Philadelphia	PA	19119

Description of Expenditure: contribution

To Whom Paid	MO.	DAY	YEAR	
Citizen Bank	12	31	2014	$ 4.00

Mailing Address		
P O Box 7000		
City	State	Zip Code (Plus 4)
Providence	RI	02940

Description of Expenditure: Maintenance Fee

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

Schedule III Total
$ 704.00

SCHEDULE IV

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 Period
PhilPAC	From 11/25/2014 To 12/31/2014

Name of Creditor				Outstanding Balance of Debt
Mailing Address		Date Debt Incurred MO. DAY YEAR		
City	State	Zip Code (Plus 4)		
Description of Debt				

Name of Creditor				Outstanding Balance of Debt
Mailing Address		Date Debt Incurred MO. DAY YEAR		
City	State	Zip Code (Plus 4)		
Description of Debt				

Name of Creditor				Outstanding Balance of Debt
Mailing Address		Date Debt Incurred MO. DAY YEAR		
City	State	Zip Code (Plus 4)		
Description of Debt				

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

Schedule IV Total