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.)

Filer Identification Number:		17760785		Report CANE		DIDATE 1. CO		OMMITTEE 3		2	LOBBYIS		3.		
Name of Filing Committee, Candidate or Lobbyist: Philly 2019															
Street Address: 7201 Frankford Ave. #956															
City: State: Philadelpia PA							Zip Code: 19135								
TYPE OF REPORT		6th Tuesday 1. Pre-Primary		l Friday -Primary	2.		Day st Primary		Amend Report		VOC			No	X
	6th Tues Pre-Elect			d Friday -Election	5.		Day at Election			Terminat Report?		Yes		No	Х
Other 201	Annual R	leport	7. YE.	AR	201	9									
Name of Office Sought by Candidate: Other						TE OF I		AR 19	District Number		Office Code: OTH		Party Code: DEM	Cou	
Summary of Receipts MO. DAY YEAR							MO.	DAY	AY YEAR		FOR OFFICE USE ONLY				
A. Amount Brought Forward From Last Report \$222,88												0	2019	9	3
B. Total Monetary Contributions and Receipts (From Schedule I) \$0.00													3 =		
A. Amount Brought Forward From Last Report \$222,881.25 B. Total Monetary Contributions and Receipts (From Schedule I) \$0.00 C. Total Funds Available (Sum of Lines A and B) \$222,881.25 D. Total Expenditures (From Schedule III) \$200,000.00 E. Ending Cash Balance (Subtract Line D from Line C) \$22,881.25 F. Value of In-Kind Contributions Received (From Schedule II) \$0.00													7. 2.		
D. Total Expenditures (From Schedule III)								\$200,000.00				9	<u></u>	2	20
E. Ending Cash Balance (Subtract Line D from Line C)							\$22,881.25							ži n	
F. Value of In-Kind Contributions Received (From Schedule II)									\$0.	.00			152	č	D D
G. Unpaid Debts and Obligations (From Schedule IV) \$0.00															
DADT I TO SE	e ic a Comu	niitaa w	anort broaden	or elem home			IT SECTIO		ndidata aja	on how					
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 day of Mark 20 19															
Patricia DE Cale EUZABETH CONTO														HO.	
My Commissi		Z67 Area Code			Printed Name 443-4107										
Area Code Daytime Telephone Number AFFIDAVIT SECTION															
PART II - If the 1 swear (or aff 1333, No 320) Sworn to and	irm) that to as amende	the bes	t of my knowl					_		i any p	provisions	of the	Act of June	3, 1937 (P.L.
and to und	day of			20											
50 10			Signature of Person Submitting Report												
Signature Printed Name															
My Commiss	on expires	N	40. DA	Y Y	EAR		ii .		Area Code	ACCRACA		Dayt	ime Teleph	one Num	ber

Department of State Bureau of Commissions, Elections and Legislation 210 North Office Building Harrisburg, PA 17120-0029 (717)787-1280

manusalth of Pennsylvania - Notary See PATRICIA D'ERCOLE, Notary Public Philadelphia County Commission Expires February 24, 2822 Commission Number 1222061