CAMPAIGN FINANCE REPORT

PAGE 1 OF

(COVER PAGE)

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

Filer Identificatio			Report				
Number:	nittes, Candidate or Lob	1 ⁹ 1	Filed By:	CAMPBATE	A COM	arrie 12/18	KEJEPTIK JE
Name of Filing Comm	riends of	Dyist: Col		- 100 mg 65 110 mg			
Street Address:	T) a		QY	-			·
City:	to Box10	314			• • • • • • • • • • • • • • • • • • • •		
Gity.	Normatown			PA-	Zip Co	404 -	
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REPORT				会議との5個 利用が がご			
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report type)		YEAR		日記記[6] [2] [6] [4] [6] [6] [6] [6] [6] [6] [6] [6] [6] [6			
Name of Office Sough				DATE OF ELEC	MON District		
Montgomay	bunty Treasura	S T			Number	Code Code	
,	•			11 7 20	n	(SEE INSTRUCTION	V
S			XIII.				
Summary of Re and Expenditure	es from:	10 24 20		11 00 0			Service of the servic
A. Amount Brought	Forward From Last	Report	6	64,713.00			Algebra Algebra Algebra
B. Total Monetary	Contributions and Re	ceipts (From Sche		1250.00			9 pt
C. Total Funds Ava	ilable (Sum of Lines	A and B)	\$	67,963,00		~1117d	1 Miles No vente de a gue santi
D. Total Expenditur	es (From Schedule II	1)	\$	100.00			
E. Ending Cash Bala	ance (Subtract Line D	from Line C)	3	67.863.0		्र [े] हिं	in the line of the
Value of In-Kind	d Contributions Rece	ived (From Schedu	ile II) \$	(A)		8	
Lapadycebts an	d Obligations (From	Schedule IV)	s	$\overline{\mathscr{D}}$			
		Δ	FFIDAVIT S	ECTION			
			对中国唯				
to affirm) the	at this report, including	the attached schedul	les, on paper	or computer diskette, ar	re to the best of	my knowledge and l	belief true,
The and subscri	bed before me this			4	_		
	Dic	20 \	<u> </u>	Mayor 6	Beir		ŀ
32 N N N N N N N N N N N N N N N N N N N	miniski			Meura C	ture of Person St	bmitting Report	
82	Signature	1	 }		Printed Nan		
My commission expli		1/3-019 NAY YR.	_	lelo	474	4787	
960		1 834	<i>,</i>	Area Code	Da	ytime Telephone Nu	mber
				对的证明基础			
(Dig 1836 No. 320) as	t to the best of my kno emended.	wiedge and ballaf ti	nis political c	committee has not viola	ted any provision	s of the Act of June	3, 1937
Some and subscri	bed before me this		_			1 d	
day of	Dec	20	1	Tasoni	E Salus Signature of Can	prele	n_
E E Inle	Mewoles		}	JASO	on E.SA	() S	1
NE Political on expir	Signature	12017.	j	21.2	Printed Nam	-8040	
\$\$\$		AY YR.	<u> </u>	Area Code		ytime Telephone Nur	nber
_₹\$							

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

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

PAGE 2 OF _____

Detailed Summary Page

	Detailed Summary Page			
Name of Filing Committee or Candidate FRIENDS of TOSOM	Selvs) TO 11/27/17
AND THE STREET PONTINEUR ON THE	DERECEIPTS = \$50.00 OR LESS	i i i i i i i i i i i i i i i i i i i	inie)	
	TOTAL for the Reporting Period	Reporting Period From 10/24/17 To 11/27/17 LESS PER CONTRIBUTOR Period (1) \$ (
Personal distribution of the contract of the c	00 PROM PART A AND PART			
Contributions Received from Political (263	\$	250.00
All Other Contributions (Part B)			\$	<u></u>
	TOTAL for the Reporting Period	(2)	\$	950.0°
SOUTHWIND TO MENT OF THE PROPERTY OF THE			RE IS TO MEET Y	
Contributions Received from Political C			\$	1.1000
All Other Contributions (Part D)			\$	(A
	TOTAL for the Reporting Period	(3)	\$	1,000.00
			i i i i i i i i i i i i i i i i i i i	
	TOTAL for the Reporting Period		\$ \$	1,050,00
TOTAL MONETARY CONTRIBUTIONS				
TOTAL MONETARY CONTRIBUTIONS A THIS REPORTING PERIOD (Add and ent Boxes 1, 2, 3 and 4; also enter this a	ter amount totals from		\$	1,250.0

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Cover Page, Item B.)

PAGE OF	
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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.

Traine of thing committee of Carloidate				Reporting		
Friends of Jason S	alus.			From _	10/24	11 TO 11 27 117
	····			DATE		AMOUNT
Full Name of Contributing Committee			MO.	DAY	YEAR	類
Mailing Address			MO	DAY	EYEAR	\$ 250,00
1901 Mortet Street				200		- ¶\$
Dhyladelohia	State	Zip Code (Plus 4)	- MO	DAY	YEAR	90
Philadelphia	PA	19103 -				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address	 -		MO.	DAY	YEAR	\$
				DAT	TEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address			office and the street			\$
_			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MOs	DAY	YEAR	
		<u> </u>	<u> </u>			\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address						\$
-			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	
	1	_				1 \$
Full Name of Contributing Committee		·······	MO.	DAY	YEAR	
Mailing Address			_			\$
The state of the s			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	
		-				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address						\$
			# MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address			- 0, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,			\$
• • • • • • • • • • • • • • • • • • • •			MO.	DAY	YEAR	s
City	State	Zip Code (Plus 4)	MO:	DAY	YEAR	
		_				\$
Full Name of Contributing Committee			-EMOL-	DAY	EXYFATRE	•
Mailing Address			N. PO.S.	DAY	YEAR	\$
-			- MU	VATE	LEAN	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
· · · · · · · · · · · · · · · · · · ·						\$
Enter Grand Total of Dam A an Oct		D-4-11- d #	_	_		PAGE TOTAL
Enter Grand Total of Part A on Sched	JUI e i,	Detailed Summary	y Page,	Sectio	n 2.	\$ ∂50,w
SEB-502 (7-99)						0 30 (00

OF
OF

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.

Committee of Cardinate				Reporting		,
Friends of Jason Salu	S			From _	10 24 1	1 TO 11/27/17
				DATE		AMOUNT
Full Name of Contributing Committee			MO.	DAY	YEAR	Ē _
Mailing Address			11	21	2017	\$ 1000,0
Mailing Address 4950 Pholoside Aven	· #1	۸۱۵	MO.	DAY	YEAR	\$
City Thirty we MUST	State	Zip Code (Plus 4)		i Area	7720000 10 000	
Philadelphia	PA	19131 -	M.M.O.	DAY	YEAR	\$
Full Name of Contributing Committee		17.001	Mo.	DAY	YEAR	3
						† \$
Mailing Address			MO.	DAY	YEAR	
				1] \$
City	State	Zip Code (Plus 4)	- MO.	DAY	YEAR	_
		<u> </u>				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address		<u> </u>	- MO	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Full Name of Contributing Committee			MQ.	DAY	YEAR	
Mailing Address] \$
maining Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	6 managa ayan Garan	TOTAL COM	ļ.,,,,,,	3
,	31816	- xip code (Fids 4)	- MO	DAY	YEAR	\$
Full Name of Contributing Committee						
	.∴ MO.∺	HAR UA TANK	YEAR	\$		
Mailing Address	*"		MO,	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	•
		-				\$
Full Name of Contributing Committee			MO.	DAY	- YEAR	¢
Mailing Address			752822253			\$
-			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO:	DAY	YEAR	
		↔				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	-
Mailing Address						\$
mening Address			NO.	DAY	YEAR	s
City	State	Zip Code (Plus 4)	On What are the			
			MO	DAY	YEAR	\$
Full Name of Contributing Committee				DAY		
						\$
Mailing Address			MO.	DAY	YEAR	*
City	I Caran Y	51- A-4- IB1				\$
VII.	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
······································	<u> </u>		<u> </u>	<u> </u>		
						PAGE TOTAL
Enter Grand Total of Part C on Schee	dule I,	Detailed Summary	/ Page,	Section	າ 3.	\$ 1000.00
SEB-502 (7-99)					4	

PAGE _____OF ____

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Report	ing Period		
Priends of Jason Salve	١.						127/17
To Whom Paid Priends of Jim Nik Mailing Address	 D∕1		23 0	DA ⊋:		Amount \$	100.00
Mailing Address 219 Williams Avenue	- "		1 .	ription of I	Expenditure		100.0
	State	Zip Code (Plus	4) (2	chrone	ution		
Norboth	PA	19072 -	<u> </u>				
To Whom Paid			- MC	DA	Y	Amount	
Mailing Address				Nantas ad F		\$	
			Desci	ription or E	xpenditure		
City	State	Zip Code (Plus	4)				
To Whom Paid	<u> </u>						
			MO	DA'	YEAR	Amount	
Mailing Address			Descr	iption of E	xpenditure	\$	
Sity	State	Zip Code (Plus	<u> </u>			_	
			"				
To Whom Paid			_ MO	DAY	YEAR	Amount	
Mailing Address						\$	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Descr	iption of E	xpenditure		
City	State	Zip Code (Plus	1)				
o Whom Paid		· · · · · · · · · · · · · · · · · · ·	MO.	DAY	YEAR	Amount	
failing Address	 ,		Descri	ption of Ex	Kpenditure	<u> </u>	
ity							
•••	State	Zip Code (Plus 4	<i></i>				
o Whom Paid			MO.		YEAR -	Amount	
						Amount \$	
ailing Address		-	Descri	ption of Ex	penditure		
ity	State	Zip Code (Plus 4	,				
Whom Paid			MO.	DAY	YEAR	Amount	
ailing Address			Descrip	otion of Ex	Denditure	\$	
ity					penarcore		
	State	Zip Code (Plus 4					·
Whom Paid	<u> </u>		6.5.7.7.		Ne in head file.		
			****	E E CAY	YE SR	Amount \$	
Iling Address		_	Descrip	tion of Ex	penditure	- 7	
ty	State	Zip Code (Plus 4)	+				
		_					
				 		PAGE TO	TAL
nter Grand Total of Expenditures on Pag	je 1, Ro	eport Cover	Page, It	tem D.		_	
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