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:		790046	O Report Filed By	CA	NDIDATE	1. COMMI		TEE 2. LO		BYIST 3.
Name of Filing Committee, Candidate or Lobbyist. LOCAL 500 POLITICAL ACTION FUND										
Street Address		DE: 4377 CTT	TTT 204							
3460 N DELAWARE AVE SUITE 301 City: State: Zip Code:										
PHILADELPHIA					PA 19134					
TYPE OF REPORT	6th Tuesday 1. Pre-Primary		2nd Friday Pre-Primary		30 Day Post Primary	3. Amendr Report?		int Y	'es	No X
	6th Tues Pre-Elec		2nd Friday Pre-Election		30 Day Post Election	6. Termina Report?		on y	'es	No X
Other	Annual I	7. Report	YEAR	2020						
Name of Office Sought by Candidate: MC					DAY YEA	R Nu		Office Code:	Party Code:	County Code: 51
Summary of Receipts MO. DAY YEAR To and Expenditures from: 6 23 2020						DAY YEAR FOR OFFICE USE ONLY				
A. Amount Brought Forward From Last Report #44,347.74										-8 3
B. Total Monetary Contributions and Receipts (From Schedule I)						¤3,5	574.00		¥ ; +,	
C. Total Funds Available (Sum of Lines A and B) #47,921.74										C3
D. Total Expenditures (From Schedule III)						¤1,6	620.88			1
E. Ending Cash Balance (Subtract Line D from Line C)						¤46,	300.86		23	
F. Value of In-Kind Contributions Received (From Schedule II)							¤0.00		12.5° \$4.6°	
G. Unpaid De	bts and Ob	ligations (Fron	Schedule IV)				¤0.00		ŧŝ	Ör 5
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										
14 day of Lept 20 30 Signature of Person Submitting Report										
My Commission expires My Commission expires STATE OF NEW JERSEY Signature STATE OF NEW JERSEY Signature State of New Jersey State of New Je										
My Commiss	on expires	My-Com	Tilesion Expires 6	4/24-2023	_	Area	Code	29	2 72 4 Davtime Telep	one Number
AFFIDAVIT SECTION										
PARTAL, 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 of Person Submitting Report				
Signature Printed Name									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