


Campaign Finance Report

Note: This report must be filed on a regular basis for candidates and committees for public office.

Filer Identification Number: 9200347		Report Filed By: CANDIDATE	COMMITTEE	LOBBYIST																	
Name of Committee or Candidate: Buchanan Ingersoll & Rooney PC Committee for Effective State Government																					
Address: Union Trust Building 501 Grant Street Suite 200																					
City: Pittsburgh		State: PA	Zip Code: 15219																		
TYPE OF REPORT	1st Tuesday Pre-Primary	2nd Tuesday Pre-Primary	3rd Day Post-Primary	Amendment Report? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																	
	1st Tuesday Pre-Election	2nd Tuesday Pre-Election	3rd Day Post-Election	Termination Report? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																	
Other:	Annual Report	YEAR: 2021																			
Name of Office Sought by Candidate:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3">DATE OF ELECTION</th> <th rowspan="2">District Number:</th> <th rowspan="2">Office Code:</th> <th rowspan="2">Party Code:</th> <th rowspan="2">County Code:</th> </tr> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>5</td> <td>18</td> <td>2021</td> <td></td> <td></td> <td></td> <td>2</td> </tr> </table>			DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:	MO.	DAY	YEAR	5	18	2021				2
DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:															
MO.	DAY	YEAR																			
5	18	2021				2															
Summary of Receipts and Expenditures from:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> <th>To</th> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>5</td> <td>4</td> <td>2021</td> <td></td> <td>6</td> <td>7</td> <td>2021</td> </tr> </table>			MO.	DAY	YEAR	To	MO.	DAY	YEAR	5	4	2021		6	7	2021	<div style="border: 1px solid black; padding: 5px;"> <p>FOR OFFICE USE ONLY</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">2021 JUN 16 A 10:21</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">COUNTY DIV. OF ELECTIONS</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">CITY COMMISSIONERS</p> </div>		
MO.	DAY	YEAR	To	MO.	DAY	YEAR															
5	4	2021		6	7	2021															
A. Amount Brought Forward From Last Report		\$41,428.34																			
B. Total Monetary Contributions and Receipts (From Schedule D)		\$8,228.40																			
C. Total Funds Available (Sum of Lines A and B)		\$49,656.74																			
D. Total Expenditures (From Schedule III)		\$19,282.00																			
E. Ending Cash Balance (Subtract Line D from Line C)		\$30,374.74																			
F. Value of In-Kind Contributions Received (From Schedule III)		\$0.00																			
G. Unpaid Debts and Obligations (From Schedule VI)		\$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, 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		 Signature of Person Submitting Report Amy McVicker Printed Name																			
My Commission Expires		Area Code: 412 Daytime Telephone Number: 562-3998																			
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		Signature of Person Submitting Report																			
My Commission Expires		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) 783-5200



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				
Buchanan Ingersoll & Rooney PC Committee for Effective State Government				
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

Amy McVicker

Printed Name

16/06/2021

Date (DD/MM/YYYY)

Pittsburgh, Pennsylvania, USA

Location (City/State/Country)



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement
210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate 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

Date (DD/MM/YYYY)

Printed Name

Location (City/State/Country)