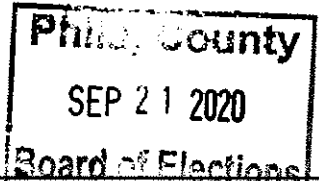


Campaign Finance Statement

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:	2006371	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	LOBBYIST	3.
Name of Filing Committee, Candidate or Lobbyist: Zarwin Baum Good Government PAC								
Street Address: 1818 Market Street 13th Floor								
City: Philadelphia			State: PA		Zip Code: 19103			
TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6th Tuesday Pre-Election	4. X	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Other	Annual Report	7.	YEAR	2020				
Name of Office Sought by Candidate: Other			DATE OF ELECTION			District Number:	Office Code:	Party Code:
			MO.	DAY	YEAR		OTH	OTH
			11	3	2020			51
Dates of Reporting Period		MO.	DAY	YEAR	To	MO.	DAY	YEAR
		6	23	2020	To	9	14	2020
Cash Balance at End of Reporting Period:						306.26		
Total Amount of Filer's Outstanding Debts or Liabilities at End of Reporting Period:						0.00		
FOR OFFICE USE ONLY								
								

AFFIDAVIT SECTION**PART I**

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.

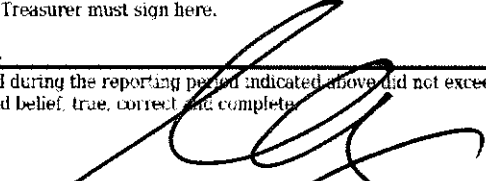
I swear (or affirm) that the aggregate receipts or disbursements or liabilities incurred during the reporting period indicated above did not exceed two hundred and fifty dollars (\$250.00) and this report is, to the best of my knowledge and belief, true, correct and complete.

Sworn to and subscribed before me this

17th day of September 20 20

 Signature

My Commission expires 3 24 2021
 MO. DAY YEAR


 Signature of Person Submitting Report
 MITCHELL S. KAPLAN
 Printed Name
 215 569-2800
 Area Code Daytime Telephone Number

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. No. 320) as amended.

Sworn to and subscribed before me this

day of 20
 Signature

My Commission expires MO. DAY YEAR

Signature of Person Submitting Report
 Printed Name
 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

City of Philadelphia, Phila. County
 My Commission Expires March 24, 2021