

### Campaign Finance Report

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

<b>Filer Identification Number:</b>	1776411	<b>Report Filed By:</b>	CANDIDATE	1.	2.	3.
<b>Name of Filing Committee, Candidate or Lobbyist:</b> 53rd Ward Democratic Executive Committee						
<b>Street Address:</b> 716 GLENVIEW STREET						
<b>City:</b> PHILADELPHIA			<b>State:</b> PA		<b>Zip Code:</b> 19111	
<b>TYPE OF REPORT</b>	1.	2.	3.	4.	5.	X
	6.	7.	8.	9.	10.	X
<b>Other</b>	7.	YEAR	2021			
<b>Name of Office Sought by Candidate:</b> Other			<b>DATE OF ELECTION</b> 5 18 2021			<b>District Number:</b>
						<b>Office Code:</b> OTH
						<b>Party Code:</b> DEM
						<b>County Code:</b> 51
<b>Summary of Receipts and Expenditures from:</b>			<b>To</b>			CITY COMMISSIONER COUNTY Bd. OF ELECTORS 2021 JUN 22 AM 11:5
5 4 2021			6 7 2021			
A. Amount Brought Forward From Last Report			≈14,140.71			
B. Total Monetary Contributions and Receipts (From Schedule I)			≈4,600.00			
C. Total Funds Available (Sum of Lines A and B)			≈18,740.71			
D. Total Expenditures (From Schedule II)			≈4,800.00			
E. Ending Cash Balance (Subtract Line D from Line C)			≈13,940.71			
F. Value of In-Kind Contributions Received (From Schedule II)			≈0.00			
G. Unpaid Debts and Obligations (From Schedule IV)			≈0.00			
<b>AFFIDAVIT SECTION</b>						
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						
_____ day of _____ 20 _____		Paul R. Rolland Signature of Person Submitting Report				
_____ Signature		Paul R. Rolland Printed Name				
My Commission expires _____ MO. _____ DAY _____ YEAR		(215) 972 6000 Area Code Daytime Telephone Number				
<b>AFFIDAVIT SECTION</b>						
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 of Person Submitting Report				
_____ Signature		_____ Printed Name				
My Commission expires _____ MO. _____ DAY _____ YEAR		_____ Area Code _____ Daytime Telephone Number				

Department of State Bureau of Commissions, Elections and Legislation  
 210 North Office Building Harrisburg, PA 17123-0029 (717)787-5280





CITY COMMISSIONERS  
 COUNTY BD. OF ELECTIONS  
 2021 JUN 22 AM 11:59

## Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

**Note:** Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements In lieu of full reports (form DSEB-503), and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports. This form must be signed by hand where a signature is required.**

Name of Filing Committee, Candidate, or Lobbyist				
53rd Ward Democratic Executive Committee				
Reporting Cycle Name				
<input type="checkbox"/> <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<input type="checkbox"/> <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	<input checked="" type="checkbox"/> <b>Cycle 3</b> 30 Day Post Primary	<input type="checkbox"/> <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election	<input type="checkbox"/> <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election
<input type="checkbox"/> <b>Cycle 6</b> 30 Day Post-Election	<input type="checkbox"/> <b>Cycle 7</b> Annual Report	<input type="checkbox"/> <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election	<input type="checkbox"/> <b>Cycle 9</b> 30 Day Post-Special Election	

**Part I** - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the foregoing is true and correct.**

Paul R Rolland  
 Signature of Treasurer, Candidate, or Lobbyist

06/17/2021  
 Date (DD/MM/YYYY)

Paul R Rolland  
 Printed Name

Philadelphia  
 Location (City/State/Country)

SOCIOMIS 55 5/11:20

COLLEGE OF BUSINESS  
UNIVERSITY OF MISSISSIPPI

100

100

# Campaign Finance Report

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Filer Identification Number:	1776411	Report Filed By:	1.	2.	3.
Name of Filing Committee, Candidate or Lobbyist: <b>53rd Ward Democratic Executive Committee</b>					
Street Address: <b>716 GLENVIEW STREET</b>					
City: <b>PHILADELPHIA</b>		State: <b>PA</b>		Zip Code: <b>19111</b>	
TYPE OF REPORT	1.	2.	3.		X
	4.	5.	6.		X
Other	7.	YEAR	2021		
Name of Office Sought by Candidate: <b>Other</b>		DATE OF ELECTION		District Number:	Office Code: Party Code: County Code:
		5 18 2021			OTH DEM 51
Summary of Receipts and Expenditures from: 5 4 2021 To 6 7 2021					
A. Amount Brought Forward From Last Report			¤14,140.71		
B. Total Monetary Contributions and Receipts (From Schedule I)			¤4,600.00		
C. Total Funds Available (Sum of Lines A and B)			¤18,740.71		
D. Total Expenditures (From Schedule III)			¤4,800.00		
E. Ending Cash Balance (Subtract Line D from Line C)			¤13,940.71		
F. Value of In-Kind Contributions Received (From Schedule II)			¤0.00		
G. Unpaid Debts and Obligations (From Schedule IV)			¤0.00		
AFFIDAVIT SECTION					
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					
_____ day of _____ 20 _____		<i>Paul R. Rolland</i> Signature of Person Submitting Report			
_____ Signature		<i>Paul R. Rolland</i> Printed Name			
My Commission expires _____ MO. DAY YEAR		(213) 972 6000 Area Code Daytime Telephone Number			
AFFIDAVIT SECTION					
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					
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_____ Signature		_____ Printed Name			
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CITY COMMISSIONERS  
COUNTY BOARD OF ELECTIONS  
21 JUN 22 AM 11:59

Department of State Bureau of Commissions, Elections and Legislation  
210 North Office Building Harrisburg, PA 17123-0029 (717)787-5280



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

Name of Filing Committee or Candidate: 53rd Ward Democratic Executive Committee	Reporting Period: From <u>05/11/2021</u> To <u>05/11/2021</u>
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<b>TOTAL for the Reporting Period (1)</b>	
	\$0.00

<b>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</b>	
Contributions Received from Political Committees (Part A)	\$0.00
All Other Contributions (Part B)	\$0.00
<b>TOTAL for the Reporting Period (2)</b>	<b>\$0.00</b>

<b>CONTRIBUTIONS RECEIVED FROM OTHER SOURCES</b>	
Contributions Received from Political Committees (Part C)	\$4,600.00
All Other Contributions (Part D)	\$0.00
<b>TOTAL for the Reporting Period (3)</b>	<b>\$4,600.00</b>

<b>CONTRIBUTIONS RECEIVED FROM OTHER SOURCES</b>	
	\$0.00

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3, and 4; Also enter this amount on Page 1, Report Cover Page, Item B.)	<b>\$4,600.00</b>
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**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: <b>53rd Ward Democratic Executive Committee</b>		Reporting Period: From <b>05/11/2021</b> To <b>05/11/2021</b>	
Full Name of Contributing Committee: <b>Democratic Campaign Committee of Philadelphia</b>		<b>5</b>   <b>11</b>   <b>2021</b>	<b>\$4,600.00</b>
Mailing Address: <b>219 Spring Garden Street</b>			
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19123</b>	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.			<b>Part C Total:</b> <b>\$4,600.00</b>



**SCHEDULE III**  
**STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate: <b>53rd Ward Democratic Executive Committee</b>			Reporting Period: From <b>05/17/2021</b> To <b>05/21/2021</b>			
To Whom Paid: <b>Adrienne Lloyd</b>			<b>5</b>	<b>17</b>	<b>2021</b>	<b>≈200.00</b>
Mailing Address: <b>831 Longshore Avenue</b>						
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>				
Description of Expenditure: <b>GOTV</b>						
To Whom Paid: <b>Alta Jenkins</b>			<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈120.00</b>
Mailing Address: <b>2918 W. Allegheny Avenue</b>						
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19132</b>				
Description of Expenditure: <b>GOTV</b>						
To Whom Paid: <b>Charles Hicks</b>			<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈200.00</b>
Mailing Address: <b>7201 Tabor Avenue</b>						
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>				
Description of Expenditure: <b>GOTV</b>						
To Whom Paid: <b>David Dougherty</b>			<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈130.00</b>
Mailing Address: <b>488 Roxborough Avenue</b>						
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19128</b>				
Description of Expenditure: <b>GOTV</b>						
To Whom Paid: <b>Dunkin Donuts</b>			<b>5</b>	<b>17</b>	<b>2021</b>	<b>≈180.00</b>
Mailing Address: <b>6391 Oxford Avenue</b>						
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>				
Description of Expenditure: <b>Coffee/ Donuts</b>						
To Whom Paid: <b>Dunkin Donuts</b>			<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈56.84</b>
Mailing Address: <b>6391 Oxford Avenue</b>						
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>				
Description of Expenditure: <b>Coffee/ Donuts</b>						



To Whom Paid: <b>Dunkin' Donuts</b>		<b>5</b>	<b>17</b>	<b>2021</b>	<b>≈120.00</b>
Mailing Address: <b>6391 Oxford Avenue</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>coffee/donuts</b>					
To Whom Paid: <b>Giant</b>		<b>5</b>	<b>17</b>	<b>2021</b>	<b>≈127.43</b>
Mailing Address: <b>737 Huntington Pike</b>					
City: <b>Huntington Valley</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19006</b>			
Description of Expenditure: <b>Election Day food/drink</b>					
To Whom Paid: <b>Giant</b>		<b>5</b>	<b>17</b>	<b>2021</b>	<b>≈30.88</b>
Mailing Address: <b>737 Huntington Pike</b>					
City: <b>Huntington Valley</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19006</b>			
Description of Expenditure: <b>Election day Food/Drink</b>					
To Whom Paid: <b>Gloria Sulman</b>		<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈200.00</b>
Mailing Address: <b>716 Glenview Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Janice Sulman</b>		<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈200.00</b>
Mailing Address: <b>716 Glenview Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Janice Sulman</b>		<b>5</b>	<b>21</b>	<b>2021</b>	<b>≈269.85</b>
Mailing Address: <b>716 Glenview Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>Reimburse Printing/Stationery/postage expense</b>					
To Whom Paid: <b>Janice Sulman</b>		<b>5</b>	<b>21</b>	<b>2021</b>	<b>≈165.00</b>
Mailing Address: <b>716 Glenview Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>for purchase stamps</b>					



To Whom Paid:					
Kettie Eugene		5	18	2021	≈120.00
Mailing Address:					
5914 Rutland Street					
City:		State:		Zip Code (Plus 4):	
Philadelphia		PA		19149	
Description of Expenditure:					
GOTV					
To Whom Paid:					
Kylee Devor		5	18	2021	≈100.00
Mailing Address:					
6116 Shisler Street					
City:		State:		Zip Code (Plus 4):	
Philadelphia		PA		19149	
Description of Expenditure:					
GOTV					





To Whom Paid: <b>Lisa Borine</b>		5	17	2021	≈200.00
Mailing Address: <b>1006 Friendship Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Maureen Jenkins</b>		5	17	2021	≈200.00
Mailing Address: <b>6037 Agusta Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19149</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Max Stiklosky</b>		5	18	2021	≈200.00
Mailing Address: <b>6808 Algon Avenue</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Monica Huff</b>		5	18	2021	≈200.00
Mailing Address: <b>6314 Langdon Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Paul Rolland</b>		5	17	2021	≈200.00
Mailing Address: <b>413 Lanfair Road</b>					
City: <b>Cheltenham</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19012</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Peggy Bussie</b>		5	18	2021	≈200.00
Mailing Address: <b>1365 Magee Avenue</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Ricky Steinberg</b>		5	18	2021	≈120.00
Mailing Address: <b>7229 Oakland Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19149</b>			
Description of Expenditure: <b>GOTV</b>					



To Whom Paid: <b>Sakirou Morou</b>		<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈200.00</b>
Mailing Address: <b>1317 Wellington Streety</b>					
City: <b>Philadelphia</b>		State: <b>PA</b>		Zip Code (Plus 4): <b>19111</b>	
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Scott Hilton</b>		<b>5</b>	<b>18</b>	<b>2021</b>	<b>≈150.00</b>
Mailing Address: <b>202 W. Chelton Avenue</b>					
City: <b>Philadelphia</b>		State: <b>PA</b>		Zip Code (Plus 4): <b>19120</b>	
Description of Expenditure: <b>GOTV</b>					



To Whom Paid: <b>Todd Vicks</b>		5	18	2021	≈200.00
Mailing Address: <b>4147 WCayuga Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19140</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Veronica Bell</b>		5	17	2021	≈200.00
Mailing Address: <b>1218 Elbridge Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Walter Grondski</b>		5	17	2021	≈200.00
Mailing Address: <b>1423 Unruh Avenue</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
To Whom Paid: <b>Walter Grondski</b>		5	17	2021	≈110.00
Mailing Address: <b>1423 Unruh Avenue</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>Reimburse Postage Stamps</b>					
To Whom Paid: <b>William Rice</b>		5	18	2021	≈200.00
Mailing Address: <b>812 Knorr Street</b>					
City: <b>Philadelphia</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>19111</b>			
Description of Expenditure: <b>GOTV</b>					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					<b>Schedule III Total: ≈4,800.00</b>





**Pennsylvania Department of State**

Bureau of Campaign Finance & Civic Engagement  
210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)  
[www.dos.pa.gov/campaignfinance](http://www.dos.pa.gov/campaignfinance) • [ra-stcampaignfinance@pa.gov](mailto:ra-stcampaignfinance@pa.gov)

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53rd Ward Democratic Executive Committee				
Reporting Cycle Name				
<input type="checkbox"/> <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<input type="checkbox"/> <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	<input checked="" type="checkbox"/> <b>Cycle 3</b> 30 Day Post Primary	<input type="checkbox"/> <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election	<input type="checkbox"/> <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election
<input type="checkbox"/> <b>Cycle 6</b> 30 Day Post-Election	<input type="checkbox"/> <b>Cycle 7</b> Annual Report	<input type="checkbox"/> <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election	<input type="checkbox"/> <b>Cycle 9</b> 30 Day Post-Special Election	

**Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.**

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the foregoing is true and correct.**

Paul R Rolland  
Signature of Treasurer, Candidate, or Lobbyist

06/17/2021  
Date (DD/MM/YYYY)

Paul R Rolland  
Printed Name

Philadelphia  
Location (City/State/Country)

