

## Bureau of Campaign Finance & Civic Engagement 210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

## Unsworn Statement in Lieu of Sworn Statement for **Campaign Finance Reports**

of this form signed by the required individual(s). This particular form is to be used only for declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements In lieu be notarized. Instead, the filer may file with each report or statement the corresponding version of full reports (form DSEB-503), and Independent Expenditure Reports (form DSEB-505) need not Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn Campaign Finance Reports. This form must be signed by hand where a signature is required.

☐ <b>Cycle 9</b> 30 Day Post-Special Election	ial Election	☐ <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election	☐ Cycle 7 Annual Report	☐ <b>Cycle 6</b> 30 Day Post-Election
Pre-Election	Pre-	Post Primary	Pre-Primary	Pre-Primary
6 <sup>th</sup> Tuesday	6th 1	30 Day	2 <sup>nd</sup> Friday	6 <sup>th</sup> Tuesday
Cyc	☑ Cycle 4	☐ Cycle 3	☐ Cycle 2	☐ Cycle 1
			Name	Reporting Cycle Name
<u>a</u> .	t Assoc	Pennsylvania Apartment Association	Pennsylvar	
	yilst		Committee, Can	Name of Filing Committee, Candidate, or Lobbyist

is submitted with a report by a contributing lobbyist, the lobbyist must sign here. this form is submitted with a Candidate report, the candidate must sign here. If this report Part I - If this form is submitted with a Committee report, the treasurer must sign here. If

that the foregoing is true and correct. declare under penalty of perjury under the law of the Commonwealth of Pennsylvania

Michael
Woodward

Signature of Treasurer, Candidate, or Lobbyist

## Michael Woodward

**Printed Name** 

9/15/2020

S Xd

Date (DD/MM/YYYY) 응

Upper Darby, Pa, US

Location (City/State/Country)

DSEB-502R Updated 6/24/2020

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.)

			- ;	+		*			3			2
Filer Identification Number:		8100237	Filed By:	င	CANDIDATE	ļ	COMMITTEE	TEE	<u>×</u>	LOBE	OBBYIST	ç
Name of Filing Pennsylvar	Name of Filing Committee, Candidate or Lobbyist: Pennsylvania Apartment Association	date or L : Assoc	obbyist: ciation									
Street Address: One Bala P	Street Address: One Bala Plaza Suite 515	5										
<sup>City:</sup> Bala Cynwyd	yd			State: PA	:		Zi <sub>I</sub> 19	Zip Code: 19004				
ТҮРЕ ОҒ	6th Tuesday Pre-Primary	,	2nd Friday Pre-Primary	2	30 Day Post Primary	3.	Amendment Report?	ment	Yes		oN	×
REPORT	6th Tuesday Pre-Election	4. X	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	ation }	Yes		No	X
Other	Annual Report	7.	YEAR	2020								
Name of Office	Name of Office Sought by Candidate:	ate:		MO. 11	DATE OF ELECTION  DAY  Y  3  2	EAR 020	District Number:	Office Code:	O #	Party Code:	County Code: 46	Ä
Summary of Receipts	Receipts [	P	AY		MO.	DAY	YEAR	P.	FOR OFFIC	ICE U	E USE ONLY	X
and Expenditures from:	tures from:	6	23 2020		<b>-</b>   9	14	2020					
B. Total Monet	B. Total Monetary Contributions and Receipts (From Schedule I)	and Rece	pipts (From Schedu	ıle I)		#3	x31,079.63				33	
C. Total Funds	Total Funds Available (Sum of Lines A and B)	Lines A	and B)			¤25	¤257,481.68				KS E	*.
D. Total Expen	D. Total Expenditures (From Schedule III)	edule III)				¤1	¤18,509.00				\ c	
E. Ending Cas	E. Ending Cash Balance (Subtract Line D from Line C)	t Line D	from Line C)			¤23	¤238,9/2.68				d (	
G. Unpaid Deb	G. Unpaid Debts and Obligations (From Schedule IV)	(From S	chedule IV)				¤0.00				:8 :	
PART I - If this	AFFIDAVIT SECTION PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.	eport, tre	asurer sign here.	AFI If this is a	AFFIDAVIT SECTION is a <b>Candidate</b> repor	)N bort, cand	lidate sign he	.e.				
I swear (or affi correct and cor Sworn to and s	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	t, includi ne this	ng the attached sc	chedules,	on paper or con	)puter di	skette, are to	the best o	f my kno	wledge ar	id belief tr	ue,
	day or		 				Signatu	re of Pers	on Subm	Signature of Person Submitting Report	POIT	
My Commission expires		Signature						Print	Printed Name	•		
rij commask		MO.	DAY YE	YEAR		<u> </u>	Area Code		Daytime '		elephone Number	er
PART II - If thi	AFFIDAVIT SECTION  PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.	andidate	s's Authorized Co	)mmittee	APFIDAVIT SECTION ttee, candidate shall s	)N Il sign he	re,					
I swear (or affirm) that to the transfer of th	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	st of my k ne this	nowledge and beli	ief this po	litical committe	e has not	; violated any	provision:	s of the A	ct of June	3, 1937 ()	Ţ
	day of		20				Signatu	Signature of Person Submitti	on Subn	utting Report	ort	
Mr. Commission		Signature						Prin	Printed Name	8		
ray Commonica Capa co	1	MO.	DAY YE	YEAR		اج	Area Code	1	Daytir	Daytime Telephone Number	one Numb	ě

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

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identification 8	8100237	Report Filed By:	Q.	CANDIDATE	-	COMMITTEE	<b>≻</b> .∾	LOBBY	TSIY	ώ
of Filing Committee, Candidate or Lobbyist: sylvania Apartment Association	lidate or L	obbyist: :iation								
<sup>Address:</sup> Bala Plaza Suite 515	15									
Cynwyd			State: PA			Zip Code: 19004				
6th Tuesday OF Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes		No	X
RT 6th Tuesday Pre-Election	4. X	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes		No	X
Annual Report	7.	YEAR	2020							
of Office Sought by Candidate:	date:		MO.	DAY YEAR		District Office Number: Code:		Party Code:	County Code:	Y
nary of Receipts	MO.	DAY YEAR	비	MO.	H	YEAR F	OR OF	FOR OFFICE US	ᄍᆘ	<u> </u>
xpenditures from:	6	23 2020	10	9 14		2020				
ount Brought Forward From Last Report	om Last Re	port			¤226,402.05	02.05				
al Monetary Contributions and Receipts (From Schedule I)	s and Rece	ipts (From Schedu and B)	le I)		¤31,079.63	79.63 81.68			<b>3</b> (30)	*
al Expenditures (From Schedule III)	hedule III)				¤18,5	¤18,509.00				
ling Cash Balance (Subtract Line D from Line C)	act Line D	from Line C)			¤238,972.68	72.68			6	
ue of In-Kind Contributions Received (From Schedule II)	ns Receive	d (From Schedule	(I)			¤0.00			$b_{i,\ell}$	
paid Debts and Obligations (From Schedule IV)	ns (From S	chedule IV)				¤0.00			ઃડ	
- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.	report, tre	asurer sign here. I	AFF f this is a	AFFIDÁVIT SECTION is a <b>Candidate</b> report	" candida	e sign here.				N. C.
r (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and t and complete. to and subscribed before me this	ort, includi me this	ng the attached sc	hedules, c	n paper or compu	ter disket	te, are to the best	of my kn	owledge an	d belief true,	ue,
day of		20		1		Signature of Person Submitting Report	rson Subi	nitting Rep	ort	
	Signature			ì		Pri	Printed Name	ă		
ommission expres	MO.	DAY YEAR	\$		Area Code	Code	Dayt	Daytime Telephone Number	one Numb	er
AFFIDAVIT SECTION II - If this is a report of a <b>Candidate's Authorized Committee</b> , candidate shall sign here.	Candidate	)'s Authorized Co	mmittee,	APFIDAVIT SECTION tee, candidate shall si	gn here.					
r (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, No 320) as amended. to and subscribed before me this	est of my k me this	nowledge and beli	ef this pol	itical committee h	as not vio	lated any provisio	ns of the	Act of June	3, 1937 (P.L	ř
day of		20		1		Signature of Person Submitting Report	rson Sub	mitting Rep	er	
Sig	Signature			1		Ph	Printed Name	1е		
ommission expires	MO.	DAY YEAR	4R		Area Code	Code	Dayt	Daytime Telephone Number	one Numb	er