

COMMONWEALTH OF PENNSYLVANIA
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.

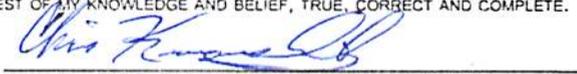
FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input type="checkbox"/>	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST CHRIS KUMANCHEK					
STREET ADDRESS 227 COLTARCT AVE SUITE 3					
CITY PITTSBURGH		STATE PA	ZIP CODE 15213		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY
1. 6TH TUESDAY PRE-PRIMARY <input checked="" type="checkbox"/> 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT		MEMBER PITTSBURGH CITY COUNCIL		3	DEM
		DATE OF ELECTION			
		MO. DAY YEAR		5 21 2019	
		FOR OFFICE USE ONLY			
		DATES OF REPORTING PERIOD			
		MO. DAY YEAR TO MO. DAY YEAR		3 2 19 TO 3 31 19	
		CASH BALANCE AT END OF REPORTING PERIOD:		\$ 0-	
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 0-	
		AMENDMENT REPORT?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
		TERMINATION REPORT?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates'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 31 DAY OF March 20 19  SIGNATURE	 SIGNATURE OF PERSON SUBMITTING REPORT CHRIS KUMANCHEK PRINTED NAME
MY COMMISSION EXPIRES 6 21 JOSEPH CAFARDI - Notary Public Allegheny County My Commission Expires Jun 6, 2021 Commission Number 1213312	412 AREA CODE 394-8875 DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, 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 31 DAY OF March 20 19  SIGNATURE	 SIGNATURE OF CANDIDATE CHRIS KUMANCHEK PRINTED NAME
MY COMMISSION EXPIRES 6 21 JOSEPH CAFARDI - Notary Public Allegheny County My Commission Expires Jun 6, 2021 Commission Number 131	412 AREA CODE 394-8875 DAYTIME TELEPHONE NUMBER