

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: 2014205	Report Filed By: CANDIDATE 1.	COMMITTEE 2. X	LOBBYIST 3.
Name of Filing Committee, Candidate or Lobbyist: Friends of Mike Driscoll			
Street Address: PO Box 63317			
City: Philadelphia	State: PA	Zip Code: 19114	
TYPE OF REPORT	6th Tuesday Pre-Primary 1.	2nd Friday Pre-Primary 2. X	30 Day Post-Primary 3.
	6th Tuesday Pre-Election 4.	2nd Friday Pre-Election 5.	30 Day Post-Election 6.
	Amendment Report? YES X NO	Termination Report? YES NO	X
Annual Report 7.	YEAR 2018		

Name of Office Sought by Candidate:	DATE OF ELECTION MO: 5 DAY: 15 YEAR: 2018	District Number:	Office Code:	Party Code:	County Code:
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Summary of Receipts and Expenditures from:	MO: 3 DAY: 27 YEAR: 2018	To	MO: 4 DAY: 30 YEAR: 2018	COUNTY COMMISSIONERS COUNTY BLDG. OF ELECTIONS MAY - 9 PM 3:54
	A. Amount Brought Forward From Last Report	\$	32,979.34	
	B. Total Monetary Contributions and Receipts (From Schedule I)	\$	8,735.00	
	C. Total Funds Available (Sum of Lines A and B)	\$	41,714.34	
	D. Total Expenditures (From Schedule III)	\$	16,366.04	
	E. Ending Cash Balance (Subtract Line D from Line C)	\$	25,348.30	
	F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
	G. Unpaid Debts and Obligations (From Schedule IV)	\$	0	

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

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL SARA CONOVER, Notary Public City of Philadelphia, Phila. County My Commission Expires April 30, 2019	20 18	Signature of Person Submitting Report Erin Shroy Printed Name Erin Shroy
	MO. DAY YEAR	

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

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL SARA CONOVER, Notary Public City of Philadelphia, Phila. County My Commission Expires April 30, 2019	20 18	Signature of Candidate Michael J. Driscoll Printed Name Michael J. Driscoll
	MO. DAY YEAR	

SCHEDULE I
Contributions And Receipts

Detailed Summary Page

Name of Filing Committee or Candidate Friends of Mike Driscoll	Reporting Period From <u>03/27/2018</u> To <u>04/30/2018</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period (1)	\$ 1,000.00
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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)	\$ 235.00
TOTAL for the Reporting Period (2)	\$ 235.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)

Contributions Received from Political Committees (Part C)	\$ 5,000.00
All Other Contributions (Part D)	\$ 2,500.00
TOTAL for the Reporting Period (3)	\$ 7,500.00

4. OTHER RECEIPTS, REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)

TOTAL for the Reporting Period (4)	\$ 0
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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.)	\$ 8,735.00
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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 Friends of Mike Driscoll			Reporting Period From 03/27/2018 To 04/30/2018		
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 Committee or Candidate Friends of Mike Driscoll			Reporting Period From <u>03/27/2018</u> To <u>04/30/2018</u>			
Full Name of Contributor Emily Gallagher			MO. 3	DAY. 28	YEAR. 2018	\$ 25.00
Mailing Address 8224 Pine Road						
City Philadelphia	State PA	Zip Code (Plus 4) 19111				
Full Name of Contributor Maureen Groome			MO. 4	DAY. 4	YEAR. 2018	\$ 35.00
Mailing Address 13470 Proctor Road						
City Philadelphia	State PA	Zip Code (Plus 4) 19116				
Full Name of Contributor Mariann Dempsey			MO. 4	DAY. 30	YEAR. 2018	\$ 100.00
Mailing Address 4444 Aubry Avenue						
City Philadelphia	State PA	Zip Code (Plus 4) 19114				
Full Name of Contributor Beth Rocks			MO. 4	DAY. 30	YEAR. 2018	\$ 75.00
Mailing Address						
City Philadelphia	State PA	Zip Code (Plus 4)				
Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.						
Part B Total \$ 235.00						

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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate Friends of Mike Driscoll			Reporting Period From <u>03/27/2018</u> To <u>04/30/2018</u>			
Full Name of Contributing Committee Cement Mason & Plasterers Local 592 PAC			MO. 3	DAY 28	YEAR 2018	\$ 1,500.00
Mailing Address 2843 Snyder Avenue						
City Philadelphia		State PA	Zip Code (Plus 4) 19145			
Full Name of Contributing Committee Plumbers Union Local 690 Election Political Action			MO. 3	DAY 28	YEAR 2018	\$ 1,500.00
Mailing Address 2791 Southampton Road						
City Philadelphia		State PA	Zip Code (Plus 4) 19154			
Full Name of Contributing Committee Iron Workers Local #401 PAC Fund			MO. 3	DAY 28	YEAR 2018	\$ 1,000.00
Mailing Address 11600 Norcom Road						
City Philadelphia		State PA	Zip Code (Plus 4) 19154			
Full Name of Contributing Committee Philadelphia Riverwards United PAC			MO. 4	DAY 4	YEAR 2018	\$ 1,000.00
Mailing Address 1617 E Eyre Street						
City Philadelphia		State PA	Zip Code (Plus 4) 19123			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						Part C Total \$ 5,000.00

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			
Friends of Mike Driscoll				From		To	
				03/27/2018		04/30/2018	
Full Name of Contributor				MO.	DAY.	YEAR.	\$
james Anderson				4	28	2018	
Mailing Address							
100 Street Road							
City		State	Zip Code (Plus 4)				
New Hope		PA	18938				
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	
\$	2,500.00

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 Friends of Mike Driscoll		Reporting Period From 03/27/2018 To 04/30/2018	
Full Name		MO DAY YEAR	
Mailing Address			
City	State	Zip Code (Plus 4)	
Receipt Description			
Full Name		MO DAY YEAR	
Mailing Address			
City	State	Zip Code (Plus 4)	
Receipt Description			
Full Name		MO DAY YEAR	
Mailing Address			
City	State	Zip Code (Plus 4)	
Receipt Description			
Full Name		MO DAY YEAR	
Mailing Address			
City	State	Zip Code (Plus 4)	
Receipt Description			

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

Part E Total

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 Friends of Mike Driscoll	Reporting Period From <u>03/27/2018</u> To <u>04/30/2018</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period (1)	\$	0
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2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)

TOTAL for the Reporting Period (2)	\$	0
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3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250 (FROM PART G)

TOTAL for the Reporting Period (3)	\$	0
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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
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SCHEDULE II

Part F

In-kind Contributions Received

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Friends of Mike Driscoll			Reporting Period From <u>03/27/2018</u> To <u>04/30/2018</u>		
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 Friends of Mike Driscoll			Reporting Period From 03/27/2018 To 04/30/2018		
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		
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 Committee or Candidate Friends of Mike Driscoll			Reporting Period From <u>03/27/2018</u> To <u>04/30/2018</u>			
To Whom Paid PayPal			MO.	DAY.	YEAR.	\$ 3.20
			4	30	2018	
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure Fee for deposit						
To Whom Paid Philadelphia Federal Credit Union			MO.	DAY.	YEAR.	\$ 3,000.00
			3	29	2018	
Mailing Address 12800 Townsend Road						
City Philadelphia		State PA	Zip Code (Plus 4) 19154			
Description of Expenditure Credit Card payment						
To Whom Paid Afganastan memorial			MO.	DAY.	YEAR.	\$ 100.00
			3	29	2018	
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure Donation						
To Whom Paid Michael Driscoll			MO.	DAY.	YEAR.	\$ 200.00
			3	29	2018	
Mailing Address 9630 Milnor						
City Philadelphia		State PA	Zip Code (Plus 4) 19114			
Description of Expenditure Reimburse back Afgahan						
To Whom Paid Robin Hoshler			MO.	DAY.	YEAR.	\$ 200.00
			4	2	2018	
Mailing Address 5388 Magnolia Street						
City Philadlephia		State PA	Zip Code (Plus 4)			
Description of Expenditure Donation						
To Whom Paid LAOH #17			MO.	DAY.	YEAR.	\$ 100.00
			4	5	2018	
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure Donation						

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate Friends of Mike Driscoll			Reporting Period From 03/27/2018 To 04/30/2018			
To Whom Paid Rich Lazer for Congress			MO. 4	DAY 5	YEAR 2018	\$ 500.00
Mailing Address PO Box 40622						
City Philadelphia	State PA	Zip Code (Plus 4) 19107				
Description of Expenditure Contribution						
To Whom Paid Costell Boxing			MO. 4	DAY 4	YEAR 2018	\$ 200.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Expenditure sponsorship						
To Whom Paid American Express Credit Card			MO. 4	DAY 4	YEAR 2018	\$ 132.84
Mailing Address PO Box 650448						
City Dallas	State TX	Zip Code (Plus 4) 75265-0448				
Description of Expenditure credit card payment						
To Whom Paid Costello Boxing			MO. 4	DAY 4	YEAR 2018	\$ 100.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Expenditure Ticket						
To Whom Paid Holmesburg Civic Associatiion			MO. 4	DAY 7	YEAR 2018	\$ 300.00
Mailing Address						
City Philadelphia	State PA	Zip Code (Plus 4)				
Description of Expenditure Donation						
To Whom Paid Pat Gallagher			MO. 4	DAY 9	YEAR 2018	\$ 280.00
Mailing Address 1762 Frankford Avenue Apt 3						
City Philadelphia	State PA	Zip Code (Plus 4) 19125				
Description of Expenditure reimbursement committee stuff						

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate Friends of Mike Driscoll			Reporting Period From 03/27/2018 To 04/30/2018			
To Whom Paid St. Martin			MO. 4	DAY 14	YEAR 2018	\$ 500.00
Mailing Address						
City Philadelphia	State PA	Zip Code (Plus 4)				
Description of Expenditure donation						
To Whom Paid 21st Ward sports Assoc			MO. 4	DAY 20	YEAR 2018	\$ 100.00
Mailing Address 8730 Old Lion Road						
City Philadelphia	State PA	Zip Code (Plus 4) 19128				
Description of Expenditure sponsor						
To Whom Paid Officer Daniel Boyle Scholarship Fund			MO. 4	DAY 22	YEAR 2018	\$ 150.00
Mailing Address PO Box 11511						
City Philadelphia	State PA	Zip Code (Plus 4) 19116				
Description of Expenditure Contribution						
To Whom Paid Saint Timorthy Rectory			MO. 4	DAY 23	YEAR 2018	\$ 100.00
Mailing Address 3001 Levick Street						
City Philadelphia	State PA	Zip Code (Plus 4) 19149				
Description of Expenditure Sponsor						
To Whom Paid Philadelphia E&T Charter High School			MO. 4	DAY 23	YEAR 2018	\$ 100.00
Mailing Address 1420-22 chestnut Street						
City Philadlephia	State PA	Zip Code (Plus 4) 19102				
Description of Expenditure Sponsor						
To Whom Paid District Council 21 Scholarship Program			MO. 4	DAY 23	YEAR 2018	\$ 200.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Expenditure sponsor						

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate Friends of Mike Driscoll			Reporting Period From 03/27/2018 To 04/30/2018			
To Whom Paid Thomas J Kilkenny, Sr Memorial Golf Outing			MO.	DAY.	YEAR.	\$ 200.00
			4	23	2018	
Mailing Address 1020 Claire Avenue						
City Huntingdon Valley		State PA	Zip Code (Plus 4) 19006			
Description of Expenditure sponsor						
To Whom Paid St. Dominics School			MO.	DAY.	YEAR.	\$ 100.00
			4	23	2018	
Mailing Address						
City Philadelphia		State PA	Zip Code (Plus 4)			
Description of Expenditure Donation						
To Whom Paid St. Huberts High School			MO.	DAY.	YEAR.	\$ 100.00
			4	27	2018	
Mailing Address 7320 Torresdale Avenue						
City Philadelphia		State PA	Zip Code (Plus 4) 19136			
Description of Expenditure Donation						
To Whom Paid Torresdale Hockey			MO.	DAY.	YEAR.	\$ 100.00
			4	29	2018	
Mailing Address Linden Avenue						
City Philadelphia		State PA	Zip Code (Plus 4) 19114			
Description of Expenditure Donation						
To Whom Paid Fraternal order of Police lodge 5 PAC Fund			MO.	DAY.	YEAR.	\$ 200.00
			4	26	2018	
Mailing Address 11630 Caroline Road						
City Philadelphia		State PA	Zip Code (Plus 4) 19154			
Description of Expenditure reelection fund						
To Whom Paid Northeast Democratic Group			MO.	DAY.	YEAR.	\$ 300.00
			4	26	2018	
Mailing Address 2201 Derby Drive						
City Cinnaminson		State NJ	Zip Code (Plus 4) 08077			
Description of Expenditure donation						

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate Friends of Mike Driscoll			Reporting Period From 03/27/2018 To 04/30/2018			
To Whom Paid AOH Mike Doyle Division 4			MO. 4	DAY 27	YEAR 2018	\$ 100.00
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure Sponsor						
To Whom Paid PA-HDCC			MO. 4	DAY 27	YEAR 2018	\$ 3,000.00
Mailing Address PO Box 555						
City Harrisburg		State PA	Zip Code (Plus 4) 17108			
Description of Expenditure contributioin						
To Whom Paid Tina Davis For Senate			MO. 4	DAY 27	YEAR 2018	\$ 500.00
Mailing Address						
City		State	Zip Code (Plus 4)			
Description of Expenditure Contribution						
To Whom Paid Democratic City Committee			MO. 4	DAY 29	YEAR 2018	\$ 2,500.00
Mailing Address 219 Spring Garden Street						
City Philadelphia		State PA	Zip Code (Plus 4) 19123			
Description of Expenditure Contribution						
To Whom Paid Philadelphia Federal Credit Union			MO. 4	DAY 30	YEAR 2018	\$ 3,000.00
Mailing Address 12800 Townsend Road						
City Philadelphia		State PA	Zip Code (Plus 4) 19154			
Description of Expenditure credit card payment						

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

Schedule III Total
\$ 16,366.04

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 Friends of Mike Driscoll				Reporting Period From 03/27/2018 To 04/30/2018			
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		

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER ▶ 2016 00169		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Mike Driscoll						
STREET ADDRESS PO Box 63317						
CITY PHILADELPHIA		STATE PA	ZIP CODE 19114			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE Representative Assembly GENERAL	DISTRICT NO. 173	PARTY DEM	DATE OF ELECTION		
				MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
2ND FRIDAY PRE-PRIMARY	2. <input checked="" type="checkbox"/>	MO. DAY YEAR	MO. DAY YEAR	CITY COMMISSIONERS COUNTY BD. OF ELECTIONS 2018 MAY - 9 PM 6:01		
30 DAY POST-PRIMARY	3.	03 27 2018	04 30 2018			
6TH TUESDAY PRE-ELECTION	4.	CASH BALANCE AT END OF REPORTING PERIOD: \$ 0.00				
2ND FRIDAY PRE-ELECTION	5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0.00				
30 DAY POST-ELECTION	6.	AMENDMENT REPORT?	YES			NO
ANNUAL REPORT	7.	TERMINATION REPORT?	YES			NO

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ 20 18

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL
 SARA CONOVER, Notary Public
 City of Philadelphia, Philadelphia County
 My Commission Expires April 30, 2019 DAY 19 YR.

 SIGNATURE OF PERSON SUBMITTING REPORT

Michael J Driscoll
 PRINTED NAME

267 784-5805
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE

 DAYTIME TELEPHONE NUMBER