

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: | 2017140 | Report Filed By: | CANDIDATE | 1. | COMMITTEE | <input checked="" type="checkbox"/> | LOBBYIST | 3. | | |
| Name of Filing Committee, Candidate or Lobbyist: 22nd Ward Republican Executive Committee | | | | | | | | | | |
| Street Address: 6644 Lincoln Drive | | | | | | | | | | |
| City: Philadelphia | | | State: PA | | Zip Code: 19119 | | | | | |
| 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 | 4. | 2nd Friday Pre-Election | 5. | 30 Day Post Election | 6. | Termination Report? | Yes | No | X |
| Other 502 | 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 | 22 | | | 51 | |
| | | | 11 | 5 | 2019 | | | | | |
| Dates of Reporting Period | | MO. | DAY | YEAR | To | MO. | DAY | YEAR | FOR OFFICE USE ONLY | |
| | | 10 | 30 | 2019 | | 11 | 1 | 2019 | COUNTY BD. OF ELECTIONS 9 NOV - 4 P.M. CITY COMMISSIONER | |
| Cash Balance at End of Reporting Period: | | | | | | 465.00 | | | | |
| 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

30 day of October 20 19

Signature _____
 My Commission expires 9 MO. 19 DAY 21 YEAR

Signature of Person Submitting Report _____
 Printed Name Michael J. Cunningham
 Area Code 610 Daytime Telephone Number 613-3916

AFFIDAVIT SECTION

PART II -
 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 _____

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

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Kyle Sheva, Notary Public
 Upper Merion Twp., Montgomery County
 My Commission Expires Sept. 19, 2021