CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* <u>did not exceed \$250.00</u> during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE I	COMMITTEE 2.	LOBBYIST 3.	
NAME OF FILING COMMITTEE, CA	NDIDATE OR LOBBY(67)	On Daily at 1	<u> </u>	1 188		
STREET ADDRESS	10.00 the	9				
91875	Doven Are	,				
MCK for	N	STATE	ZIP C	CASO.		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	1 1 - 1 - 1 - 1 - 1 - 1 - 1	OF ELECTION DAY YEAR	
6TH TUESDAY PRE-PRIMARY	MCBean Dorough (ouncel		FOR OFFIC	202 DE USE ONLY	<u> </u>
2nd Friday 2, PRE-PRIMARY	DATES OF REPORTING PERIOD MO. DAY YEAR	TO 11 22 21]	, J.		
30 day 3. Post-Primary	CASH BALANCE AT END					
6TH TUESDAY 4.	OF REPORTING PERIOD:	\$				
2ND FRIDAY PRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIAB AT THE END OF REPORTING PE		_	; ; ; , ,	America (A)	
30 DAY POST-ELECTION	AMENDMENT YES	NO	-			
ANNUAL REPORT	TERMINATION YES	No No				
	AF	FIDAVIT SECTION				
If statement is filed o	n behalf of a <u>Political Committee o</u> n behalf of a <u>Candidate</u> , the Candi n behalf of a <u>Contributing Lobbyist</u>	date must sign here.		asurër must s	sign here.	
I SWEAR (OR AFFIRM) THAT EXCEED TWO HUNDRED AND	THE AGGREGATE RECEIPTS OR DISBURSEMENTS (DISBURSEMENTS OF FIFTY DOLLARS (\$250.00) AND THIS REPORT IS	OR LIABILITIES INCURRED DURING	NG THE REPORTING I	PERIOD INDICATED	ABOVE DID NOT	\neg
	SCRIBED BEFORE ME THIS	Hon	200	and to		
DAY OF _	20		TURE OF PERSON S	SUBMITTING REPO	PRT	
MY COMMISSION EXP	SIGNATURE PIRESMO. DAY YR.	AREA CODE	PRINTED N	-1004	MBER	
PART II - If statement is filed or	n behalf of a <u>Candidate's Authorize</u>	<u>ed Committee,</u> Candid	date must sign	here.		
I SWEAR (OR AFFIRM) JUNE 3, 1937 (P.L.	THAT TO THE BEST OF MY KNOWLEDGE AND BELI 1333, No. 320) AS AMENDED.	EF THIS POLITICAL COMMITTEE	HAS NOT VIOLATED	ANY PROVISIONS O	F THE ACT OF	
SWORN TO AND SUB	SCRIBED BEFORE ME THIS	<u> </u>				
DAY OF	20		SIGNATURE OF C	JANDIDATE		
	SIGNATURE		PRINTED N	АМЕ		
i e e e e e e e e e e e e e e e e e e e						,



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement 210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4) www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). This particular form is to be used only for Campaign Finance Reports. This form must be signed by hand where a signature is required.

Name of Filing	Committee, Can	didate, or Lobby	ist		
Reporting Cycle	Name				
☐ Cycle 1 6 th Tuesday Pre-Primary	□ Cycle 2 2 nd Friday Pre-Primary	Cycle 3 30 Day Post Primary	☐ Cycle 4 6 th Tuesday Pre-Election		☐ Cycle 5 2 nd Friday Pre-Election
Cycle 6 30 Day Post-Election	☐ Cycle 7 Annual Report	☐ Cycle 8 2 nd Friday Pre-Special Election		☐ Cycle 9 30 Day Post-Special Election	

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist

Printed Name

Date (DD/MM/YYYY)

Location (City/State/Country)