

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 REELECT COUNCILMAN DAVID COHEN																								
STREET ADDRESS 5635 N. 16th ST.																								
CITY PARLA, PA.		STATE PA.		ZIP CODE 19141																				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY																			
6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/> 30 DAY POST-PRIMARY <input type="checkbox"/> 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 30 DAY POST-ELECTION <input type="checkbox"/> ANNUAL REPORT <input type="checkbox"/>																								
		DATES OF REPORTING PERIOD		DATE OF ELECTION																				
		<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>1</td><td>1</td><td>06</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>1</td><td>06</td></tr> </table>		MO.	DAY	YEAR	1	1	06	MO.	DAY	YEAR	5	1	06	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td></td><td></td><td></td></tr> </table>			MO.	DAY	YEAR			
MO.	DAY	YEAR																						
1	1	06																						
MO.	DAY	YEAR																						
5	1	06																						
MO.	DAY	YEAR																						
		CASH BALANCE AT END OF REPORTING PERIOD: \$ 13,127.44		FOR OFFICE USE ONLY CITY COMMISSIONER 06 MAY -4 PM 12:5 DOCUMENTS UNIT																				
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ —																						
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>																						
		TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>																						

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates' 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) IN THIS REPORT. S. TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 24th DAY OF May 2006

Mable C. Windham SIGNATURE
 MY COMMISSION EXPIRES Oct. 26, 2007
 MO. DAY YR.

John J. French SIGNATURE OF PERSON SUBMITTING REPORT
JOHN J. FRENCH PRINTED NAME
457-0717 DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 MABLE C. WINDHAM, Notary Public
 City of Philadelphia, Phila. County
 My Commission Expires October 28, 2007

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

MY COMMISSION EXPIRES _____ MO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE

 DAYTIME TELEPHONE NUMBER