

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:	8000119	Report Filed By:	CANDIDATE ^{1.}	COMMITTEE ^{2.}	LOBBYIST ^{3.}
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Name of Filing Committee, Candidate or Lobbyist:
CWA Local 13000

Street Address:
2124 Race Street

City: philadelphia State: PA Zip Code: 19103

TYPE OF REPORT	6th Tuesday Pre-Primary	1.	X	2nd Friday Pre-Primary	2.		30 Day Post Primary	3.		Amendment Report?	Yes		No	X
	6th Tuesday Pre-Election	4.		2nd Friday Pre-Election	5.		30 Day Post Election	6.		Termination Report?	Yes		No	X

Other	Annual Report	7.	YEAR	2019
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Name of Office Sought by Candidate: Other	DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:
	MO.	DAY	YEAR		OTH	OTH	51
	5	21	2019				

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	
		1	1		2019		4	1
A. Amount Brought Forward From Last Report								\$242,053.10
B. Total Monetary Contributions and Receipts (From Schedule I)								\$40,340.34
C. Total Funds Available (Sum of Lines A and B)								\$282,393.44
D. Total Expenditures (From Schedule III)								\$25,627.38
E. Ending Cash Balance (Subtract Line D from Line C)								\$256,766.06
F. Value of In-Kind Contributions Received (From Schedule II)								\$0.00
G. Unpaid Debts and Obligations (From Schedule IV)								\$0.00

FOR OFFICE USE ONLY

COUNTY BD. OF ELECTIONS

2019 APR 18 P 2

CITY COMMISSIONER

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

15th day of April 20 19

Charlotte Paluch
Signature
Charlotte C Paluch - Notary Public
Philadelphia County
My Commission expires May 19, 2019
Commission Number 1039935

Marisa MacCroy
Signature of Person Submitting Report
MARISA MACCROY
Printed Name
215 Area Code
564-6169 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

My Commission expires ____ MO. ____ DAY ____ YEAR

Signature of Person Submitting Report

Printed Name

____ Area Code
____ Daytime Telephone Number