

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	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Friends of Judith K Ginyard									
STREET ADDRESS 5139 Rosecrest Place 227 N. Homewood Avenue									
CITY Pittsburgh			STATE PA	ZIP CODE 15208					
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION				
	Pittsburgh City Council		9	D	MO.	DAY	YEAR		
	6TH TUESDAY PRE-PRIMARY	1.			05	21	2019		
	2ND FRIDAY PRE-PRIMARY	2.							
	30 DAY POST-PRIMARY	3.							
	6TH TUESDAY PRE-ELECTION	4.							
	2ND FRIDAY PRE-ELECTION	5.							
30 DAY POST-ELECTION	6.								
ANNUAL REPORT	7.								
DATES OF REPORTING PERIOD		MO.	DAY	YEAR	TO		MO.	DAY	YEAR
		04	01	2019			04	30	2019
CASH BALANCE AT END OF REPORTING PERIOD:				\$	2,268.52				
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:				\$	0.00				
AMENDMENT REPORT?		YES	NO						
TERMINATION REPORT?		YES	NO						
FOR OFFICE USE ONLY									
RECEIVED DEC 11 2019 ETHICS HEARING BOARD									

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
11th DAY OF December 2019

Signature of Judith K Ginyard
SIGNATURE OF PERSON SUBMITTING REPORT

JUDITH K. GINYARD
PRINTED NAME

292-6867
DAYTIME TELEPHONE NUMBER

MY COMMISSION EXPIRES 3-19-19
MO. DAY YR.

ALISHA L BRANSON - Notary Public
Allegheny County
My Commission Expires March 2022
Commission Number 1199279

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
____ DAY OF _____ 20____

SIGNATURE OF CANDIDATE

PRINTED NAME

SIGNATURE

MY COMMISSION EXPIRES MO. DAY YR.

AREA CODE

DAYTIME TELEPHONE NUMBER