

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.*

FILER IDENTIFICATION NUMBER	▶ 2019C0372			REPORT FILED ON BEHALF OF	CANDIDATE	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Robert P. Coleman																						
STREET ADDRESS 429 City Hall																						
CITY Phila				STATE PA		ZIP CODE 19107-																
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		DATE OF ELECTION														
6TH TUESDAY PRE-PRIMARY		Court of Common Pleas Judge			1	Dem		MO.	DAY	YEAR												
2ND FRIDAY PRE-PRIMARY								11	5	2019												
30 DAY POST-PRIMARY								FOR OFFICE USE ONLY														
6TH TUESDAY PRE-ELECTION								COUNTY ED. OF ELECTIONS 2019 SEP 27 P 2:26 CITY COMMISSIONERS														
2ND FRIDAY PRE-ELECTION																						
30 DAY POST-ELECTION																						
ANNUAL REPORT																						
		DATES OF REPORTING PERIOD																				
		<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>1</td><td>1</td><td>2019</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>9</td><td>27</td><td>2019</td></tr> </table>			MO.	DAY	YEAR	1	1	2019	MO.	DAY	YEAR	9	27	2019						
MO.	DAY	YEAR																				
1	1	2019																				
MO.	DAY	YEAR																				
9	27	2019																				
		CASH BALANCE AT END OF REPORTING PERIOD:			\$ 0.00																	
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:			\$ 0.00																	
		AMENDMENT REPORT?			YES	NO																
		TERMINATION REPORT?			YES	NO																

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 27 DAY OF September 20 19

Maria T. Assanowicz
 SIGNATURE

MY COMMISSION EXPIRES 08 02 2020
 COMMONWEALTH OF PENNSYLVANIA YR.

SIGNATURE OF PERSON SUBMITTING REPORT
 Robert P. Coleman
 PRINTED NAME

215 AREA CODE 686-9532 DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 MARIA T. ASSANOWICZ, Notary Public
 City of Philadelphia, Phila. County
 My Commission Expires August 2, 2020

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 _____ YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE _____ DAYTIME TELEPHONE NUMBER