

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: 2006453 1776002	Report Filed By: CANDIDATE	1.	COMMITTEE	2. X	LOBBYIST	3.				
Name of Filing Committee, Candidate or Lobbyist: Friends of the 66A Ward										
Street Address: 3824 Chalfont Dr										
City: Philadelphia				State: PA		Zip Code: 19154				
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	2018						

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

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
	11	28	2018		12	31	2018	
A. Amount Brought Forward From Last Report				\$	82,206.22			
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	0			
C. Total Funds Available (Sum of Lines A and B)				\$	82,206.22			
D. Total Expenditures (From Schedule III)				\$	624.81			
E. Ending Cash Balance (Subtract Line D from Line C)				\$	81,581.41			
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

9 day of January 2019

Court Schenewolf Signature

Shawn Dillon Signature of Person Submitting Report

Shawn Dillon Printed Name

215 Area Code 868-8138 Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL MO. DAY YEAR
COURTNEY SCHENEWOLF, Notary Public
 City of Philadelphia, Phila. County
 My Commission Expires May 2, 2020

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

____ 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 Friends of the 66A Ward	Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</u>
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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)	\$	0
All Other Contributions (Part D)	\$	0
	TOTAL for the Reporting Period (3)	\$ 0

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period (4)	\$ 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
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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 the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</u>		
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
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 the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</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, 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 Friends of the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</u>		
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 C on Schedule I, Detailed Summary Page, Section 3.

Part C Total

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 Friends of the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</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					
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 Friends of the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</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, 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 the 66A Ward	Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</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 the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</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 the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</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 Friends of the 66A Ward			Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</u>			
To Whom Paid Sprint			MO.	DAY	YEAR	\$ 95.54
			11	27	2018	
Mailing Address Sprint.com						
City		State	Zip Code (Plus 4)			
Description of Expenditure Ward Cell Phone						
To Whom Paid Staples			MO.	DAY	YEAR	\$ 37.09
			12	4	2018	
Mailing Address 2329 Street Rd						
City		State	Zip Code (Plus 4)			
Bensalem		PA	19020			
Description of Expenditure Printer Ink						
To Whom Paid Dagwoods Pub			MO.	DAY	YEAR	\$ 70.00
			12	5	2018	
Mailing Address 4625 Linden Ave						
City		State	Zip Code (Plus 4)			
Philadelphia		PA	19114			
Description of Expenditure Lunch Meeting						
To Whom Paid Northeast Victims Services			MO.	DAY	YEAR	\$ 50.00
			12	6	2018	
Mailing Address						
City		State	Zip Code (Plus 4)			
Philadelphia		PA				
Description of Expenditure Donation						
To Whom Paid Tom Raiker Schlorship Fund			MO.	DAY	YEAR	\$ 50.00
			12	6	2018	
Mailing Address						
City		State	Zip Code (Plus 4)			
Philadelphia		PA				
Description of Expenditure Donation						
To Whom Paid Iron Hill Brewery			MO.	DAY	YEAR	\$ 142.25
			12	13	2018	
Mailing Address 785 Huntingdon Pike						
City		State	Zip Code (Plus 4)			
Huntingdon Valley		PA	19006			
Description of Expenditure Dinner Meeting						

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate Friends of the 66A Ward			Reporting Period From 11/28/2018 To 12/31/2018			
To Whom Paid USPS			MO.	DAY	YEAR	\$ 5.29
			12	6	2018	
Mailing Address Franklin Mills Mall						
City Philadelphia		State PA	Zip Code (Plus 4) 19154			
Description of Expenditure Postage						
To Whom Paid Acme			MO.	DAY	YEAR	\$ 50.00
			12	18	2018	
Mailing Address 3200 Red Lion Rd.						
City Philadelphia		State PA	Zip Code (Plus 4) 19114			
Description of Expenditure Stamps						
To Whom Paid Sams Club			MO.	DAY	YEAR	\$ 29.10
			12	19	2018	
Mailing Address Franklin Mills Mall						
City Philadelphia		State PA	Zip Code (Plus 4) 19154			
Description of Expenditure Christmas Cards						
To Whom Paid Sprint			MO.	DAY	YEAR	\$ 95.54
			12	27	2018	
Mailing Address Sprint.com						
City		State	Zip Code (Plus 4)			
Description of Expenditure Ward Cell Phone						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						Schedule III Total \$ 624.81

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 the 66A Ward					Reporting Period From <u>11/28/2018</u> To <u>12/31/2018</u>		
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	