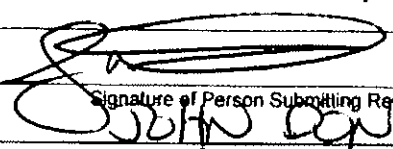
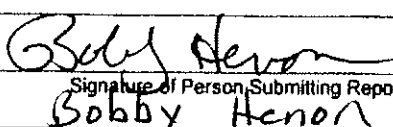


**Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: 1776316		Report Filed By:	Candidate <sup>1</sup> <input type="checkbox"/>	Committee <sup>2</sup> <input checked="" type="checkbox"/>	Lobbyist <sup>3</sup> <input type="checkbox"/>				
Name of Filing Committee, Candidate or Lobbyist: Bobby 11									
Street Address: PO Box 22602									
City: Philadelphia			State: PA	Zip Code: 19110					
TYPE OF REPORT	6th Tuesday Pre-Primary	1 <input type="checkbox"/>	2nd Friday Pre-Primary	2 <input type="checkbox"/>	30 Day Post Primary	3 <input checked="" type="checkbox"/>	Amendment Report?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	6th Tuesday Pre-Election	4 <input type="checkbox"/>	2nd Friday Pre-Election	5 <input type="checkbox"/>	30 Day Post Election	6 <input type="checkbox"/>	Termination Report?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Other	7 <input type="checkbox"/>	Annual Report		YEAR	2019				
Name of Office Sought by Candidate:		DATE OF ELECTION		District Number:	Office Code:	Party Code:	County Code:		
City Council Member, City of Philadelphia		11/05/2019		6	PH4	DEM	51		
Summary of Receipts and Expenditures		From Date		To Date		FOR OFFICE USE ONLY			
		05/07/2019		06/10/2019					
A. Amount Brought Forward From Last Report				\$89,359.15		JAN 31 AM 11:25 COMMONS			
B. Total Monetary Contributions and Receipts (From Schedule I)				\$59,275.00					
C. Total Funds Available (Sum of Lines A and B)				\$148,634.15					
D. Total Expenditures (From Schedule III)				\$69,147.44					
E. Ending Cash Balance (Subtract Line D from Line C)				\$79,486.71					
F. Value of In-Kind Contributions Received (From Schedule II)				\$750.00					
G. Unpaid Debts and Obligations (From Schedule IV)				\$2,500.00					
<b>Affidavit Section</b>									
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 by electronic medium, are to the best of my knowledge and belief true, correct, and complete.									
Sworn to and subscribed before me this _____ day of _____ 20____				 Signature of Person Submitting Report Printed Name: John Conover Area Code: 267 Daytime Telephone Number: 331-3775					
Signature _____									
My commission expires _____ MO. _____ DAY _____ YR.									
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. 1333, No. 320) as amended.									
Sworn to and subscribed before me this _____ day of _____ 20____				 Signature of Person Submitting Report Printed Name: Bobby Henon Area Code: 215 Daytime Telephone Number: 251-0585					
Signature _____									
My commission expires _____ MO. _____ DAY _____ YR.									



**Pennsylvania Department of State**

Bureau of Campaign Finance & Lobbying Disclosure  
500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)  
[www.dos.pa.gov/campaignfinance](http://www.dos.pa.gov/campaignfinance) • [ra-stcampaignfinance@pa.gov](mailto:ra-stcampaignfinance@pa.gov)


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

**Note:** Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports.** This form must be signed by hand where a signature is required.

Name of Filing Committee, Candidate, or Lobbyist				
Bobby 11				
Reporting Cycle Name				
<input type="checkbox"/> <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<input type="checkbox"/> <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	<input checked="" type="checkbox"/> <b>Cycle 3</b> 30 Day Post Primary	<input type="checkbox"/> <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election	<input type="checkbox"/> <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election
<input type="checkbox"/> <b>Cycle 6</b> 30 Day Post-Election	<input type="checkbox"/> <b>Cycle 7</b> Annual Report	<input type="checkbox"/> <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election	<input type="checkbox"/> <b>Cycle 9</b> 30 Day Post-Special Election	

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

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

  
\_\_\_\_\_  
Signature of Treasurer, Candidate, or Lobbyist  
  
John Donno / tre  
\_\_\_\_\_  
Printed Name

1/28/2022  
\_\_\_\_\_  
Date (MM/DD/YYYY)  
  
Phila PA USA  
\_\_\_\_\_  
Location (City/State/Country)



**Pennsylvania Department of State**

Bureau of Campaign Finance & Civic Engagement

500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

[www.dos.pa.gov/campaignfinance](http://www.dos.pa.gov/campaignfinance) • [ra-stcampaignfinance@pa.gov](mailto:ra-stcampaignfinance@pa.gov)

**Part II** - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.**

Bobby Heron  
Signature of Treasurer, Candidate, or Lobbyist

1/28/2022  
Date (MM/DD/YYYY)

Bobby Heron  
Printed Name

Phila / PA / USA  
Location (City/State/Country)

