

### Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	2019 <del>2013</del>	Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	Theresa Brunson							
Street Address	6442 N. 16th Street							
City	Philadelphia	State	PA	Zip Code	19126			

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	05/21/2019	Year	2019	Amendment Report	<input checked="" type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2019	03/31/2019	
A. Amount Brought Forward From Last Report	\$	0.00	2019 DEC 30 P 1:11 COUNTY OF SELECTIONS CITY OF PHILADELPHIA
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	8,093.59	
C. Total Funds Available (Sum of Lines A and B)	\$	0.00	
D. Total Expenditures (From Schedule III)	\$	8,093.59	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	0.00	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0.00	

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, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 29<sup>th</sup> day of December, 2020

Wanda D. Davis  
Signature

Theresa D. Brunson  
Signature of Person Submitting report  
TERESA D. BRUNSON  
Printed Name

My Commission expires NOTARIAL SEAL 2020

WANDA D. DAVIS, Notary Public  
City of Philadelphia, Phila. County

267 Area Code 251-0828 Daytime Telephone Number

Part II- If this is a **Candidate** report, the 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 \_\_\_\_\_ YR.

\_\_\_\_\_  
Area Code \_\_\_\_\_  
Daytime Telephone Number

**SCHEDULE I**  
**Contributions and Receipts**  
Detailed Summary Page

<b>Filer Identification Number</b>			
<b>1. Unitemized Contributions and Receipts—\$50.00 or Less per Contributor</b>			
Total for the reporting period	(1)	\$	334.59
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>			
Contributions Received from Political Committees (Part A)		\$	0.00
All Other Contributions (Part B)		\$	259.00
Total for the reporting period	(2)	\$	259.00
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>			
Contributions Received from Political Committees (Part C)		\$	0.00
All Other Contributions (Part D)		\$	7500.00
Total for the reporting period	(3)	\$	7500.00
<b>4. Other Receipts—Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>			
Total for the reporting period	(4)	\$	0.00
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$	8,093.59

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.

<b>Filer Identification Number</b>	
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							Amount
<b>Full Name of Contributing Committee</b>						<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>			<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributing Committee</b>						<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>			<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributing Committee</b>						<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>			<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributing Committee</b>						<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>			<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributing Committee</b>						<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>			<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributing Committee</b>						<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>			<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$

**PART B**  
**All Other Contributions**

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$

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.

Filer Identification Number:	
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Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$

**PART D**  
**All Other Contributions**

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C)

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					Theresa Brunson		<b>Date [MM/DD/YYYY]</b>	\$	6770.50
							01/31/2019		
<b>House #</b>	6442	<b>Street Address</b>	N. 16th Street			<b>Date [MM/DD/YYYY]</b>	\$	1050.79	
							02/28/2019		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	19126	<b>Date [MM/DD/YYYY]</b>	\$	72.30	
							03/31/2019		
<b>Employer Name</b>			Beacon Hills Staffing			<b>Occupation</b>	Contract Attorney		
<b>Employer Mailing Address / Principal Place of Business</b>			1835 Market Street, Philadelphia PA, 19102						
<b>Full Name of Contributor</b>							<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$		
<b>Employer Name</b>						<b>Occupation</b>			
<b>Employer Mailing Address / Principal Place of Business</b>									
<b>Full Name of Contributor</b>							<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$		
<b>Employer Name</b>						<b>Occupation</b>			
<b>Employer Mailing Address / Principal Place of Business</b>									
<b>Full Name of Contributor</b>							<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$		
<b>Employer Name</b>						<b>Occupation</b>			
<b>Employer Mailing Address / Principal Place of Business</b>									

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.

Filer Identification Number:	
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Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description								
Full Name								
House #		Street Address						
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description								

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

Filer Identification Number:	
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**1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the reporting period	(1)	\$	
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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)	\$	
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**3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)**

TOTAL for the reporting period	(3)	\$	
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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 on Page 1, Report Cover Page, Item F)		\$	
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SCHEDULE II  
PART F

**In-Kind Contributions Received**  
VALUE OF \$50.01 TO \$250

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>	<b>State</b>	<b>Zip Code</b>			<b>Date [MM/DD/YYYY]</b>	\$

<b>Description of Contribution</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>	<b>State</b>	<b>Zip Code</b>			<b>Date [MM/DD/YYYY]</b>	\$

<b>Description of Contribution</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>	<b>State</b>	<b>Zip Code</b>			<b>Date [MM/DD/YYYY]</b>	\$

<b>Description of Contribution</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>	<b>State</b>	<b>Zip Code</b>			<b>Date [MM/DD/YYYY]</b>	\$

<b>Description of Contribution</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$
<b>City</b>	<b>State</b>	<b>Zip Code</b>			<b>Date [MM/DD/YYYY]</b>	\$

<b>Description of Contribution</b>	
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SCHEDULE II  
Part G

**In-Kind Contributions Received**  
VALUE OVER \$250

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>		
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>		
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>		
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>	<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>		

**SCHEDULE III  
Statement of Expenditures**

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		Crews, Mosley & Associates			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	2,000.00
					01/04/2019		
<b>House #</b>	200	<b>Street Address</b>	S. Broad Street		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	19109	Consulting Fee	
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	19.77
					01/06/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride from Home to 200 S. Broad Street for Meeting	
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	7.21
					01/06/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride from 200 S. Broad Street to Home	
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	7.36
					01/13/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride from Home to 200 S. Broad Street	
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	8.88
					01/13/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride from 200 S. Broad Street to Home	
<b>To Whom Paid</b>		Crews, Mosley & Associates			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	2000.00
					01/11/2019		
<b>House #</b>	200	<b>Street Address</b>	South Broad Street		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	19109	Consulting Fee	
<b>To Whom Paid</b>		Royal's Resturant			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	500.00
					01/18/2019		
<b>House #</b>	7802	<b>Street Address</b>	Limekiln Pike		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	19150	Food for Campaign Announcement Event	
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	25.25
					01/19/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>		Ride For Ms. Dunn from Home to Campaign Announcem.	

SCHEDULE III  
Statement of Expenditures

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		Amtrak				<b>Date [MM/DD/YYYY]</b>	\$	49.00
						01/08/2019		
<b>House #</b>	9271	<b>Street Address</b>	Massachusetts Avenue			<b>Description of Expenditure</b>		
<b>City</b>	Washington	<b>State</b>	DC	<b>Zip Code</b>	20001	Train Fare to Emily's List Training in Washington D.C.		
<b>To Whom Paid</b>		Amtrak				<b>Date [MM/DD/YYYY]</b>	\$	59.00
						01/20/2019		
<b>House #</b>	9271	<b>Street Address</b>	Massachusetts Avenue			<b>Description of Expenditure</b>		
<b>City</b>	Washington	<b>State</b>	DC	<b>Zip Code</b>	20001	Train Fare from Emily's List Training in Washington D.C.		
<b>To Whom Paid</b>		UBER				<b>Date [MM/DD/YYYY]</b>	\$	16.09
						01/20/2019		
<b>House #</b>	---	<b>Street Address</b>	---			<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride from Home to Amtrak 30th Street Station		
<b>To Whom Paid</b>		UBER				<b>Date [MM/DD/YYYY]</b>	\$	9.37
						01/20/2019		
<b>House #</b>	---	<b>Street Address</b>	---			<b>Description of Expenditure</b>		
<b>City</b>	Washington	<b>State</b>	DC	<b>Zip Code</b>	---	Ride from D.C. Union Station to Emily's List Training		
<b>To Whom Paid</b>		UBER				<b>Date [MM/DD/YYYY]</b>	\$	10.08
						01/20/2019		
<b>House #</b>	---	<b>Street Address</b>	---			<b>Description of Expenditure</b>		
<b>City</b>	Washington	<b>State</b>	DC	<b>Zip Code</b>	---	Ride from Emily's List Training to D.C. Union Station		
<b>To Whom Paid</b>		UBER				<b>Date [MM/DD/YYYY]</b>	\$	8.05
						01/20/2019		
<b>House #</b>	---	<b>Street Address</b>	---			<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride from Amtrak 30th St. Station to Home		
<b>To Whom Paid</b>		UBER				<b>Date [MM/DD/YYYY]</b>	\$	4.61
						01/22/2019		
<b>House #</b>	---	<b>Street Address</b>	---			<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride from Fern Rock Trans. Center to Home		
<b>To Whom Paid</b>		UBER				<b>Date [MM/DD/YYYY]</b>	\$	4.07
						01/22/2019		
<b>House #</b>	---	<b>Street Address</b>	---			<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---	Ride From Home to Fern Rock Trans. Center		

**SCHEDULE III**  
**Statement of Expenditures**

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	6.96
					01/22/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride to Home from Fern Rock Transportation Center							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	7.86
					01/29/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride from Home to PhillyCam for Interview							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	21.94
					01/29/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride from PhillyCam (669 Ranstead St) to Home							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	5.00
					01/29/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	-----		
Cancellation Fee							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	4.25
					02/02/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride to Fern Rock Trans. Center to pick up car from lot							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	5.00
					02/15/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Cancellation Fee							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	8.32
					02/15/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride to 321 Chestnut Street for Event							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	33.22
					02/22/2019		
<b>House #</b>	---	<b>Street Address</b>	---				
<b>Description of Expenditure</b>							
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ms. Dunn Ride From 200 S. Broad Street to her home							

SCHEDULE III  
Statement of Expenditures

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	6.75
					03/11/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride to Amtrak for trip to Harrisburg, PA - Petitions							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	7.50
					03/11/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Harrisburg	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride to Capitol in Harrisburg, PA to file Petitions							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	7.50
					03/11/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Harrisburg	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride from Capitol in Harrisburg, PA to Amtrak Station							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	7.47
					03/12/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride to Amtrak for trip to Harrisburg, PA - Petitions							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	7.50
					03/12/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Harrisburg	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride from Amtrak to Capitol in Harrisburg, PA							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	7.50
					03/12/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Harrisburg	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride from Harrisburg, PA Capitol to Amtrak Station							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	19.18
					03/16/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride to Madame C.J. Walker Luncheon Downtown PHL							
<b>To Whom Paid</b>		UBER			<b>Date [MM/DD/YYYY]</b>	\$	8.90
					03/20/2019		
<b>House #</b>	---	<b>Street Address</b>	---		<b>Description of Expenditure</b>		
<b>City</b>	Harrisburg	<b>State</b>	PA	<b>Zip Code</b>	---		
Ride from Capitol to Amtrak- Ballot Position Selection							

**SCHEDULE III**  
**Statement of Expenditures**

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		Crews, Mosley & Associates				<b>Date [MM/DD/YYYY]</b>	\$	2,000.00
						01/18/2019		
<b>House #</b>	200	<b>Street Address</b>	South Broad Street			<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	19109	Consulting Fee		
<b>To Whom Paid</b>		Crews, Mosley & Associates				<b>Date [MM/DD/YYYY]</b>	\$	1,000
						02/02/2019		
<b>House #</b>	200	<b>Street Address</b>	South Broad Street			<b>Description of Expenditure</b>		
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	19109	Consulting Fee		
<b>To Whom Paid</b>		Commonwealth of Pennsylvania - Department of State				<b>Date [MM/DD/YYYY]</b>	\$	100.00
						03/11/2019		
<b>House #</b>	210	<b>Street Address</b>	North Office Building			<b>Description of Expenditure</b>		
<b>City</b>	Harrisburg	<b>State</b>	PA	<b>Zip Code</b>	17120	Petition Filing Fee - Municipal Court		
<b>To Whom Paid</b>		Commonwealth of Pennsylvania - Department of State				<b>Date [MM/DD/YYYY]</b>	\$	100.00
						03/11/2019		
<b>House #</b>	210	<b>Street Address</b>	North Office Building			<b>Description of Expenditure</b>		
<b>City</b>	Harrisburg	<b>State</b>	PA	<b>Zip Code</b>	17120	Petition Filing Fee - Court of Common Pleas		
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				

**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.

<b>Filer Identification Number:</b>	
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<b>Name of Creditor</b>					<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>				
<b>City</b>	<b>State</b>					
<b>Description of Debt</b>						

<b>Name of Creditor</b>					<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>				
<b>City</b>	<b>State</b>					
<b>Description of Debt</b>						

<b>Name of Creditor</b>					<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>				
<b>City</b>	<b>State</b>					
<b>Description of Debt</b>						

<b>Name of Creditor</b>					<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>				
<b>City</b>	<b>State</b>					
<b>Description of Debt</b>						

<b>Name of Creditor</b>					<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>				
<b>City</b>	<b>State</b>					
<b>Description of Debt</b>						

<b>Name of Creditor</b>					<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>				
<b>City</b>	<b>State</b>					
<b>Description of Debt</b>						