

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 Campaign of Compassion																								
STREET ADDRESS 2327 Finance St.																								
CITY Pittsburgh		STATE Pennsylvania		ZIP CODE 15208-1931																				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY																			
1. 6TH TUESDAY PRE-PRIMARY 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		City Council		9	Independent																			
		DATES OF REPORTING PERIOD		DATE OF ELECTION																				
		<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>09</td><td>03</td><td>2019</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>10</td><td>01</td><td>2019</td></tr> </table>		MO.	DAY	YEAR	09	03	2019	MO.	DAY	YEAR	10	01	2019	<table border="1"> <tr><th>NO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>11</td><td>05</td><td>2019</td></tr> </table>			NO.	DAY	YEAR	11	05	2019
MO.	DAY	YEAR																						
09	03	2019																						
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10	01	2019																						
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11	05	2019																						
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>710.00</u>		<div style="border: 1px solid blue; padding: 5px; text-align: center;"> <p>RECEIVED</p> <p>OCT 01 2019</p> <p>ETHICS HEARING BOARD</p> </div>																				
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0.00</u>																						
		<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> </tr> </table>		AMENDMENT REPORT?	YES	NO	TERMINATION REPORT?	YES	NO															
AMENDMENT REPORT?	YES	NO																						
TERMINATION REPORT?	YES	NO																						

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 <u>30</u> DAY OF <u>September</u> 20 <u>19</u> SIGNATURE MY COMMISSION EXPIRES <u>Dec 11 2019</u> MO. DAY YR.	 SIGNATURE OF PERSON SUBMITTING REPORT <u>Nicole M. Daniels</u> PRINTED NAME <u>734</u> <u>546-1916</u> AREA CODE DAYTIME TELEPHONE NUMBER
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COMMONWEALTH OF PENNSYLVANIA

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 5, 1937 (P.S. § 303) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS <u>30</u> DAY OF <u>September</u> 20 <u>19</u> SIGNATURE MY COMMISSION EXPIRES <u>Dec 11 2019</u> MO. DAY YR.	 SIGNATURE OF CANDIDATE <u>Barbara Daniels</u> PRINTED NAME <u>412</u> <u>241-2382</u> AREA CODE DAYTIME TELEPHONE NUMBER
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NOTARIAL SEAL
 MELISSA C LEWIS
 Notary Public
 CITY OF PITTSBURGH, ALLEGHENY COUNTY
 My Commission Expires Dec 11, 2019

Allegheny County Elections Division
 601 County Office Building \ Suite 601 \ 542 Forbes Avenue
 Pittsburgh, PA 15219-2953 \ Phone (412) 350-4520