

Campaign Finance Report

(Note: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number:	17761119	Report Filed By:	CANDIDATE ¹	COMMITTEE ²	LOBBYIST ³
Name of Filing Committee, Candidate or Lobbyist: Free The Ballot! Incarcerated Voter Family Network					
Street Address: 5107 Irving Street					
City: Philadelphia			State: PA		Zip Code: 19139
TYPE OF REPORT	6th Tuesday Pre-Primary ¹	2nd Friday Pre-Primary ²	30 Day Post Primary ³	Amendment Report?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6th Tuesday Pre-Election ⁴	2nd Friday Pre-Election ⁵	30 Day Post Election ⁶	Termination Report?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Other 202	Annual Report ⁷	YEAR	2021		

Name of Office Sought by Candidate:	DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:
	MO.	DAY	YEAR				
	5	18	2021				51

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
	A. Amount Brought Forward From Last Report	5	10	2021	5	12	2021
B. Total Monetary Contributions and Receipts (From Schedule I)							\$0.00
C. Total Funds Available (Sum of Lines A and B)							\$0.00
D. Total Expenditures (From Schedule III)							\$11,693.17
E. Ending Cash Balance (Subtract Line D from Line C)							(\$11,693.17)
F. Value of In-Kind Contributions Received (From Schedule II)							\$0.00
G. Unpaid Debts and Obligations (From Schedule IV)							\$0.00

FOR OFFICE USE ONLY

COUNTY BD. OF ELECTIONS
 MAY 15 P 1:53
 CITY COMMISSIONERS

AFFIDAVIT SECTION


PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are 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


 Signature of Person Submitting Report
 Sean Damon
 Printed Name
 215 _____ 900-2602
 Area Code Daytime Telephone Number

AFFIDAVIT SECTION

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall 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

Department of State Bureau of Commissions, Elections and Legislation
210 North Office Building Harrisburg, PA 17120-0029 (717)787-5280



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 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), 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 Independent Expenditure Reports. This form must be signed by hand where a signature is required.

Name of Person Filing Report				
Sean Damon				
Name of Organization (if applicable)				
Free The Ballot! Incarcerated Voter Family Network				
Reporting Cycle Name				
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 4 6 th Tuesday Pre-Election	<input checked="" type="checkbox"/> Cycle 202 Last Friday Pre Primary Report Pre-Election
<input type="checkbox"/> Cycle 6 30 Day Post-Election	<input type="checkbox"/> Cycle 7 Annual Report	<input type="checkbox"/> Cycle 8 2 nd Friday Pre-Special Election	<input type="checkbox"/> Cycle 9 30 Day Post-Special Election	

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

 Signature of Filer

Sean Damon

Printed Name

May 14, 2021

Date (DD/MM/YYYY)

Philadelphia/PA/USA

Location (City/State/Country)

