

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	9900251	Report Filed	CANDIDATE	1.	COMMITTEE	2.	X	LOBBYIST	3.	
Name of Filing Committee, Candidate or Lobbyist Ward 16 Democratic Executive Committee										
Street Address: 2252 N Woodstock Street										
City: Philadelphia					State: PA		Zip Code: 19132			
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.	YEAR	2018						

Name of Office Sought by Candidate	DATE OF ELECTION	District Number:	Office Code:	Party Code:	County Code:
Representative in the General Assembly	MO. DAY YEAR	197	STH	DEM	51
	11 6 2018				

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
	6	5	2018		9	17	2018	
A. Amount Brought Forward From Last Report			\$			580.91		COUNTY BD. OF ELECTIONS 2018 SEP 21 P 12:00 CITY COMMISSIONERS
B. Total Monetary Contributions and Receipts (From Schedule I)			\$			0		
C. Total Funds Available (Sum of Lines A and B)			\$			580.91		
D. Total Expenditures (From Schedule III)			\$			75.00		
E. Ending Cash Balance (Subtract Line D from Line C)			\$			505.91		
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
 Sworn to and subscribed before me this

20th day of September 2018

Signature: [Signature] Signature of Person Submitting Report: Andrew Smith

Printed Name: Andrew Smith

My commission expires: 08 05 MO. DAY YEAR

Notary Seal: APRIL'S WOODBERRY - Notary Public, Philadelphia County, Commission Expires Aug 3, 2015, Commission Number 1276385, Area Code

Daytime Telephone Number: 609-5876

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

Sworn to and subscribed before me this

____ day of _____ 20____

Signature: _____ Signature of Candidate: _____

Printed Name: _____

My commission expires: _____ MO. DAY YEAR

Area Code: _____ Daytime Telephone Number: _____

SCHEDULE I
Contributions And Receipts
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Ward 16 Democratic Executive Committee	From <u>06/05/2018</u> To <u>09/17/2018</u>

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	\$ 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	\$ 0
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 0
All Other Contributions (Part D)	\$ 0
TOTAL for the Reporting Period	\$ 0
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	\$ 0
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.)	\$ 0

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 Ward 16 Democratic Executive Committee			Reporting Period From 06/05/2018 To 09/17/2018		
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)		
Full Name of Contributing Committee			MO.	DAY	YEAR
Enter Grand Total of Part A on Schedule I, Detailed Summary Page,					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 Ward 16 Democratic Executive Committee			Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</u>		
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)		
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, S					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 Ward 16 Democratic Executive Committee	Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</u>
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Full Name of Contributing Committee	MO. DAY YEAR
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Mailing Address		
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City	State	Zip Code (Plus 4)
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Full Name of Contributing Committee	MO. DAY YEAR
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Mailing Address		
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City	State	Zip Code (Plus 4)
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Full Name of Contributing Committee	MO. DAY YEAR
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Mailing Address		
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City	State	Zip Code (Plus 4)
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Full Name of Contributing Committee	MO. DAY YEAR
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Mailing Address		
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City	State	Zip Code (Plus 4)
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Full Name of Contributing Committee	MO. DAY YEAR
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Mailing Address		
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City	State	Zip Code (Plus 4)
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Full Name of Contributing Committee	MO. DAY YEAR
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Mailing Address		
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City	State	Zip Code (Plus 4)
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Enter Grand Total of Part C on Schedule I, Detailed Summary Page, S	Part C Total
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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 Ward 16 Democratic Executive Committee			Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</u>		
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, S					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 Ward 16 Democratic Executive Committee			Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</u>		
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					
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, S					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 Ward 16 Democratic Executive Committee	Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	\$ 0

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

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250 (FROM PART G)	
TOTAL for the Reporting Period	\$ 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
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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 Ward 16 Democratic Executive Committee			Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</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					
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					Part F Total

**SCHEDULE II
Part G**

In-kind Contributions Received

VALUE OVER \$250.00

Name of Filing Committee or Candidate Ward 16 Democratic Executive Committee			Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</u>		
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 Ward 16 Democratic Executive Committee				Reporting Period From <u>06/05/2018</u> To <u>09/17/2018</u>			
To Whom Paid Citizens Bank				MO.	DAY	YEAR	
				6	29	2018	\$ 25.00
Mailing Address 1500 N Broad St							
City Philadelphia		State PA		Zip Code (Plus 4) 19132			
Description of Expenditure Monthly Bank Fee							
To Whom Paid Citizens Bank				MO.	DAY	YEAR	
				7	31	2018	\$ 25.00
Mailing Address 1500 N Broad St							
City Philadelphia		State PA		Zip Code (Plus 4) 19132			
Description of Expenditure Monthly Bank Fee							
To Whom Paid Citizens Bank				MO.	DAY	YEAR	
				8	31	2018	\$ 25.00
Mailing Address 1500 N Broad St							
City Philadelphia		State PA		Zip Code (Plus 4) 19132			
Description of Expenditure Monthly Bank Fee							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							Schedule III Total \$ 75.00

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 Ward 16 Democratic Executive Committee					Reporting Period From 06/05/2018 To 09/17/2018		
Name of Creditor							Outstanding Balance of Deb
Mailing Address				Date Debt Incurred	MO.	DAY	YEAR
City		State	Zip Code (Plus 4)				
Description of Debt							
Name of Creditor							Outstanding Balance of Deb
Mailing Address				Date Debt Incurred	MO.	DAY	YEAR
City		State	Zip Code (Plus 4)				
Description of Debt							
Name of Creditor							Outstanding Balance of Deb
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 C							Schedule IV Total