## Commonwealth of Pennsylvania

## **Campaign Finance Statement**

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

	Filer Identi Number:	ification 2	2017140 Report Filed By			CANDIDATE 1.		COMMITTEE		LOBBYIST 3.			
	Name of Filing Committee, Candidate or Lobbyist: 22nd Ward Republican Executive Committee												
	Street Addres	Street Address: 6644 Lincoln Drive											
	City: Philadelp	hia			State: PA			Zip Code: 19119					
	TYPE OF	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes		No	Х	
2	REPORT	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes		No	т Х	
	Other 401	Annual Report	7.	YEAR	2019	9				8	0	A.j.	
	Name of Office	ice Sought by Candid	date:		MO. 11	TE OF ELECTION  DAY YEAR  5 201	AR Nur	otrict Office code	92	Pasy Ceds:	Gen Code		
	Dates of Re Period	Dates of Reporting MO. DAY YEAR Period 9 17 2019				MO. D	DAY Y	EAR		TU	E ON	-	
	Cash Ba	alance at End of	Reporti	ing Period:			#465.00 V.				SIONERS		
		Total Amount of Filer's Outstanding Debts or Liabilities at End of Reporting Period:											
County 9, 2021	AFFIDAVIT SECTION  PART I -												
MONWEALTH OF PENNSYLVANIA NOTARIAL SEAL Kyle Sheva, Notary Public ar Merion Twp., Montgomery County Commission Expires Sept. 19, 2021													
OF PEI AL SEA Notary I Montgo pires S	swear (or affirm) that the aggregate receipts or disbursements or liabilities incurred during the reporting period indicated above did not exceed two sundred and fifty dollars (\$250.00) and this report is, to the best of my knwoledge and belief, true, correct and complete.  Sworn to and subscribed before me this												
IMONWEALTH OF PENNSY NOTARIAL SEAL Kyle Sheva, Notary Public er Merion Twp., Montgomery Commission Expires Sept. 19	YEVANIA S	day of		20 10	2_	_*	m	La of Pa	Suhi	ithing Done			
Kyle:	R. PENNSYLVANIE	Sign	gnature				Michael J. Conningham  Printed Name						
	My Commiss		MO.	DAY Y	2 ( YEAR	<u></u>	G10 Area C		613-	- 39/6 ime Telephor		ber	
	PART II -		corps strong		AF	FFIDAVIT SECTION							
1	If statement is filed on behalf of <u>Candidate's Authorized Committee</u> , 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												
90		day of 20				Signature of Person Submitting Report							
	1												
1	No. Committee	Sign	gnature			, <u> </u>		Pri	inted Name	e			

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