

Campaign Finance Report

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

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|---|--------------------------|-------------------------|-------------------------|------|----------------------|------------------|---------------------|-------------|--------------|---|
| Filer Identification Number: | 17761026 | Report Filed By: | CANDIDATE | 1. | COMMITTEE | 2. | LOBBYIST | 3. | | |
| Name of Filing Committee, Candidate or Lobbyist: Liberty City Lesbian & Gay Dem Club | | | | | | | | | | |
| Street Address: PO BOX 58385 | | | | | | | | | | |
| City: Philadelphia | | | State: PA | | Zip Code: 19107 | | | | | |
| 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. X | 2nd Friday Pre-Election | 5. | 30 Day Post Election | 6. | Termination Report? | Yes | No | X |
| Other | Annual Report | 7. | YEAR | 2020 | | | | | | |
| Name of Office Sought by Candidate: | | | DATE OF ELECTION | | | District Number: | Office Code: | Party Code: | County Code: | |
| | | | MO. | DAY | YEAR | | | | | |
| | | | 11 | 3 | 2020 | | | | 51 | |
| Summary of Receipts and Expenditures from: | | | MO. | DAY | YEAR | To | MO. | DAY | YEAR | |
| | | | 6 | 23 | 2020 | To | 9 | 14 | 2020 | |
| A. Amount Brought Forward From Last Report | | | | | | \$1,858.36 | | | | |
| B. Total Monetary Contributions and Receipts (From Schedule I) | | | | | | \$77.08 | | | | |
| C. Total Funds Available (Sum of Lines A and B) | | | | | | \$1,935.44 | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$1,295.57 | | | | |
| E. Ending Cash Balance (Subtract Line D from Line C) | | | | | | \$639.87 | | | | |
| F. Value of In-Kind Contributions Received (From Schedule II) | | | | | | \$0.00 | | | | |
| G. Unpaid Debts and Obligations (From Schedule IV) | | | | | | \$0.00 | | | | |
| FOR OFFICE USE ONLY | | | | | | | | | | |
| 00:00 | | | | | | | | | | |

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|--|--|--|--|--|--|--|--|--|--|
| 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 | | | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div> <p>day of Feb 20 21</p> <p>Signature</p> <p>My Commission expires</p> </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>Commonwealth of Pennsylvania - Notary Seal</p> <p>ROBERT J. WILSON, Notary Public</p> <p>Philadelphia County</p> <p>My Commission Expires January 29, 2024</p> <p>Commission Number 1239273</p> </div> <div> <p>Signature of Person Submitting Report</p> <p>Printed Name</p> <p>Area Code</p> <p>Daytime Telephone Number</p> </div> </div> | | | | | | | | | |

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|--|--|--|--|--|--|--|--|--|--|
| AFFIDAVIT SECTION | | | | | | | | | |
| 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 | | | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div> <p>day of _____ 20 _____</p> <p>Signature</p> <p>My Commission expires</p> </div> <div> <p>Signature of Person Submitting Report</p> <p>Printed Name</p> <p>Area Code</p> <p>Daytime Telephone Number</p> </div> </div> | | | | | | | | | |

Department of State Bureau of Commissions, Elections and Legislation
210 North Office Building Harrisburg, PA 17120-0029 (717)787-5280

SCHEDULE III
STATEMENT OF EXPENDITURES

| | | | | | |
|--|---------------------|--|------------------|---------------------|----------|
| Name of Filing Committee or Candidate: Liberty City Lesbian & Gay Dem Club | | Reporting Period: From <u>06/25/2020</u> To <u>08/31/2020</u> | | | |
| To Whom Paid: City Board of Ethics | | MO. 7 | DAY 16 | YEAR 2020 | \$500.00 |
| Mailing Address: 1515 Arch Street 18th Floor | | | | | |
| City: Philadelphia | State: PA | Zip Code (Plus 4): 19102 | | | |
| Description of Expenditure: Resolution Payment #2 | | | | | |
| To Whom Paid: NEON LLC | | MO. 6 | DAY 29 | YEAR 2020 | \$249.00 |
| Mailing Address: 4545 N. Ravenswood Ave. 2nd Floor | | | | | |
| City: Chicago | State: IL | Zip Code (Plus 4): 60640 | | | |
| Description of Expenditure: Client Relationship Management (CRM) System | | | | | |
| To Whom Paid: NEON LLC | | MO. 7 | DAY 29 | YEAR 2020 | \$249.00 |
| Mailing Address: 4545 N. Ravenswood Ave. 2nd Floor | | | | | |
| City: Chicago | State: IL | Zip Code (Plus 4): 60640 | | | |
| Description of Expenditure: Client Relationship Management (CRM) System | | | | | |
| To Whom Paid: NEON LLC | | MO. 8 | DAY 31 | YEAR 2020 | \$249.00 |
| Mailing Address: 4545 N. Ravenswood Ave. 2nd Floor | | | | | |
| City: Chicago | State: IL | Zip Code (Plus 4): 60640 | | | |
| Description of Expenditure: Client Relationship Management (CRM) System | | | | | |
| To Whom Paid: ZOOM | | MO. 6 | DAY 25 | YEAR 2020 | \$16.19 |
| Mailing Address: 55 Almaden Boulevard 6th Floor | | | | | |
| City: San Jose | State: CA | Zip Code (Plus 4): 95113 | | | |
| Description of Expenditure: ZOOM Communication | | | | | |
| To Whom Paid: ZOOM | | MO. 7 | DAY 27 | YEAR 2020 | \$16.19 |
| Mailing Address: 55 Almaden Boulevard 6th Floor | | | | | |
| City: San Jose | State: CA | Zip Code (Plus 4): 95113 | | | |
| Description of Expenditure: ZOOM Communication | | | | | |

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|---|--------------|-----------------------------|-----------|--------------|-----------------------------------|
| To Whom Paid: ZOOM | | MO. 8 | DAY 25 | YEAR 2020 | Schedule III Total: \$1,295.57 |
| Mailing Address: 55 Almaden Boulevard 6th Floor | | | | | |
| City: San Jose | State: CA | Zip Code (Plus 4): 95113 | | | |
| Description of Expenditure: ZOOM Communication | | | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | |

