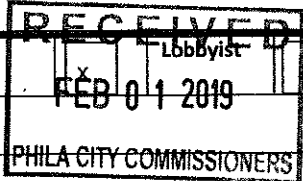


Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)



Filer Identification Number	1776258	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input type="checkbox"/>	Committee	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	WARD 10 EXECUTIVE COMMITTEE						
Street Address	P.O. BOX 6583						
City	PHILADELPHIA	State	PA	Zip Code	19138		

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		Year	2018	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	11/26/2018	12/31/2018	
A. Amount Brought Forward From Last Report	\$	7,569.18	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0.00	
C. Total Funds Available (Sum of Lines A and B)	\$	7,569.18	
D. Total Expenditures (From Schedule III)	\$	0.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	7,569.18	
F. Value of In-Kind Contributions Received (From Schedule II)	\$		
G. Unpaid Debts and Obligations (From Schedule IV)	\$		

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, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

31st day of January 20 19
 Signature

Clarrissa S. Cargill
 Signature of Person Submitting report
 Clarrissa S. Cargill
 Printed Name

My Commission expires MO. DAY YR.

215 Area Code 927-3367 Daytime Telephone Number

Notary Seal
 Notary Public
 Clarrissa S. Cargill
 Montgomery County
 Commission Expires Nov. 1, 2020
 Commission Number 1301779

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

Signature of Candidate
 Printed Name

My Commission expires MO. DAY YR.

Area Code Daytime Telephone Number