

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.)

Filter Identification Number:	7900328	Report Filed By:	CANDIDATE	1	COMMITTEE	2	LOBBYIST	3
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Name of Filing Committee, Candidate or Lobbyist:
5th Ward Democratic Executive Committee

Street Address:
603 N American Street

City: **Philadelphia** State: **PA** Zip Code: **19123**

TYPE OF REPORT	1		2		3		Termination Report?
	6th Tuesday Pre-Primary	2nd Friday Pre-Primary	30 Day Post Primary	Amendment Report?	Yes	No	
6th Tuesday Pre-Election	X						No
Annual Report							X

Name of Office Sought by Candidate:
 Other

DATE OF ELECTION	MO.		DAY		YEAR		District Number
	11	3	2020	9	14	2020	

Office Code: OTH Party Code: DEM County Code: 51

FOR OFFICE USE ONLY

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	
A. Amount Brought Forward From Last Report	6	23	2020					\$7,389.62
B. Total Monetary Contributions and Receipts (From Schedule I)								\$7,000.00
C. Total Funds Available (Sum of Lines A and B)								\$14,389.62
D. Total Expenditures (From Schedule III)								\$10,356.40
E. Ending Cash Balance (Subtract Line D from Line C)								\$4,033.22
F. Value of In-Kind Contributions Received (From Schedule III)								\$0.00
G. Unpaid Debts and Obligations (From Schedule A)								\$0.00

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 diskette, are to the best of my knowledge and belief true, correct and complete.
 Sworn to and subscribed before me this _____ day of _____, 20__.

Signature: *[Signature]*
 My Commission Expires: 08 23 2023
 My Commission Number: 265
 Area Code: _____
 Daytime Telephone Number: 768 8479

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. 133, No. 320) as amended.
 Sworn to and subscribed before me this _____ day of _____, 20__.

Signature: _____
 Printed Name: _____
 My Commission expires: MO. _____ DAY _____ YEAR _____
 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