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:		17	776719 Report Filed By:		CANE		IDATE 1.		COMMITTEE		2. LOE		BYIST	3.								
Name of Filin Vote Bord		e, Candi	date or l	obbyist:			And the second second	3 3					- North Style									
Street Address 2326 S. 2								-				li)										
City: Philadelphia						State: Zip Code: PA 19145																
TYPE OF REPORT	Company of the second	6th Tuesday 1. Pre-Primary X		2nd Friday Pre-Primary			Day st Primary	3.	Amendr Report?	nent	Yes		No	X								
	6th Tueso Pre-Elect		4.	2nd Friday Pre-Election	5,	30 Pos	Day st Election	6 Termin Report			Yes		No	Х								
Other	Annual R	eport	7.	YEAR	201	9																
Name of Office Sought by Candidate: City Commissioner							ELECTION District Number: 21 2019			Office Code: PH5		Party Code: DEM	Cou									
Summary of Receipts and Expenditures from: MO. DAY YEA YE						То	MO. DAY YEAR 4 1 2019			FOR OFFICE USE ONLY												
A. Amount Br	rought Forwa	ard Fro	m Last R	eport				5	437.09			2019	Ω	1								
B. Total Mone		,176.27		8		77																
B. Total Monetary Contributions and Receipts (From Schedule I) C. Total Funds Available (Sum of Lines A and B) D. Total Expenditures (From Schedule III) E. Ending Cash Balance (Subtract Line D from Line C) F. Value of In-Kind Contributions Received (From Schedule II) \$437,09 \$437.09 \$437.09 \$437.09 \$437.09 \$437.09 \$43,176.27 \$6,152.55																						
D. Total Expenditures (From Schedule III)							\$43,176.27 \$43,613.36 \$6,152.55 \$37,460.81					15 O										
E. Ending Cash Balance (Subtract Line D from Line C)								\$37	,460.81	C Property		\triangleright	510									
F. Value of In	-Kind Contri	butions	Receive	d (From Schedule	: II)				,897.48		77	<u>ب</u>		-								
G. Unpaid De	ebts and Obli	gations	(From S	chedule IV)					,000.00	2225												
DADT I 16 +bi	a la a Comm	100					IT SECTION					500		100								
PART 1 - If this is a Committee report, treasurer sign here. If this is and Committee report, treasurer sign here. If this is and Committee report, treasurer sign here. If this is and Committee report, candidate sign here. I swear (or affirm) that this report, including the attached scheduled 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 Aday of																						
							II SECTION	Na Wi			anivers!	No.										
	firm) that to) as amende	the bes	t of my k	e's Authorized C nowledge and be	ief this p				riolated any p	provisions	of the	Act of June	3, 1937 (1	P.L.								
day of Could 20/9 Signature Signature My Commission expires											· ·44											
		IV.	IO.	DAI YI	MK 6	Public 2020		Are	a Code		Dayti	MO. DAY YEAR & Area Code Daytime Telephone Number										

Campaign Finance Report
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Filer Identification Number:				riied by;	Filed By: CAINL		IDATE 1. COMMI		TTEE 2.		LOBBYIST		3.		
Name of Filing Luigi Bord	_	e, Candi	idate or I	obbyist:	<u> </u>		<u> </u>	, <u></u>							
Street Address 2326 S. 21				1,	-				-						
^{City:} Philadelph	hia				State: PA		Zip Code: 19145								
TYPE OF	6th Tues Pre-Prim		1. X	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amenda Report?			7.00	No	Х		
REPORT	6th Tues Pre-Elec		4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termina Report?	ation	Yes		No	Х		
Other	Annual F	Report	7.	YEAR	2019										
Name of Office City Comm			late:		. — DA мо. 5			District Number:	Office Code: PH5		Party Code: DEM	Code			
Summary o			мо. 1	DAY YEAR 1 2019	IR T		MO. DAY YEAR FOR OFFICE USE ONLY 4 1 2019								
A. Amount Br	ought Forv	vard Fro	om Last R	teport				\$0.00			2019	2			
B. Total Mone	etary Contr	ibutions	and Rec	ceipts (From Sched	dule I)			\$0.00	四 名	5	APR	SHEROUSSWIND AUD			
C. Total Fund	ls Available	(Sum of	f Lines A	and B)				\$0.00	ELECTIONS	Ca ALM FO	1 22				
D. Total Expe	inditures (F	rom Sch	nedule III)			\$32	2,446.00	NO.	B B	770	25			
E. Ending Car	sh Balance	(Subtra	ct Line D) from Line C)			(\$32,	,446.00)	တ် င	2	A	0			
F. Value of In	-Kind Cont	ributions	s Receive	ed (From Schedule	e II)			\$0.00			ന -	SS			
G. Unpaid De	bts and Ob	ligations	s (From S	schedule IV)				\$0.00	29		1				
				MAN SEE ST		FIDAVIT SECTION							Name of		
				easurer sign here.						* · · les		11 250			
correct and co	omptote.			ling the attached s	1 2 2 2	## # # # # # # # # # # # # # # # # # #	uter aisk	cette, are to	he best of	f my kn	owledge a	nd beliet u	rue,		
	6		/ Life time		Philadel N		_	Tin	10	14	. 0				
19#	day of	01	Spil	20/9	Z	- Administration of the second		Şignatıv	e of Pers	son Sub	omitting Rep	port			
1-9	tedito (Sign	nature		199 Aug	The state of the s	LUIGI BORDA								
My Commissi	sion expires	1.	4/17/20		<u> </u>	Notary 1	2	16	Print	ted Nam	ie 🚽 🛠	2860	-544		
u _{nomete}	ion car	F	мо.	DAY YI	ER	-	Are	ea Code	6	Dayt	time Teleph	hone Numi	_ZZ/ ber		
						FIDAVIT SECTION									
				e's Authorized C	Committee	e, candidate shall s	sign here		N. A.W.S.	78. 326 87	ALTERNATIVE STATES				
I swear (or aft 1333, No 320) Sworn to and)) as amende	ed.		knowledge and be	lief this po	litical committee	aas not v	riolated any p	provisions	of the	Act of June	3, 1937 (1	P.L.		
	day of	_		20		-	Signature of Person Submitting Report								
		_	nature					Print	ted Nam	ne					
My Commission expires MO. DAY YEAR						-	Area Code Daytime Telephone Number					ner .			