

Commonwealth of Pennsylvania
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:	7900708	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	LOBBYIST	3.			
Name of Filing Committee, Candidate or Lobbyist: 54th Ward Democratic Executive Committee											
Street Address: 1118 Unruh Ave.											
City: Philadelphia			State: PA		Zip Code: 19149						
TYPE OF REPORT	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.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes	No	X	
Other	Annual Report	7.	YEAR	2021							
Name of Office Sought by Candidate: Other			DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:		
			MO.	DAY	YEAR	54	OTH	DEM	51		
			5	18	2021						
Summary of Receipts and Expenditures from:			MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
			1	1	2021	To	6	7	2021		
A. Amount Brought Forward From Last Report									\$2,449.17		
B. Total Monetary Contributions and Receipts (From Schedule I)									\$4,400.00		
C. Total Funds Available (Sum of Lines A and B)									\$6,849.17		
D. Total Expenditures (From Schedule III)									\$2,130.91		
E. Ending Cash Balance (Subtract Line D from Line C)									\$4,718.26		
F. Value of In-Kind Contributions Received (From Schedule II)									\$0.00		
G. Unpaid Debts and Obligations (From Schedule IV)									\$0.00		
AFFIDAVIT SECTION											
PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here. N											
I swear (or affirm) that this report, including the attached schedules, on paper 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 <u>June</u> 20 <u>21</u>			_____ day of _____ 20____			_____ day of _____ 20____			_____ day of _____ 20____		
Signature			Signature			Signature			Signature		
My Commission expires			My Commission expires			My Commission expires			My Commission expires		
MO. DAY YEAR			MO. DAY YEAR			MO. DAY YEAR			MO. DAY YEAR		
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____			_____ day of _____ 20____			_____ day of _____ 20____			_____ day of _____ 20____		
Signature			Signature			Signature			Signature		
My Commission expires			My Commission expires			My Commission expires			My Commission expires		
MO. DAY YEAR			MO. DAY YEAR			MO. DAY YEAR			MO. DAY YEAR		

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

