

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.)

<b>Filer Identification Number:</b>	2015237	<b>Report Filed By:</b>	CANDIDATE <sup>1.</sup>	COMMITTEE <sup>2.</sup>	LOBBYIST <sup>3.</sup>							
Name of Filing Committee, Candidate or Lobbyist: North Star PAC												
Street Address: 3725 N. Bouvier Street												
City: philadelphia			State: PA		Zip Code: 19140							
<b>TYPE OF REPORT</b>	6th Tuesday Pre-Primary	1.	X	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes	X	No	
	6th Tuesday Pre-Election	4.		2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes	X	No	
Other	Annual Report	7.		YEAR	2019							
Name of Office Sought by Candidate: Other			DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:			
			MO.	DAY	YEAR	8	OTH					
			5	21	2019							
<b>Summary of Receipts and Expenditures from:</b>		MO.	DAY	YEAR	To	MO.	DAY	YEAR	<b>FOR OFFICE USE ONLY</b>			
		1	1	2019	To	4	1	2019	COUNTY BD. OF ELECTIONS 2019 APR 17 P 3:03 CITY COMMISSIONERS			
A. Amount Brought Forward From Last Report								\$26.00				
B. Total Monetary Contributions and Receipts (From Schedule I)								\$0.00				
C. Total Funds Available (Sum of Lines A and B)								\$26.00				
D. Total Expenditures (From Schedule III)								\$55.11				
E. Ending Cash Balance (Subtract Line D from Line C)								(\$29.11)				
F. Value of In-Kind Contributions Received (From Schedule II)								\$0.00				
G. Unpaid Debts and Obligations (From Schedule IV)								\$0.00				
<b>AFFIDAVIT SECTION</b>												
PART I - If this is a <b>Committee</b> report, treasurer sign here. If this is a <b>Candidate</b> 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												
		17	day of	April	20	19						
		Signature					Signature of Person Submitting Report					
My Commission expires		04	30	2021						Printed Name		
		MO.	DAY	YEAR	267		974-1149					
					Area Code		Daytime Telephone Number					
<b>AFFIDAVIT SECTION</b>												
PART II - If this is a report of a <b>Candidate's Authorized Committee</b> , 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		_____	MO.	DAY	YEAR						Printed Name	
					_____		_____					
					Area Code		Daytime Telephone Number					

Department of State Bureau of Commissions, Elections and Legislation  
 210 North Office Building Harrisburg, PA 17120-0029 (717)787-5280

Notarial Seal  
 JUBIN SHAH - Notary Public  
 CITY OF PHILADELPHIA, PHILADELPHIA CNTY  
 My Commission Expires Apr 30, 2021

**SCHEDULE III  
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate: <b>North Star PAC</b>		Reporting Period: From <u>02/07/2019</u> To <u>02/07/2019</u>		
To Whom Paid: <b>Urban Crisis Response Center</b>		MO. <b>2</b>	DAY <b>7</b>	YEAR <b>2019</b>
Mailing Address: <b>1554 W. Oakdale Street</b>				
City: <b>Philadelphia</b>	State: <b>PA</b>			
Description of Expenditure: <b>Charitable Donation</b>				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				<b>Schedule III Total: \$29.11</b>