

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:	1776687	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	LOBBYIST	3.		
Name of Filing Committee, Candidate or Lobbyist: United Wards GOP										
Street Address: 6923 Rutland Street										
City: Philadelphia			State: PA		Zip Code: 19149					
TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes	No	X
	6th Tuesday Pre-Election	X	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes	No	X
Other	Annual Report	7.	YEAR	2019						
Name of Office Sought by Candidate:			DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:	
			MO.	DAY	YEAR					
			11	5	2019					
Dates of Reporting Period		MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
		6	11	2019		9	16	2019	COUNTY ED. OF ELECTIONS SEP 24 P 1:1 COMMISSIONERS	
Cash Balance at End of Reporting Period:						\$700.00				
Total Amount of Filer's Outstanding Debts or Liabilities at End of Reporting Period:						\$0.00				

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidate'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

24th day of September, 2019
Audrey M. Garmey
 Signature
 My Commission expires July 1, 2022
 MO. DAY YEAR
 Philadelphia County

Mary Frances Woodruff
 Signature of Person Submitting Report
 MARY FRANCES WOODRUFF
 Printed Name
215 760-1306
 Area Code Daytime Telephone Number

AFFIDAVIT SECTION

If statement is filed on behalf of Candidate's Authorized Committee, the 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 YEAR

 Signature of Person Submitting Report

 Printed Name

 Area Code Daytime Telephone Number