

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:	1776026	Report Filed By:	CANDIDATE ^{1.}	<input type="checkbox"/> COMMITTEE ^{2.} <input checked="" type="checkbox"/>	<input type="checkbox"/> LOBBYIST ^{3.}						
Name of Filing Committee, Candidate or Lobbyist: 46TH WARD EXECUTIVE COMMITTEE											
Street Address: 1515 MARKET STREET, SUITE 1200											
City: PHILADELPHIA			State: PA		Zip Code: 19103						
TYPE OF REPORT	6th Tuesday Pre-Primary	1. <input checked="" type="checkbox"/>	2nd Friday Pre-Primary	2. <input type="checkbox"/>	30 Day Post Primary	3. <input type="checkbox"/>	Amendment Report?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input checked="" type="checkbox"/>	
	6th Tuesday Pre-Election	4. <input type="checkbox"/>	2nd Friday Pre-Election	5. <input type="checkbox"/>	30 Day Post Election	6. <input type="checkbox"/>	Termination Report?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input checked="" type="checkbox"/>	
Other	Annual Report	7. <input type="checkbox"/>	YEAR	2019							
Name of Office Sought by Candidate: <i>City Council</i>			DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:		
			MO.	DAY	YEAR	<i>3</i>	<i>PH4</i>	<i>DEM</i>	<i>51</i>		
			<i>5</i>	<i>21</i>	<i>2019</i>						
Summary of Receipts and Expenditures from:		MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY		
		<i>1</i>	<i>1</i>	<i>2019</i>	To	<i>4</i>	<i>1</i>	<i>2019</i>	2019 APR - 9 P 12 COUNTY BD. OF ELECTIONS CITY COMMISSIONER		
A. Amount Brought Forward From Last Report								\$0.00			
B. Total Monetary Contributions and Receipts (From Schedule I)								\$0.00			
C. Total Funds Available (Sum of Lines A and B)								\$0.00			
D. Total Expenditures (From Schedule III)								\$0.00			
E. Ending Cash Balance (Subtract Line D from Line C)								\$0.00			
F. Value of In-Kind Contributions Received (From Schedule II)								\$0.00			
G. Unpaid Debts and Obligations (From Schedule IV)								\$0.00			
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 or computer diskette, are to the best of my knowledge and belief true, correct and complete.											
Sworn to and subscribed before me this											
<i>9th</i> day of <i>April</i> 20 <i>19</i>											
Signature		Commonwealth of Pennsylvania - Notary Public				Signature of Person Submitting Report					
<i>RAE-MARIA SMITH</i>		RAE-MARIA SMITH, Notary Public				<i>Janey L. Stroup</i>					
My Commission expires		MO. <i>My Commission Expires October 17, 2022</i>				Printed Name					
		Commission Number 1155624				<i>25</i> <i>817-9887</i>					
						Area Code Daytime Telephone Number					
AFFIDAVIT SECTION											
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 Person Submitting Report									
My Commission expires		Printed Name									
MO. DAY YEAR		Area Code Daytime Telephone Number									

Department of State Bureau of Commissions, Elections and Legislation
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