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.*

Name of Filing Committee, Candidate, or Lobbyist

Reporting Cycle Name				
☐ **Cycle 1** 6th Tuesday Pre-Primary	☐ **Cycle 2** 2nd Friday Pre-Primary	☐ **Cycle 3** 30 Day Post Primary	☐ **Cycle 4** 6th Tuesday Pre-Election	☐ **Cycle 5** 2nd Friday Pre-Election
☐ **Cycle 6** 30 Day Post-Election	☐ **Cycle 7** Annual Report	☐ **Cycle 8** 2nd Friday Pre-Special Election	☐ **Cycle 9** 30 Day Post-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   Date (MM/DD/YYYY)

_____   _____

Printed Name   Location (City/State/Country)

Part II *- If this is submitted with a statement in lieu of full report by a Candidate's Authorized Committee, candidate 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 Candidate   Date (DD/MM/YYYY)

_____   _____

Printed Name   Location (City/State/Country)