


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:	1776356	Report Filed By:	CANDIDATE ^{1.}	COMMITTEE ^{2.}	LOBBYIST ^{3.}						
Name of Filing Committee, Candidate or Lobbyist: PHILPAC											
Street Address: 123 S Broad St Ste 600											
City: Philadelphia		State: PA		Zip Code: 19109							
TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3. X	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	
Other	Annual Report	7.	YEAR	2021							
Name of Office Sought by Candidate: Other			DATE OF ELECTION			District Number:	Office Code: OTH	Party Code: OTH	County Code: 51		
			MO.	DAY	YEAR						
			5	18	2021						
Summary of Receipts and Expenditures from:		MO.	DAY	YEAR	To	MO.	DAY	YEAR	<div style="border: 1px solid black; padding: 5px;"> FOR OFFICE USE ONLY COUNTY BD. OF ELECTIONS 2021 JUN - 8 P 1 CITY COMMISSIONER </div>		
		4	30	2021	To	6	7	2021			
A. Amount Brought Forward From Last Report		¤31,713.37									
B. Total Monetary Contributions and Receipts (From Schedule I)		¤0.57									
C. Total Funds Available (Sum of Lines A and B)		¤31,713.94									
D. Total Expenditures (From Schedule III)		¤0.00									
E. Ending Cash Balance (Subtract Line D from Line C)		¤31,713.94									
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 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 _____				 Signature of Person Submitting Report							
Signature _____				Jeanna Raleigh Printed Name							
My Commission expires _____ MO. _____ DAY _____ YEAR _____				215 _____			836-2982 _____				
				Area Code			Daytime Telephone Number				
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											
_____ day of _____ 20 _____				Signature of Person Submitting Report							
Signature _____				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: PHILPAC	Reporting Period: From <u>04/30/2021</u> To <u>05/31/2021</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	¤0.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	¤0.00
All Other Contributions (Part B)	¤0.57
TOTAL for the Reporting Period (2)	¤0.57

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	¤0.00
All Other Contributions (Part D)	¤0.00
TOTAL for the Reporting Period (3)	¤0.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	¤0.00

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.)	¤0.57
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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: PHILPAC		Reporting Period: From <u>04/30/2021</u> To <u>05/31/2021</u>			
Full Name of Contributor: Citizens Bank		MO. 5	DAY 31	YEAR 2021	¤0.29
Mailing Address: PO Box 7000					
City: Providence	State: RI	Zip Code (Plus 4): 02940			
Full Name of Contributor: Citizens Bank		MO. 4	DAY 30	YEAR 2021	¤0.28
Mailing Address: PO Box 7000					
City: Providence	State: RI	Zip Code (Plus 4): 02940			
Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.					Part B Total: ¤0.57



Pennsylvania Department of State
 Bureau of Campaign Finance & Civic Engagement
 210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

Unsworn Declaration 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), Non-Bid Contract Reporting Form (DSEB-504) 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				
PhilPAC				
Reporting Cycle Name				
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input checked="" type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 4 6 th Tuesday Pre-Election	<input type="checkbox"/> Cycle 5 2 nd Friday Pre-Election
<input type="checkbox"/> Cycle 6 30 Day Post-Election	<input type="checkbox"/> Cycle 7 Annual Report	<input type="checkbox"/> Cycle 8 2 nd Friday Pre-Special Election	<input type="checkbox"/> Cycle 9 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 accompanying Campaign Finance Report is true and correct.

Jeanna Raleigh

Signature of Treasurer, Candidate, or Lobbyist

Jeanna Raleigh

Printed Name

06/08/2021

Date (DD/MM/YYYY)

Philadelphia, PA

Location (City/State/Country)



Pennsylvania Department of State

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Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist

Date (DD/MM/YYYY)

Printed Name

Location (City/State/Country)