

Campaign Finance Statement

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

Filer Identification Number: 7900387		Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	LOBBYIST	3.			
Name of Filing Committee, Candidate or Lobbyist: PA UAW Good Government Committee											
Street Address: 1930 Marlton Pike East Suite W-109											
City: Cherty Hill		State: NJ		Zip Code: 08003							
TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes	No	X	
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes	No	X	
	Other	7.	YEAR	2020							
Name of Office Sought by Candidate:			DATE OF ELECTION			District Number:			Office Code:	Party Code:	County Code:
MO. DAY YEAR			MO. DAY YEAR			MO. DAY YEAR					
Period 6 23 2020			To 9 14 2020								
Cash Balance at End of Reporting Period:			24,486.57								
Total Amount of Filer's Outstanding Debts or Liabilities at End of Reporting Period:			0.00								
PART I - AFFIDAVIT SECTION											
If statement is filed on behalf of a Political Committee or Candidate's Committee, the Treasurer must sign here. If statement is filed on behalf of a Candidate, the Candidate must sign here. If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.											
I swear (or affirm) that the aggregate receipts or disbursements or liabilities incurred during the reporting period indicated above did not exceed two hundred and fifty dollars (\$250.00) and this report is, to the best of my knowledge and belief, true, correct and complete. Sworn to and subscribed before me this											
16th day of September 2020 Notary Public, State of New Jersey My Commission Expires August 19, 2025 Signature of Person Submitting Report Printed Name Area Code Daytime Telephone Number											
PART II - AFFIDAVIT SECTION											
If statement is filed on behalf of Candidate's Authorized Committee, the Candidate must 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 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