

CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER 2001243 PAC WARD 26 REP EXEC CUM C/O TREAS: JACQUELINE FOWLER 2018 E. Cambridge St. PHILADELPHIA, PA 19145-3833	REPORT FILED ON BEHALF OF	CANDIDATE <input type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input checked="" type="checkbox"/>	1.	3.
STATE _____ ZIP CODE _____						
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION		
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT <input checked="" type="checkbox"/>				NO. DAY YEAR 11 6 2018	FOR OFFICE USE ONLY	
DATES OF REPORTING PERIOD						
MO. DAY YEAR TO MO. DAY YEAR 12 7 18 TO 12 31 18						
CASH BALANCE AT END OF REPORTING PERIOD: \$ 2090.00						
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0.00						
AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/>						
TERMINATION REPORT? YES NO <input checked="" type="checkbox"/>						
RECEIVED DEC 31 2018 PHILA CITY COMMISSIONERS						

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 31st DAY OF December 2018
 Theresa A. Dintino
 SIGNATURE

MY COMMISSION EXPIRES 2019 YR.

Jacqueline Fowler
 SIGNATURE OF PERSON SUBMITTING REPORT
 JACQUELINE FOWLER
 PRINTED NAME

215 468-2300
 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 Theresa A. Dintino, Notary Public
 City of Philadelphia, Philadelphia County

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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

MY COMMISSION EXPIRES _____ YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER