## Commonwealth of Pennsylvania

Name of Office Sought by Candidate:    Other   Summary of Receipts   Mo. DAY   YEAR   MO. D	Filer Identification Number:		2002299 Report Filed By:		/:	CANI	DIDATE	1. COMM		LIEE 2.		LOBBYIST		3.	
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TYPE OF REPORT    Pre-Primary   Pre-Primary   Pre-Primary   Post Primary   Report?   Yes   No   X		ıia													
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A. Amount Brought Forward From Last Report  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)  PART II-If this is a Committee report, treasurer sign here. If this is a Candidate 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.  Sworn to and subscribed hat for me this  AFFIDAVIT SECTION  PART II-II this is a report of a Candidate Paper, Landidate shall sign here.  I swear (or affirm) that to the best of my knowledge and belief this political 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  AFFIDAVIT SECTION  PART II-II 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  Printed Name  Printed Name  Printed Name  Printed Name  Printed Name	i .	MO.	D/	AY YEAF	R N		Code:			Code					
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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)  **AFFIDAVIT SECTION**  PART I- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.  I swear (or affirm) that this report including the attached schedules, on paper or computer disketic, are to the best of my knowledge and belief true, correct and complete.  Sworn to and subscribed hetere me this  **AFFIDAVIT SECTION**  Printed Name*  AFFIDAVIT SECTION*  Printed Name*  AFFIDAVIT SECTION*  Printed Name*  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	A. Amount Br	ought Forv	vard From Last	Report				¤39,	,054.00						
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My Commission expires    My Commission expires   City of Philadelphia, Phila. County   Area Code   Daytime Telephone Number	Signature of Person/Submitting Report													- , M ,	
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Department of State Bureau of Commissions, Elections and Legislation 210 North Office Building Harrisburg, PA 17120-0029 (717)787-5280