Commonwealth of Pennsylvania

Campaign Finance Report

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

| Filer Identification Number: | | 2007252 | | Report Filed By: | | CANDIDATE 1. | | COMMITTEE | | 2. X | LOBBYIST 3 | | 3. | |
|--|--|--------------------|--|--|---------------------------------------|---|-------------------------------|-------------------------------|-----------------|----------------|----------------|--------------------|-------|--|
| Name of Filin PAC1742 | g Committe | e, Candi | date or Lobb | yist: | n e | | | 180 | 3 8 | lin | J. | | | |
| Street Addres | | | | | Je 3 | 74. | | The state | es y | | | | | |
| 7720 Castor Ave City: State: Zip Code: | | | | | | | | | | | | | | |
| City: Philadelp | 700081 | Zip Code: 19152 | | | | | | | | | | | | |
| TYPE OF REPORT | 6th Tuesday Pre-Primary | | 1. 2nd Friday Pre-Primary | | 2. | 30 Day Post Primary | 3. X | Amendm Report? | ent | Yes | | No | X | |
| | 6th Tues Pre-Elec | | | d Friday e-Election | 5. | 30 Day Post Election | 6. | Terminat Report? | tion | Yes | 1 | No | X | |
| Other | Annual F | leport | 7. YI | EAR | 202 | 0 | | | | | | | | |
| Name of Office Sought by Candidate: DATE OF MO. DATE 06 03 | | | | | | | | strict ımber: | Office Code: | | Party Code: | Coun Code 51 | | |
| Summary of Receipts and Expenditures from: MO. DAY YEAR MO. DAY YEAR FOR OFFICE USE | | | | | | | | | | | JSE ON | LY | | |
| A Amount Brought Forward From Lact Parant | | | | | | | | | | | | | | |
| B. Total Monetary Contributions and Receipts (From Schedule I) | | | | | | | #0.00 Phila, County | | | | | | | |
| C. Total Fun | ds Available | | ¤14,545.03 JUN 2 9 2020 | | | | | | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | | ~600 00 T | | | | | | | |
| E. Ending Cash Balance (Subtract Line D from Line C) | | | | | | | #13,945.03 Beard of Elections | | | | | | | |
| F. Value of In-Kind Contributions Received (From Schedule II) | | | | | | | | ¤0.00 | | | | | | |
| G. Unpaid Debts and Obligations (From Schedule IV) | | | | | | | | | | | | | | |
| | | | | | | FFIDAVIT SECTION | | | , E% | | | | ar Va | |
| | THE RESERVE AND ADDRESS OF THE PERSON NAMED IN | | THE RESERVE AND ADDRESS OF THE PERSON NAMED IN | NAME AND ADDRESS OF THE OWNER, TH | | s a Candidate reports, on paper or comp | _ | | | f my kr | owledge a | and belief t | nie. | |
| correct and o | complete. | - | - | | | o, on paper or comp | , | | | | \supset | | , | |
| Sworn to and subscribed before me this As day of June 20 20. | | | | | | | | | | | | | | |
| day of June 20 do Signature of Person Submitting Report | | | | | | | | | | | | | | |
| Deiglad Name | | | | | | | | | | | | | | |
| My Commission Expires Languary 10, 221 YEAR Area Code Daytime Telephone Number | | | | | | | | | | | | ber | | |
| 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 32 Sworn to and | 0) as amend | ed. | • | | | | | | | | | | | |
| | day of | _ | | | Signature of Person Submitting Report | | | | | | | | | |
| Signature | | | | | | | Printed Name | | | | | | | |
| My Commis | sion expires | | MO. I | EAR | _ | Area | Code | Code Daytime Telephone Number | | | | ber | | |

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