



Campaign Finance Report

351144

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

Filer Identification Number: 8200558		Report Filed By:	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: AFSCME PEOPLE PUBLIC EMP ORG TO PROMOTE LEG EQUALITY									
Street Address: 1625 L STREET,NW									
City: WASHINGTON			State: DC	Zip Code: 20036-0000					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRJMARY	3. X	AMENDMENT REPORT?	Yes	No
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No
	ANNUAL REPORT	7.	Year 2021	FILING METHOD () CHECK ONE		PAPER	<input checked="" type="checkbox"/>	DISKETTE	
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR			
				11	2	2021	(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY
		5	4	2021	TO	6	7	2021	COUNTY BO. OF ELECTIONS 2021 JUN 24 A 9:15 CITY COMMISSIONERS
A. Amount Brought Forward From Last Report				\$	0.00				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$	139,794.08				
C. Total Funds Available (Sum Of Lines A and B)				\$	139,794.08				
D. Total Expenditures (From Schedule III)				\$	139,794.08				
E. Ending Cash Balance (Subtract Line D From Line C)				\$	0.00				
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.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, 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 YR

Signature of Person Submitting Report 6/22/21

Elissa McBride
Printed Name
chui@afscme.org
Email (202) 429-1088
Area Code 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 _____
My Commission Expires _____
MO DAY YR

Signature of Candidate _____
Printed Name _____
Email _____
Area Code Daytime Telephone Number _____



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement
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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				
AFSCME PEOPLE (PUBLIC EMPLOYEES ORGANIZED TO PROMOTE LEGISLATIVE EQUALITY)				
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.

Signature of Treasurer, Candidate, or Lobbyist

Elissa McBride

Printed Name

22/06/2021

Date (DD/MM/YYYY)

Washington/DC/USA

Location (City/State/Country)

