#### Commonwealth of Pennsylvania

## **Campaign Finance Statement**



File this in lieu of a full report only If aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

NAME OF FILING COMMITTEE	IUMBER: 8700	9690	REPORT FILED	ON BEHALF OF:	Committee
	E, CANDIDATE OR LOBE	BYIST	GENERAL BUILDI	NG CONTRACTORS	ASSN PAC (GBCA PAC)
STREET ADDRESS 36	S.18TH ST P.O.15959				
CITY PHILADELPHIA		STATE	PA	ZIP CODE 1	9103-0000
TYPE OF REPORT 30-0	Day Post-Primary				
NAME OF OFFICE SOUGHT	BY CANDIDATE				
DISTRICT CODE			PARTY (	CODE	
DATE OF ELECTION	11/2/2021				
DATES OF REPORTING PER	RIOD	5/4/2021	то	6/7/2021	For Office Use Only
AMENDMENT REPORT?	NO	TERN	INATION REPORT	7 NO	<b>202</b>
CASH BALANCE AT THE	END OF REPORTING	. 21	,629.56		_   0
PERIOD:					JUN 28
TOTAL AMOUNT OF FILE			0.00		28
REPORTING PERIOD:	TAT THE END OF				
statement is filed on behalf o	ж a Candidate, the Can	didate must su			ere.
SWEAR (OR AFFIRM) THAT THE A HOT EXCEED TWO HUNDRED AND	AGGREGATE RECEIPTS OR I	ist, the Lobbyis	S OR LIABILITIES INCL	RRED DURING THE REP MY KNOWLEDGE AND	ORTING PERIOD INDICATED AROVE DID
SWEAR (OR AFFIRM) THAT THE A	AGGREGATE RECEIPTS OR FIFTY DOLLARS (\$250.00)	IST, the Lobbyli DISBURSEMENTS AND THIS REPO	S OR LIABILITIES INCL	RRED DURING THE REF	ORTING PERIOD INDICATED AROVE OID
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AREA CODE

DAYTIME TELEPHONE NUMBER

#### Commonwealth of Pennsylvania

### **Campaign Finance Statement**



File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period

NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST  STREET ADDRESS  36 S.18TH ST P.O.15959  CITY PHILADELPHIA STATE PA ZIP CODE 19103-0000  TYPE OF REPORT 30-Day Post-Primary  NAME OF OFFICE SOUGHT BY CANDIDATE  DISTRICT CODE PARTY CODE  DATE OF REPORTING PERIOD 5/4/2021 TO 6/7/2021 For Office Use Only  AMENDMENT REPORT? NO TERMINATION REPORT? NO  CASH BALANCE AT THE END OF REPORTING 21,629.56  PERIOD:  TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:  AFFIDAVIT SECTION  AFFIDAVIT SECTION	FILER IDENTIFICATION NUMBER:	8700098	DEDOOT ET EN	N DENAIE OE	Committee
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PERIOD:  TOTAL AMOUNT OF FILER'S OUTSTANDING 0.00  DEBTS OR LIABILITIES AT THE END OF  REPORTING PERIOD:	AMENDMENT REPORT? NO	TERM	INATION REPORT?	NO	
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AFFIDAVIT SECTION					
		AFFIDA	VIT SECTION		

- If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE NOT EXCEED TWO HUNDRED AN	AGGREGATE REC D FIFTY DOLLARS	EIPTS OR DIS (\$250.00) A	SBURSEMENTS OR LLA NO THIS REPORT IS, 1	ABILITIES INCURRED DURING THE REF TO THE BEST OF MY KNOWLEDGE AND	PORTING PERIOD INDICATED ABOVE DID BELIEF, TRUE, CORRECT AND COMPLETE.			
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	SIGNATURE				PRINTED NAME			
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MY COMMISION EXPIRES	MO.	DAY	YR.	AREA CODE	DAYTIME TELEPHONE NUMBER			
If statement is filed on behalf I SWEAR (OR AFFIRM) THAT TO 3, 1937 (P.L. 1333, No. 320) AS SWORN TO AND SUBSCRIBED	THE BEST OF MY K AMENDED.	(NOWLEDGE )			ED ANY PROVISIONS OF THE ACT OF JUNE			
day of			20					
	******	· <u>-</u> -	<u></u>	SIGNATURE OF	F PERSON SUBMITTING REPORT			
	SIGNATURE				PRINTED NAME			
MY COMMISION EXPIRES	MQ.	DAY	YR.	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)

# Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Statements

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 Statements. This form must be signed by hand where a signature is required.

	<b></b>	GBCA PAC	ja e		
☐ Cycle 1 6 <sup>th</sup> Tuesday Pre-Primary	☐ Cycle 2  2 <sup>nd</sup> Friday Pre-Primary	© Cycle 3 30 Day Post Primary	6 <sup>th</sup> T	Cycle 4 Juesday Election	Cycle 5  2 <sup>nd</sup> Friday  Pre-Election
Cycle 6 30 Day Post-Election	Cycle 7 Annual Report	☐ Cycle 8  2 <sup>nd</sup> Friday Pre-Special Election		-	cle 9 ost-Special Election

**Part I** – If this form is submitted with a statement in lieu of full report by a political committee, the treasurer must sign here. If this form is submitted with a statement in lieu of a full report by a candidate, the candidate must sign here. If this form is submitted with a statement in lieu of full 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 Statement is true and correct.

Signature of Treasurer, Candidate, or Lobbyist
Lance Claiborne Jr.

06/17/2021

Date (DD/MM/YYYY)
Philadelphia/PA/US

**Printed Name** 

Location (City/State/Country)

DSEB-503S Updated 1/22/2020