

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:	17760943	Report Filed By:	CANDIDATE ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}
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Name of Filing Committee, Candidate or Lobbyist:
Excellent Schools PA

Street Address:
5070 Parkside Avenue Ste 3301 Mailbox #5

City: Philadelphia State: PA Zip Code: 19131

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						

Name of Office Sought by Candidate:	DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:
	MO.	DAY	YEAR				
	5	21	2019				

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
	1	1	2019		4	1	2019	
A. Amount Brought Forward From Last Report					\$283,272.43			<p style="writing-mode: vertical-rl; transform: rotate(180deg);"> COUNTY OF MONTGOMERY ELECTIONS 2019 JUN 14 P 3:13 CITY COMMISSIONERS </p>
B. Total Monetary Contributions and Receipts (From Schedule I)					\$200.00			
C. Total Funds Available (Sum of Lines A and B)					\$283,472.43			
D. Total Expenditures (From Schedule III)					\$17,049.65			
E. Ending Cash Balance (Subtract Line D from Line C)					\$266,422.78			
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

<p>COMMISSIONER OF HEALTH OF PENNSYLVANIA</p> <p>NOTARIAL SEAL</p> <p>LILLIE A. WOODBERRY, Notary Public Lower Merion Twp., Montgomery County My Commission Expires August 17, 2020</p>	<p>Signature of Person Submitting Report</p> <p><i>David Hardy</i></p> <p>Printed Name</p> <p>David Hardy</p> <p>Area Code</p> <p>215</p> <p>Daytime Telephone Number</p> <p>983-9653</p>
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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

<p>_____ day of _____ 20 _____</p> <p>Signature</p> <p>My Commission expires</p> <p>MO. DAY YEAR</p>	<p>Signature of Person Submitting Report</p> <p>Printed Name</p> <p>Area Code</p> <p>Daytime Telephone Number</p>
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