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. U	оввуют 3.	
NAME OF FILING COMMITTEE, CAND	the same of the sa			<u> </u>			
STREET ADDRESS	John S. Blose						
4590	1 Flakern Not	. L					
CITY	- The H	STATE A	7	UP CODE			
Cric		PA		16511			
TYPE OF REPORT (CHECK ONE)	ME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	The second secon	E OF EU	ALCOHOLD STATE OF THE PARTY OF	
6TH TUESDAY 1.	Township Auditor	28001	Rep	Mo.	DAY 18	YEAR .	
PRE-PRIMARY			1 * 1 62.78	1	FFICE USE	1 92 (326 6	
2ND FRIDAY 2. PRE-PRIMARY 3.	DATES OF REPORTING I I A TO	5 3 AI					
30 DAY POST PRIMARY			<u> </u>		via mag	\cong	
6TH TUESDAY 4.	CASH BALANCE AT END OF REPORTING PERIOD:	\$					
2ND FRIDAY PRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIE AT THE END OF REPORTING PERIOD				RES		
30 day Post-Election	AMENDMENT YES REPORT?	NO b	<u>.</u>			==	
ANNUAL 7. REPORT	TERMINATION YES	NO C				4: 59	
	AFEIDY	Vir Seenon			Attack Co		
PARTI-							
i statement is filed on t	pehalf of a <u>Political Committee or Car</u> pehalf of a <u>Candidate,</u> the Candidate pehalf of a <u>Contributing Lobbyist,</u> the	must sian hara		easurer mus	t sign h	eré.	
I SWEAR (OR AFFIRM) THAT THE	E AGGREGATE RECEIPTS OR DISRURSEMENTS OR LIAN	ILITIES MICHEDED OLIDIA	C THE REPORTIN	IG PERIOD INDICAT	ED ABOVE	DID NOT	
	FTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE	IE BEST OF MY KNOWLE	GE AND BELIEF,	TRUE, CORRECT	AND COMPL	ETE.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY OF 20 SIGNATURE OF PERSON SUBMITTING REPORT							
<u></u> 57(0)	20		Jahr	No. of the last of)SC		
	SIGNATURE	3400 may 1 g	PRINTED	NAME	pro Gian		
MY COMMISSION EXPIRE	MO, DAY YR.	AREA CODE	DAYT	ME TELEPHONE) 7 NUMBER		
ART II - statement is filed on b	ehalf of a <u>Candidate's Authorized Co</u>	<u>mmittee</u> , Candid	ate must siç	gn here.			
I SWEAR (OR AFFIRM) THE JUNE 3, 1937 (P.L. 13	AT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS 33 , No. 320) as amended.	POLITICAL COMMITTEE H	IAS NOT VIOLATE	D ANY PROVISIONS	OF THE A	CT OF	
SWORN TO AND SUBSCE	RIBED BEFORE ME THIS						
DAY OF		SIGNATURE OF CANDIDATE					
			PRINTED	NAME			
<u> </u>	SIGNATURE		,				
MY COMMISSION EXPIRE	SMO. DAY YR.	AREA CODE	DAYTI	ME TELEPHONE I	NUMBER		

Department of State Bureau of Commissions, Elections and Legislation 210 North Office Building Harrisburg, PA 17120-0029 (717) 787-5280



Pennsylvania Department of State

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

Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per the temporary waiver granted by the Governor on April 6, 2020, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements In lieu of full reports (form DSEB-503), and Independent Expenditure Reports (form DSEB-505) need not be notarized. (See <u>Temporary Waiver of Notarization Requirement for Campaign Finance Reports and Statements</u>). 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 Reports and only so long as the waiver referenced above is in effect. This form must be signed by hand or by typing your name where a signature is required. If you type your name, you understand that's your electronic signature and will constitute the legal equivalent of your signature on this form.

	भागमध्य (दर्शा हो। हिस्सेट १०) त	LOTOVIEL	
Repositing Gyde Nam	(C)		
☐ Cycle 1	☐ Cycle 2	☐ Cycle 3	☐ Cycle 9
6 th Tuesday Pre-Primary	2 nd Friday Pre-Primary	30 Day Post Primary	30-Day Post Special Election
Part I - If this form is sub this form is submitted wi is submitted with a repo- By signing or typing my pursuant to 18 Pa.C.S. Campaign Finance Repo complete.	th a Candidate report, to the control of the contributing lober to the contributing lober to the control of the	the candidate must byist, the lobbyist n y declare under t mation contained	sign here. If this report nust sign here. he penalty of perjury, in the accompanying
MOR.			5-4-2021
Signature of Treasu	yist	Date	
John S	Blose	·	
Pri	nted Name		



Pennsylvania Department of State

Printed Name

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Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

By signing or typing my name below, I hereby declare under the penalty of perjury, pursuant to 18 Pa.C.S. § 4904, that the information contained in the accompanying Campaign Finance Report is to the best of my knowledge and belief true, correct and complete.