

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>	8100237	<b>Report Filed By:</b>	CANDIDATE <sup>1.</sup>	COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>	LOBBYIST <sup>3.</sup>					
<b>Name of Filing Committee, Candidate or Lobbyist:</b> Pennsylvania Apartment Association										
<b>Street Address:</b> One Bala Plaza Suite 515										
<b>City:</b> Bala Cynwyd			<b>State:</b> PA		<b>Zip Code:</b> 19004					
<b>TYPE OF REPORT</b>	6th Tuesday Pre-Primary	1. <input checked="" type="checkbox"/>	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes	No	<input checked="" type="checkbox"/>
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes	No	<input checked="" type="checkbox"/>
<b>Other</b>	Annual Report	7.	YEAR	2019						

<b>Name of Office Sought by Candidate:</b>	DATE OF ELECTION			<b>District Number:</b>	<b>Office Code:</b>	<b>Party Code:</b>	<b>County Code:</b>
	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
A. Amount Brought Forward From Last Report								\$145,730.69	COUNTY BD. OF ELECTIONS 2019 APR 10 P 1:00 CITY COMMISSIONERS
B. Total Monetary Contributions and Receipts (From Schedule I)								\$5,034.00	
C. Total Funds Available (Sum of Lines A and B)								\$150,764.69	
D. Total Expenditures (From Schedule III)								\$2,759.00	
E. Ending Cash Balance (Subtract Line D from Line C)								\$148,005.69	
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

3rd day of June 20 19

Signature: *[Signature]*

My Commission expires 8 7 2021

Commonwealth of Pennsylvania  
 NOTARIAL SEAL  
 Patrick McClendon, Notary Public  
 Newtown Square Township, Delaware County  
 My Commission Expires August 2022

Signature of Person Submitting Report: *[Signature]*  
 Printed Name: MICHAEL RODRIGUEZ  
 Area Code: 215 Daytime Telephone Number: 473-4803

**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: \_\_\_\_\_

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

### 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>	8100237	<b>Report Filed By:</b>	CANDIDATE	1.	<b>COMMITTEE</b>	2. <input checked="" type="checkbox"/>	<b>LOBBYIST</b>	3.	
Name of Filing Committee, Candidate or Lobbyist: <b>Pennsylvania Apartment Association</b>									
Street Address: <b>One Bala Plaza Suite 515</b>									
City: <b>Bala Cynwyd</b>			State: <b>PA</b>		Zip Code: <b>19004</b>				
<b>TYPE OF REPORT</b>	6th Tuesday Pre-Primary	1. <input checked="" type="checkbox"/>	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes <input checked="" type="checkbox"/> No	
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes No <input checked="" type="checkbox"/>	
Other	Annual Report	7.	YEAR	<b>2019</b>					
Name of Office Sought by Candidate:			DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:
			MO.	DAY	YEAR				
			5	21	2019				
<b>Summary of Receipts and Expenditures from:</b>			MO.	DAY	YEAR	To	MO.	DAY	YEAR
			1	1	2019	To	4	1	2019
A. Amount Brought Forward From Last Report						<b>\$145,730.69</b>			
B. Total Monetary Contributions and Receipts (From Schedule I)						<b>\$5,034.00</b>			
C. Total Funds Available (Sum of Lines A and B)						<b>\$150,764.69</b>			
D. Total Expenditures (From Schedule III)						<b>\$7,059.00</b>			
E. Ending Cash Balance (Subtract Line D from Line C)						<b>\$143,705.69</b>			
F. Value of In-Kind Contributions Received (From Schedule II)						<b>\$0.00</b>			
G. Unpaid Debts and Obligations (From Schedule IV)						<b>\$0.00</b>			
<b>FOR OFFICE USE ONLY</b>									
COUNTY BD. OF ELECTIONS 2019 APR 10 10:12 AM CITY COMMISSIONERS									
<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									
<b>Commonwealth of Pennsylvania</b>									
3rd day of			20th			NOTARIAL SEAL Patrick McClendon, Notary Public Newtown Square Township, Delaware County My Commission Expires April 7, 2021			
Signature			Signature			Signature of Person Submitting Report			
My Commission expires			7 2021			Printed Name			
MO. DAY YEAR			MO. DAY YEAR			Area Code Daytime Telephone Number			
						215 473-4803			
<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 of Person Submitting Report			
Signature			Signature			Printed Name			
My Commission expires			MO. DAY YEAR			Area Code Daytime Telephone Number			

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