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		REPORT FILED	INDIDATE L COMMITTEE 2	LOBBÝIST 1.			
NUMBER NAME OF FILING COMMITTEE, CANDIDATE OF	LOBBYIST	ON BEHALF OF					
FRIENDS OF	MIKE KOBYUKA						
STREET ADDRESS 512 0 CHERAY	ST						
CITY		STATE	ZIP CODE				
ELIE		PA	16509 -	ELECTION			
(CHECK ONE)	office sought by candidate Creek School Board		PP MO. D	Constitution of Secretary Secretary			
6TH-TUESDAY:	THE SCHOOL OF THE		FOR OFFICE	USE ONLY			
2nd FRIDAY	AYES OF FORTING I I ZI	5 3 Z1 S S					
EOST-FRIMARY OTH TUESDAY FRE-ECECTION	CASH BALANCE AT END OF REPORTING PERIOD: OTAL AMOUNT OF FILER'S	\$ 2515		8 -			
1 A 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	DUTSTANDING DEBTS OR LIABILITIE AT THE END OF REPORTING PERIOR	:\$ <u> </u>		PH 1: 13			
30 DAY/ POST-ELECTION 7.	AMENDMENT YES	NO X		<u>, , , , , , , , , , , , , , , , , , , </u>			
ANNUAL REPORT	TERMINATION YES	NÓ X					
If chatement is filed on beha	affic of a <u>Political Committee or Ca</u> of of a <u>Candidate</u> , the Candidate of a <u>Contributing Lobbyist</u> , the	must sign nere.		ign here.			
I SWEAR (OR AFFIRM) THAT THE AGG	REGATE RECEIPTS OR DISBURSEMENTS OF LIV OLLARS (\$250.00) AND THIS REPORT IS, TO	BILITIES INCURRED DURING THE BEST OF MY KNOWLED	THE REPORTING PERIOD INDICATED SE AND BELIEF, TRUE, CORRECT AND	ABOVE DID NOT COMPLETE.			
SWORN TO AND SUBSCRIBE		BIGNATU	BIGNATURE OF PERSON SUBMITTING REPORT				
		BRO	PRINTED NAME	:A			
s	IGNATURE:	aru	460-1904	,			
MY COMMISSION EXPIRES	MO, DAY YR.	AREA CODE	DAYTIME TELEPHONE NU				
•	alf of a <u>Candidate's Authorized C</u>			ETHE ACT OF			
1 SWEAR (OR AFFIRM) THAT TO JUNE 8, 1937 (P.L. 1333,	THE BEST OF MY KNOWLEDGE AND BELIEF TH No. 320) AS AMENDED.	iis political committee h	AS NOT VIOLATED ANY PROVISIONS Q	्राक्टला ज			
SWORN TO AND SUBSCRIBE	D BEFORE ME THIS	 	SIGNATURE OF CANDIDATE				
		y	MIKE COBILLA				
	SIGNATÜRE	0-111	PRINTED NAME.	+C			
MY COMMISSION EXPIRES_	MO. DAY YR.	AREA CODE	DAYTIME TELEPHONE NL	MBER			



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 Declaration in Lieu of Sworn Statement for **Campaign Finance Reports**

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

		didate, or Lobbyi	st .		
Reporting Cycle Cycle 1 6th Tuesday Pre-Primary	EName Cycle 2 2 nd Friday Pre-Primary	☐ Cycle 3 30 Day Post Prlmary	6 th Tu	Cycle 4 lesday lection	☐ 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		☐ Cycle 9 30 Day Post-Special Election	

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a 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 Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist

06-05-20Z(

MAYG, 2021

Date (DD/MM/YYYY)

BRENPA KOBYLKA

ERIE, PA, USA Location (City/State/Country)

Updated 1/22/2021

Printed Name

DSE8-502R



Pennsylvania Department of State

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ERIE COUNTY

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

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist

Date (DD/MM/YYYY) 06-05-2021

MAY 6,2021

MIKE KO BYLICA ERIE PA, USA

Printed Name

Location (City/State/Country)