

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.)

<b>Filer Identification Number:</b>	8000610	<b>Report Filed By:</b>	CANDIDATE	1.	COMMITTEE	2.	LOBBYIST	3.		
Name of Filing Committee, Candidate or Lobbyist: Composition Roofers Union Local 30										
Street Address: 6447 TORRESDALE AVENUE										
City: PHILADELPHIA			State: PA		Zip Code: 19135					
<b>TYPE OF REPORT</b>	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:	DATE OF ELECTION			District Number:	Office Code:	Party Code:	County Code:
	MO.	DAY	YEAR				
	5	18	2021				

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
		5	4	2021		6	7		2021
A. Amount Brought Forward From Last Report								\$234,890.48	COUNTY BD. OF ELECTIONS 2021 JUN 1 10 41 AM CITY COMMISSIONERS
B. Total Monetary Contributions and Receipts (From Schedule I)								\$34,830.39	
C. Total Funds Available (Sum of Lines A and B)								\$269,720.87	
D. Total Expenditures (From Schedule III)								\$41,528.16	
E. Ending Cash Balance (Subtract Line D from Line C)								\$228,192.71	
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, 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  
 Shawn McElough  
 Printed Name

215 \_\_\_\_\_  
 Area Code

331-8770  
 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

