

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.

FILER IDENTIFICATION NUMBER	REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>														
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST ROBERT DANIEL LAVELLE																		
STREET ADDRESS 4331 ANDOVER TERRACE																		
CITY PITTSBURGH	STATE PA	ZIP CODE 15213 -																
TYPE OF REPORT <i>(CHECK ONE)</i> ETHICS, 2nd	NAME OF OFFICE SOUGHT BY CANDIDATE CITY COUNCIL	DISTRICT NO. 6	PARTY D	DATE OF ELECTION														
				MO.	DAY	YEAR												
6TH TUESDAY PRE-PRIMARY				5	18	2021												
2ND FRIDAY PRE-PRIMARY																		
30 DAY POST-PRIMARY																		
6TH TUESDAY PRE-ELECTION																		
2ND FRIDAY PRE-ELECTION																		
30 DAY POST-ELECTION																		
ANNUAL REPORT																		
DATES OF REPORTING PERIOD		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>3</td><td>1</td><td>2021</td></tr> </table> TO <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>3</td><td>31</td><td>2021</td></tr> </table>		MO.	DAY	YEAR	3	1	2021	MO.	DAY	YEAR	3	31	2021	FOR OFFICE USE ONLY		
MO.	DAY	YEAR																
3	1	2021																
MO.	DAY	YEAR																
3	31	2021																
CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>																		
AMENDMENT REPORT?		YES	<input checked="" type="checkbox"/>															
TERMINATION REPORT?		YES	<input checked="" type="checkbox"/>															

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, 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.

R. Daniel Lavelle
 SIGNATURE OF PERSON SUBMITTING REPORT
ROBERT DANIEL LAVELLE
 PRINTED NAME
412 3525872
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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

 AREA CODE DAYTIME TELEPHONE NUMBER