

Campaign Finance Report

(Note: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filler Identification Number:	2015211	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	LOBBYIST	3.
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Name of Filing Committee, Candidate or Lobbyist:
DISTRICT COUNCIL 33 POLITICAL CONTRIBUTIONS SSF

Street Address:
3001 WALNUT STREET

City: **PHILADELPHIA** State: **PA** Zip Code: **19104-3414**

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 Report Number	Annual Report	7.	YEAR	2020
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Name of Office Sought by Candidate:	DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:
	MO.	DAY	YEAR				
	6	2	2020				

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
	A. Amount Brought Forward From Last Report	5	19	2020		6	22
B. Total Monetary Contributions and Receipts (From Schedule I)							
C. Total Funds Available (Sum of Lines A and B)							
D. Total Expenditures (From Schedule III)							
E. Ending Cash Balance (Subtract Line D from Line C)							
F. Value of In-Kind Contributions Received (From Schedule II)							
G. Unpaid Debts and Obligations (From Schedule IV)							

FOR OFFICE USE ONLY

Phila, County

AUG - 3 2020

Board of Elections

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate's 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

23 day of July 20 20

Jamil Abdul-Malik
Signature

My Commission expires 7 26 2023

Elizabeth G. Mac Donald
Signature of Person Submitting Report

Elizabeth G. Mac Donald
Printed Name

Area Code _____ Daytime Telephone Number _____

AFFIDAVIT SECTION

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall 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