CAMPAIGN FINANCE STATEMENT

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

FILER IDENTIFICATION	
NUMBER	REPORT FILED CANDIDATE L. COMMITTEE LOBBYIST: 3.
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST TOURS	Drexel
STREET ADDRESS 2713 MAGIO 219	ad
CITY	STATE PA ZIP CODE
TYPE OF REPORT NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO. PARTY DATE OF ELECTION
GTH TUESDAY 1.	
PRE-PRIMARY 2ND FRIDAY: PRE-PRIMARY DATES OF REPORTING PERIOD TO 30 DAY 3.	MO. DAY YEAR: 12 31 24
CASH BALANCE AT END OF REPORTING PERIOD:	\$ 10,09
PRE-ELECTION 2ND FRIDAY PRE-ELECTION 5. OUTSTANDING DEBTS OR LIABILITY AT THE END OF REPORTING PERIOD	ion: \$ =
30 DAY POST-ELECTION ANNUAL REPORT TERMINATION REPORT? YES REPORT?	NO STATE OF
	DAVIT SECTION
ART I - f statement is filed on behalf of a <u>Political Committee or Candidates's Committee</u> , the Treasurer must sign here. f statement is filed on behalf of a <u>Candidate</u> , the Candidate must sign here. statement is filed on behalf of a <u>Contributing Lobbyist</u> , the Lobbyist must sign here.	
I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR I EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO	LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT O THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.
SWORN TO AND SUBSCRIBED BEFORE ME THISDAY OF	Vacant / Will Amand SIGNATURE OF PERSON SUBMITTING REPORT
SIGNATURE	PRINTED NAME
MY COMMISSION EXPIRES MO. DAY YR.	AREA CODE DAYTIME TELEPHONE NUMBER
ART II - statement is filed on behalf of a <u>Candidate's Authorized Committee</u> , Candidate must sign here.	
I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF T JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.	POLITICAL COMMITTEE HAS NOT VIGILATED ANY PROVISIONS OF THE ACT OF
SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY OF JOHN CLOSE 20 25 JOHN CLOSE 20 25 JOHN COMMISSION EXPIRES A 20 25 JOHN COMMISSION EXPIRES A 20 25 JOHN COMMISSION EXPIRES A 20 27 JOHN COMMISSI	
DAY OF JANKLANY 20 25 FEB JO 20 20 S GRATURE OF CANDIDATE	
MY COMMISSION EVENERS $\sqrt{2}$ ~ 200	PRINTED NAME PRINT
MY COMMISSION EXPIRES / X X YR. SAME ACCODE DAYTIME TELEPHONE NUMBER Department of State Bureage of Commissions, Elections and Legislation	