

**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.

<b>Filer Identification Number:</b>	2008304	<b>Report Filed By:</b>	<b>CANDIDATE</b>	1.	<b>COMMITTEE</b>	2.	<b>LOBBYIST</b>	3.		
Name of Filing Committee, Candidate or Lobbyist: PA State Pipe Trades Association PAC										
Street Address: 2791 Southampton Road										
City: Philadelphia			State: PA		Zip Code: 19154					
<b>TYPE OF REPORT</b>	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes	No	X
	6th Tuesday Pre-Election	4. X	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes	No	X
Other	Annual Report	7.	YEAR	2020						
Name of Office Sought by Candidate: Other			<b>DATE OF ELECTION</b> MO. DAY YEAR 11 3 2020			District Number:	Office Code: OTH	Party Code: OTH	County Code: 51	
Dates of Reporting Period		MO. DAY YEAR	To		MO. DAY YEAR	<b>FOR OFFICE USE ONLY</b>				
		6 23 2020			9 14 2020	<div style="border: 2px solid black; padding: 5px; text-align: center;"> <b>Phila, County</b>  <b>SEP 23 2020</b>  <b>Elections</b> </div>				
Cash Balance at End of Reporting Period:		≈10,731.13								
Total Amount of Filer's Outstanding Debts or Liabilities at End of Reporting Period:		≈0.00								

**AFFIDAVIT SECTION****PART I -**

If statement is filed on behalf of a Political Committee or Candidate'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

My Commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YEAR

*Erin Dwyer*  
Signature of Person Submitting Report

*Erin Dwyer*  
Printed Name

*215*  
Area Code

*677-6900*  
Daytime Telephone Number

**AFFIDAVIT SECTION****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

My Commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YEAR

\_\_\_\_\_  
Signature of Person Submitting Report

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number



**Pennsylvania Department of State**

Bureau of Campaign Finance & Civic Engagement

210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

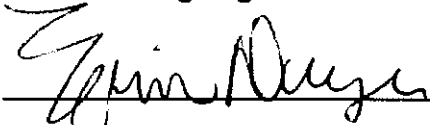
[www.dos.pa.gov/campaignfinance](http://www.dos.pa.gov/campaignfinance) • [ra-stcampaignfinance@pa.gov](mailto:ra-stcampaignfinance@pa.gov)

## Unsworn Statement in Lieu of Sworn Statement for Independent Expenditure 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), 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 Independent Expenditure Reports.** This form must be signed by hand where a signature is required.

Name of Person Filing Report				
Erin Dwyer				
Name of Organization (if applicable)				
PA State Pipe Trades Association				
Reporting Cycle Name				
<input type="checkbox"/> <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<input type="checkbox"/> <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	<input type="checkbox"/> <b>Cycle 3</b> 30 Day Post Primary	<input checked="" type="checkbox"/> <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election	<input type="checkbox"/> <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election
<input type="checkbox"/> <b>Cycle 6</b> 30 Day Post-Election	<input type="checkbox"/> <b>Cycle 7</b> Annual Report	<input type="checkbox"/> <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election	<input type="checkbox"/> <b>Cycle 9</b> 30 Day Post-Special Election	

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the foregoing is true and correct.**

  
\_\_\_\_\_  
Signature of Filer  
  
Erin Dwyer  
\_\_\_\_\_  
Printed Name

09/16/2020  
\_\_\_\_\_  
Date (DD/MM/YYYY)  
  
Philadelphia, PA, USA  
\_\_\_\_\_  
Location (City/State/Country)