

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

Filer Identification Number: 2002405		Report Filed By: CANDIDATE		COMMITTEE		X LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: 3rd Democratic Executive Ward Committee							
Street Address: P.O. Box 9222							
City: Philadelphia				State: PA		Zip Code: 19139	
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	2ND FRIDAY PRE-PRIMARY	30 DAY POST PRIMARY	<input checked="" type="checkbox"/>	AMENDMENT REPORT?	YES	NO
	6TH TUESDAY PRE-ELECTION	2ND FRIDAY PRE-ELECTION	30 DAY POST ELECTION	<input type="checkbox"/>	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	YEAR	2021	FILING METHOD (CHECK ONE)	PAPER	DISKETTE	<input checked="" type="checkbox"/>
Name of Office Sought by Candidate:			DATE OF ELECTION	Dist. Num.	Office Code	Party Code	County Cd.
			05/18/2021	0		DEM	51
Summary of Receipts and Expenditures from: 01/01/2021 To 06/07/2021					FOR OFFICE USE ONLY		
A. Amount Brought Forward From Last Report				\$11,776.31			
B. Total Monetary Contributions and Receipts (From Sched. I)				\$11,400.00			
C. Total Funds Available (Sum of Lines A and B)				\$23,176.31			
D. Total Expenditures (From Schedule III)				\$8,657.51			
E. Ending Cash Balance (Subtract Line D from Line C)				\$14,518.80			
F. Value of In-Kind Contributions Received (From Schedule II)				\$0.00			
G. Unpaid Debts and Obligations (From Schedule IV)				\$0.00			

COUNTY BD. OF ELECTIONS
 2021 JUN 25 P 2:50
 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

X David M. Burke

Signature of Person Submitting Report

David M. Burke

Printed Name

215
Area Code

391-5131
Daytime Telephone Number

Daytime Telephone Number

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

Official Title

My Commission Expires

Signature of Candidate

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 • 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, Candidate, or Lobbyist				
3rd Democratic Executive Ward Committee				
Reporting Cycle Name				
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input checked="" type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 4 6 th Tuesday Pre-Election	<input type="checkbox"/> Cycle 5 2 nd Friday 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

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.

X *David M. Burke*
Signature of Treasurer, Candidate, or Lobbyist

06/22/2021
Date (DD/MM/YYYY)

David M. Burke
Printed Name

Phila., PA
Location (City/State/Country)

