

Commonwealth of Pennsylvania
Campaign Finance Report

(Note: This report must be clear and legible. It may be typed or printed in blue or black ink.)

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|--|--------------------------|-------------------------|-------------------------|---------------------------|------------------------|----|---------------------|-----|----|---|
| Filer Identification Number: | 7900319 | Report Filed By: | CANDIDATE ^{1.} | COMMITTEE ^{2.} | LOBBYIST ^{3.} | | | | | |
| Name of Filing Committee, Candidate or Lobbyist: Faculty and Staff Federation of the Community College of Philadelphia | | | | | | | | | | |
| Street Address: 1700 Spring Garden St Rm BR-63 | | | | | | | | | | |
| City: Philadelphia | | State: PA | | Zip Code: 19130 | | | | | | |
| 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: | 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 | | | | | | | | COUNTY BD. OF ELECTIONS 2019 APR - 8 P 12 CITY COMMISSIONERS |
| 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) | | | | | | | | |
| G. Unpaid Debts and Obligations (From Schedule IV) | | | | | | | | |

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

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| <p><u>8th</u> day of <u>April</u> 20 <u>19</u></p> <p><u>Jaylene M. Gregonis</u> Signature</p> <p>My Commission expires <u>3</u> <u>6</u> <u>2022</u> MO. DAY YEAR</p> | <p><u>Marc Meda</u> Signature of Person Submitting Report</p> <p><u>Marc Meda</u> Printed Name</p> <p><u>267</u> <u>978-1224</u> Area Code Daytime Telephone Number</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

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| <p>_____ day of _____ 20 _____</p> <p>_____ Signature</p> <p>My Commission expires _____ MO. DAY YEAR</p> | <p>_____ Signature of Person Submitting Report</p> <p>_____ Printed Name</p> <p>_____ <u>978-1224</u> Area Code Daytime Telephone Number</p> |
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Department of State Bureau of Commissions, Elections and Legislation
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