



Campaign Finance Section
Financial Report

Financial Reports are required to be submitted to the Campaign Finance Section of the Office of the State Election Commissioner by all Candidates, Committees, and Organizations. Late or incomplete reports are subject to fines levied by the Commissioner's Office, so please be sure to check all applicable deadlines and file on time. Add extra sheets if necessary.

FULL ORGANIZATION NAME: Friends to Elect Ralph Taylor
ACCOUNT NUMBER: 01004393 DATE OF THIS REPORT: 08/08/2018
REPORTING PERIOD START: 06/01/2018 REPORTING PERIOD END: 08/07/2018
OFFICE SOUGHT: State Office - State Representative - District 31

CHECK THE BOX THAT APPLIES TO THIS REPORT :

PRIMARY ELECTION [] 8-DAY [x] 30-DAY OTHER ELECTION [] 8-DAY [] 30-DAY
GENERAL ELECTION [] 8-DAY [] 30-DAY SPECIAL ELECTION [] 8-DAY [] 30-DAY
[] YEAR END

THIRD-PARTY ADVERTISERS []

FINAL ORGANIZATION CLOSING : [] YES [x] NO
AMENDMENT : [] YES [x] NO

CLOSING DATE :

I authorize that all information included in this Financial Report package is accurate and correct. I agree to abide by all rules and regulations regarding Campaign Finance and the election process in the State of Delaware. I understand that representatives from the Office of the State Election Commissioner will perform an audit of all information provided on this report.

Ralph L Taylor

TREASURER SIGNATURE DATE

CANDIDATE SIGNATURE DATE

Legend: Current, Amended, Deleted, Amended New



STATEMENT OF ACCOUNT BALANCE

ACCOUNT NUMBER : 01004393 REPORTING PERIOD : 06/01/2018 08/07/2018
FROM TO

1. BEGINNING BALANCE (Ending Balance from last reporting period)	<u>\$0.00</u>
2. RECEIPTS :	
A. SCHEDULE A - TOTAL RECEIPTS	<u>\$4,886.55</u>
B. SCHEDULE C-1 - TOTAL IN-KIND RECEIPTS	<u>\$0.00</u>
C. SCHEDULE D-1 - TOTAL LOANS RECEIVED AND DEBTS INCURRED	<u>\$0.00</u>
D. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS RECEIVED	<u>\$0.00</u>
E. SUBTOTAL (Total of A,B,C,D)	<u>\$4,886.55</u>
3. EXPENDITURES :	
F. SCHEDULE B - TOTAL EXPENDITURES	<u>\$4,276.68</u>
G. SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES	<u>\$0.00</u>
H. SCHEDULE D-2 - LOAN AND DEBT PAYMENTS	<u>\$0.00</u>
I. SCHEDULE E - INTER COMMITTEE (SHARED) EXPENSES	<u>\$0.00</u>
J. SUBTOTAL (Total of F,G,H,I)	<u>\$4,276.68</u>
4. ENDING BALANCE (Beginning Balance plus 2E minus 3J)	<u>\$609.87</u>
5. VALUE OF NON-CASH ASSETS (From Schedule F)	<u>\$0.00</u>
6. VALUE OF DISPOSED/TRANSFERRED ASSETS (From Schedule G)	<u>\$0.00</u>
7. VALUE OF LOANS AT END OF PERIOD (Loan Balance From Schedule D-2)	<u>\$0.00</u>

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SCHEDULE A - TOTAL RECEIPTS

ACCOUNT NUMBER : 01004393

REPORTING PERIOD : 06/01/2018
FROM

08/07/2018
TO

Itemize all receipts over \$100 for the reporting period. Receipts from sales of items must be itemized if they are over \$50. NOTE: If you receive funds from the same person or organization several times during the reporting period, each item must be listed if the aggregate amount is over \$100, even if the individual amounts are not.

RECEIPTS :

Date Received	Contributor Name	Contributor Mailing Address	Aggregate Amount	Amount Received
08/01/2018	A&E Building	PO Box 1328, Dover, Delaware, 19903	\$500.00	\$500.00
07/28/2018	Aaron Contant	43 Shinnicock Rd, Dover, Delaware, 19904	\$485.20	\$485.20
06/20/2018	Andrew Begley	PO Box 592, Clayton, Delaware, 19938	\$100.00	\$100.00
07/07/2018	Cynthia Witt	18 Waterwheel Cir, Dover, Delaware, 19901	\$100.00	\$100.00
07/16/2018	Dan Schlabach	14765 Owens Rd, Greenwood, Delaware, 19950	\$500.00	\$500.00
08/01/2018	Delaware Foundation For Legislative Action	20439 Hummingbird Rd, Ellendale, Delaware, 19941	\$600.00	\$600.00
07/02/2018	First Class Properties	1641 E. Lebanon Rd, Dover, Delaware, 19901	\$300.00	\$300.00
07/01/2018	Harry Reeves	257 Lindley Dr, Dover, Delaware, 19904	\$200.00	\$200.00
07/03/2018	John Sigler	11 Waterwheel Cir, Dover, Delaware, 19901	\$100.00	\$100.00
06/04/2018	M Karia	54 Merion Dr, Dover, Delaware, 19904	\$300.00	\$300.00
06/17/2018	Priceson Princilus	77 Gravelly Run Branch Rd, Clayton, Delaware, 19938	\$100.00	\$100.00
06/22/2018	Ralph Taylor	1017 Westview Ter, Dover, Delaware, 19904	\$300.00	\$300.00
08/03/2018	Robert Tunnell	34026 Annas Way, Longneck, Delaware, 19966	\$582.30	\$582.30

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Delaware elections

06/25/2018	Sharon Tolson	12 Kilverstone Way, Hampton, Virginia, 23669	\$200.00	\$200.00
06/30/2018	Total of Contributions not exceeding \$100		\$50.00	\$50.00
07/02/2018	Total of Contributions not exceeding \$100		\$50.00	\$50.00
07/02/2018	Total of Contributions not exceeding \$100		\$50.00	\$50.00
07/02/2018	Total of Contributions not exceeding \$100		\$50.00	\$50.00
07/02/2018	Total of Contributions not exceeding \$100		\$50.00	\$50.00
07/18/2018	Total of Contributions not exceeding \$100		\$99.00	\$99.00
07/19/2018	Total of Contributions not exceeding \$100		\$96.80	\$96.80
07/23/2018	Total of Contributions not exceeding \$100		\$25.00	\$25.00
07/30/2018	Total of Contributions not exceeding \$100		\$48.25	\$48.25
TOTAL ITEMIZED RECEIPTS				\$4,886.55
TOTAL OF CONTRIBUTIONS NOT EXCEEDING \$100				\$0.00
GRAND TOTAL RECEIPTS (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2A)				\$4,886.55

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SCHEDULE B - TOTAL EXPENDITURES

ACCOUNT NUMBER : 01004393 REPORTING PERIOD : 06/01/2018 08/07/2018
 FROM TO

Itemize all expenditures over \$100 for the reporting period. All expenditures to Political Committees must be itemized, regardless of the amount. NOTE: IF you expend funds to the same person or organization several times during the reporting period, each item must be listed if the aggregate amount is over \$100, even if the individual amounts are not.

EXPENDITURES :

Date Expended	Payee Name	Payee Mailing Address	Vendor	Aggregate Amount	Amount Expended
08/03/2018	4 imprint	101 Commerce St, Oshkosh, Wisconsin, 45901		\$231.02	\$231.02
06/14/2018	African Amer Festival	39 S West St, Dover, Delaware, 19904		\$150.00	\$150.00
07/02/2018	Always Advertising	PO Box 320, Camden, Delaware, 19934		\$412.50	\$412.50
06/23/2018	Family Dollar	1720 S Governors Ave, Dover, Delaware, 19901		\$24.90	\$24.90
06/25/2018	Heather Contant	328 Northdown Dr, Dover, Delaware, 19904		\$360.00	\$360.00
08/07/2018	Heather Contant	328 Northdown Dr, Dover, Delaware, 19904		\$570.00	\$210.00
06/01/2018	Jean Taylor	1017 Westview Ter, Dover, Delaware, 19904		\$905.00	\$905.00
06/30/2018	Kent County Democrat Committee	P.O. Box 1114, Dover, Delaware, 19903		\$150.00	\$150.00
07/06/2018	Mast Bulk Food	246 Apple Grove School, Camden, Delaware, 19934		\$214.00	\$214.00
06/22/2018	Ollies	1726 S Governors Ave, Dover, Delaware, 19901		\$69.99	\$69.99

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Delaware *elections*

06/22/2018	Print N Press	300 Cassidy Dr, Newport, Delaware, 19804		\$313.00	\$313.00
07/30/2018	Print N Press	300 Cassidy Dr, Newport, Delaware, 19804		\$881.50	\$568.50
06/25/2018	Wix	PO Box 40190, San Francisco, California, 94518		\$151.20	\$151.20
TOTAL ITEMIZED EXPENDITURES					\$3,760.11
TOTAL OF EXPENDITURES NOT EXCEEDING \$100					\$516.57
GRAND TOTAL EXPENDITURES (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3F)					\$4,276.68

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SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES

ACCOUNT NUMBER : 01004393 REPORTING PERIOD : 06/01/2018 08/07/2018
 FROM TO

Itemize all goods and services expended at no charge or less than fair market value in excess of \$100 for the reporting period. NOTE: If you pay in-kind expenditures to the same person or organization several times during the reporting period, each item must be listed if the aggregate amount is over \$100, even if the individual amounts are not.

IN-KIND EXPENDITURES :

(NOTE: ESTIMATED VALUE EXPENDED IS FAIR MARKET VALUE LESS ANY PAYMENTS YOU RECEIVED FOR THE GOODS OR SERVICES)

Date Expended	Person or Activity Name	Person or Activity Location or Mailing Address	Vendor	Description of Expenditure	Est. Amount Expended
TOTAL ITEMIZED IN-KIND EXPENDITURES					\$0.00
TOTAL OF IN-KIND EXPENDITURES NOT EXCEEDING \$100					\$0.00
GRAND TOTAL EXPENDITURES (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3G)					\$0.00

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SCHEDULE D-1 - TOTAL LOANS RECEIVED AND DEBTS INCURRED

ACCOUNT NUMBER : 01004393 REPORTING PERIOD : 06/01/2018 08/07/2018
FROM TO

All loans in excess of \$50 RECEIVED DURING THIS REPORTING PERIOD should be itemized on this schedule. NOTE: These loans must also be listed on Schedule D-2.

LOANS RECEIVED IN EXCESS OF \$50 :

Transaction Id	Date Received	Lender	Endorser	Description of Security	Int. Rate	Amount Received
TOTAL LOANS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2C)						\$0.00

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SCHEDULE D-2 - TOTAL LOANS AND DEBTS OUTSTANDING

ACCOUNT NUMBER : 01004393 REPORTING PERIOD : 06/01/2018 08/07/2018
 FROM TO

All outstanding loans in excess of \$50 must be listed. This includes loans from Lending Institutions, Candidates Personal Funds and Other Contributors.

LOANS IN EXCESS OF \$50 :

Transaction Id	Date Received	Lender	Endorser	Description	Int Rate	Previous Loan Balance	Payments Made	Balance
TOTAL LOANS (TOTAL PAYMENTS MADE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 3H. TOTAL LOAN BALANCE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 7.)						\$0.00	\$0.00	\$0.00

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SCHEDULE E - INTER COMMITTEE (SHARED) EXPENSES

ACCOUNT NUMBER : 01004393 REPORTING PERIOD : 06/01/2018 08/07/2018
 FROM TO

All expense reimbursements received by you and paid by you must be itemized.

REIMBURSEMENTS RECEIVED (Monies paid to you as reimbursements for expenses you incurred.)

Date Received	Reimburer	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2D.)				\$0.00	\$0.00

REIMBURSEMENTS PAID (Monies paid by you to reimburse others for expenses they incurred.)

Date Paid	Payee	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS PAID (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3I.)				\$0.00	\$0.00

■ Current ■ Amended ■ Deleted ■ Amended New



SCHEDULE F - NON-CASH ASSETS

ACCOUNT NUMBER : 01004393 REPORTING PERIOD : 06/01/18 08/07/2018
FROM TO

Itemize all non-cash assets owned by the organization including those paid for by the organization, lent to the organization and contributed to the organization.

LIST ALL NON-CASH ASSETS

Date Received	Description of Asset	Location of Asset (Physical Address)	Value of Asset
TOTAL ASSET VALUE (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 5.)			\$0.00

■ Current ■ Amended ■ Deleted ■ Amended New



SCHEDULE G - ELIMINATION OF ASSETS

ACCOUNT NUMBER : 01004393

REPORTING PERIOD : 06/01/2018
FROM

08/07/2018
TO

Itemize all non-cash assets disposed of, transferred or sold by the organization during the reporting period.

LIST ALL ELIMINATED ASSETS

Date Eliminated	Description of Asset	Disposition of Asset	Value of Asset
TOTAL ASSETS ELIMINATED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 6.)			\$0.00

■ Current ■ Amended ■ Deleted ■ Amended New