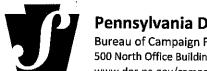
CAMPAIGN FINANCE STATEMENT

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

| FILER IDENTIFICATION | | | | |
|--|---|--|--|--|
| NUMBER | | REPORT FILED ON BEHALF OF | CANDIDATE | COMMITTEE 2. LOBBYIST 3. |
| | Movey | | | |
| STREET ADDRESS | rain Street | | | |
| North E | ast | STATE PA | | ZIP CODE — — — — — — — — — — — — — — — — — — — |
| TYPE OF REPORT (CHECK ONE) | NAME OF OFFICE SOUGHT BY CANDIDATE NOWTH East BOYOUGH COUNCILL W | DISTRICT NO. | PARTY | DATE OF ELECTION |
| 6TH TUESDAY 1. PRE-PRIMARY | WOMAN EAST DOING NEW TO | 11000 | Rep | 05 16 2003 |
| 2ND FRIDAY 2. PRE-PRIMARY 20 DAYS 3. | DATES OF REPORTING PERIOD TO | MO. DAY YEAR 05 05 23 | | |
| POST-PRIMARY | CASH BALANCE AT END | • 0 | | ER! |
| 6TH TUESDAY 4. | OF REPORTING PERIOD: TOTAL AMOUNT OF FILER'S | \$ | | E CC |
| 2ND FRIDAY PRE-ELECTION 6. | OUTSTANDING DEBTS OR LIABILITIE AT THE END OF REPORTING PERIOR | s: \$ | | ERIE COUNTY NAY 05 2023 VOTER REGISTRATION |
| 30 day Post-election | AMENDMENT YES | NO V | | VATIOI |
| ANNUAL REPORT | TERMINATION YES | NO . | | 2 |
| | | | | |
| | | AVIT SECTION | | |
| f statement is filed or f statement is filed or | | AVIT SECTION Indidates's Comm | | reasurer must sign here. |
| f statement is filed or | AFFID. a behalf of a Political Committee or Can behalf of a Candidate, the Candidate behalf of a Contributing Lobbyist, the | AVIT SECTION Indidates's Comm must sign here. Lobbyist must si | gn here. | 10.0000 |
| f statement is filed or f statement is filed or f statement is filed or I SWEAR (OR AFFIRM) THAT EXCEED TWO HUNDRED AND | AFFID. a behalf of a Political Committee or Can behalf of a Candidate, the Candidate behalf of a Contributing Lobbyist, the ITHE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIA FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE CORRED BEFORE ME THIS | AVIT SECTION Indidates's Comm must sign here. Lobbyist must si BILITIES INCURRED DURIN HE BEST OF MY KNOWLE SIGNAT | gn here. G THE REPORTINGE AND BELIEF OUTE OF PERSO | NG PERIOD INDICATED ABOVE DID NOT TRUE, CORRECT AND COMPLETE. WIGGE N SUBMITTING REPORT |
| f statement is filed or f statement is filed or f statement is filed or I SWEAR (OR AFFIRM) THAT EXCEED TWO HUNDRED AND SWORN TO AND SUBS | AFFID. In behalf of a Political Committee or Can behalf of a Candidate, the Candidate behalf of a Contributing Lobbyist, the ITHE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIA PIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE CRIBED BEFORE ME THIS | AVIT SECTION Indidates's Comm must sign here. Lobbyist must si BILITIES INCURRED DURIN HE BEST OF MY KNOWLE SIGNAT | gn here. G THE REPORTING GE AND BELIEF OF PERSON | NG PERIOD INDICATED ABOVE DID NOT , TRUE, CORRECT AND COMPLETE. |
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| f statement is filed or I SWEAR (OR AFFIRM) THAT EXCEED TWO HUNDRED AND SWORN TO AND SUBSECTION DAY OF MY COMMISSION EXPLANT II - | AFFID. In behalf of a Political Committee or Can behalf of a Candidate, the Candidate behalf of a Contributing Lobbyist, the support of the Aggregate receipts or disbursements or lia pietry dollars (\$250.00) and this report is, to the complete before me this complete before me this support is supported by the complete before me this support is supported by the complete before me this support is supported by the complete before me this support is supported by the complete before me this support is supported by the complete by the comple | AVIT SECTION Indidates's Comm must sign here. Lobbyist must si BILITIES INCURRED DURIN HE BEST OF MY KNOWLE SIGNAT ROOD AREA CODE | gn here. G THE REPORTING DGE AND BELIEF URE OF PERSO PRINTE DAY | NG PERIOD INDICATED ABOVE DID NOT TRUE, CORRECT AND COMPLETE. MYCLL N SUBMITTING REPORT NAME NAME 1374 TIME TELEPHONE NUMBER |
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| f statement is filed or statement is filed or I SWEAR (OR AFFIRM) THAT EXCEED TWO HUNDRED AND SWORN TO AND SUBSECTION DAY OF | AFFID. In behalf of a Political Committee or Candible behalf of a Candidate, the Candidate behalf of a Contributing Lobbyist, the ITHE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIA PIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE SERIES BEFORE ME THIS SIGNATURE RES MO. DAY YR. Dehalf of a Candidate's Authorized Contribution of the Best of My Knowledge and Belief This 1333, No. 320) As AMENDED. | AVIT SECTION Indidates's Commust sign here. Lobbyist must sign here. Sign at Sign | gn here. G THE REPORTING DOE AND BELIEF VICE OF PERSON PRINTE DAY ate must si | NG PERIOD INDICATED ABOVE DID NOT TRUE, CORRECT AND COMPLETE. YOUNG N SUBMITTING REPORT ONAME |
| f statement is filed or statement is filed or I SWEAR (OR AFFIRM) THAT EXCEED TWO HUNDRED AND SWORN TO AND SUBSTANT I - STATEMENT IS FILED ON I SWEAR (OR AFFIRM) JUNE 3, 1937 (P.L. SWORN TO AND SUBSTANT I - SWORN TO AND | AFFID. In behalf of a Political Committee or Candidate, the Candidate, the Candidate a behalf of a Contributing Lobbyist, the contribution Lobbyist, the co | AVIT SECTION Indidates's Commust sign here. Lobbyist must sign here. Sign at Sign | gn here. G THE REPORTING DOE AND BELIEF VICE OF PERSON PRINTE DAY ate must si | NG PERIOD INDICATED ABOVE DID NOT TRUE, CORRECT AND COMPLETE. YOUNGED N SUBMITTING REPORT N NAME N |



Pennsylvania Department of State

Bureau of Campaign Finance & Lobbying Disclosure
500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

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 | | | | | | | | |
|--|--|---|-------------------|--------------------------------|---|--|--|--|
| Bobbi Jo Y | Morey | | | | | | | |
| Reporting Cycle Name | | | | | | | | |
| ☐ Cycle 1 6 th Tuesday Pre-Primary | Cycle 2 2 nd Friday Pre-Primary | ☐ Cycle 3 30 Day Post Primary | 6 th T | Cycle 4 Juesday Election | ☐ Cycle 5 2 nd Friday Pre-Election | | | |
| ☐ Cycle 6 30 Day Post-Election | ☐ Cycle 7 Annual Report | ☐ Cycle 8 2 nd 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

ji Jo Morey

Printed Name

Date (MM/DD/YYYY)

Location (City/State/Country)

ion (City/State/Country)

DSEB-503S Updated 1/5/2022



Pennsylvania Department of State

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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)