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:	1776130	Report Filed On Behalf of	CANDIDATE	1. X	COMMITTEE	2.	LOBBYIST	3.

Name of Filing Committee, Candidate or Lobbyist: Angel Cruz

Street Address: 302 E Tioga St

City:	State:	Zip Code:
Philadelphia	PA	19134

TYPE OF REPORT (Check One)

6th Tuesday Pre-Primary	1. X
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.

Name of Office Sought by Candidate:	District No.	Party	DATE OF ELECTION MO.	DAY	YEAR
Representative in the General Assembly	180	DEM	0	0	0

Dates Of Reporting Period MO. DAY YEAR **To** MO. DAY YEAR

Cash Balance At End Of Reporting Period: $ -

Total Amount of Filer's Outstanding Debts or Liabilities At End Of Reporting Period: $ -

Amendment Report?	YES		NO	X
Termination Report?	YES		NO	X

FOR OFFICE USE ONLY

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

_____ day of _____ 20 _____ _____ Signature of Person Submitting Report

_____ Signature _____ Printed Name

My commision expires _____ MO. DAY YEAR _____ Area Code _____ Daytime Telephone Number

PART II -

If statement is filed on behalf of Candidate's Authorized Committee, the 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

_____ Signature _____ Printed Name

My commission expires _____ MO. DAY YEAR _____ Area Code _____ Daytime Telephone Number