## COMMONWEALTH OF PENNSYLVANIA

## 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.
NAME OF FILING COMMITTEE,	GANDIDATE OR LOSSYIST  AREAD EV			
TOPO W	LAKE Rd		<del></del>	
CITY	111	STATE /) A	ZiP (	
FAIRVIEU	NAME OF OFFICE SOUGHT BY CANDIDATE	PA	<del></del>	16415 -1534
TYPE OF REPORT (CHECK ONE)	MARIE OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	MO. DAY YEAR
STH TUESDAY PRE-PRIMARY	FATRUTEW TOWNSHIP SUPERUS	ESOR	REPUBLICA	
2ND PRIDAY 2. PRE-PRIMARY	DATES OP REPORTING S 4 2021 TO	6 7 2021		3 20
30 day Post-Primary	CASH BALANCE AT END		<u> </u>	
67H:TUESDAY PRE-ELECTION	OF REPORTING PERIOD:  TOTAL AMOUNT OF FILER'S	\$		171
2ND FRIDAY PRE-ELECTION	OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD	\$ <u>110.00</u>	<u> </u>	ASTATA
30 DAY POST-ELECTION	AMENDMENT YES	NO 🗸		<u>2</u> 0
ANNUAL REPORT	TERMINATION YES	NO J		
	AFIDA	VIT SECTION		the same of the sa
f statement is filed	on behalf of a <u>Political Committee <i>or</i> Can</u> on behalf of a <u>Candidate</u> , the Candidate on on behalf of a <u>Contributing Lobbylst</u> , the	must sign here. Lobbyist must si	gn here.	
i swear (or affirm) tha exceed two hundred ai	Y THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIAB NO PIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO TH	LITIES INCURRED DURIN E BEST OF MY KNOWLE	G THE REPORTING I	PERIOD INDICATED ABOVE DID NOT
	BSCRIBED BEFORE ME THIS	Marrid	2 H	0 a sa. Lum
DAY OF	20	DAVED	URE OF PERSON S	HORV
MA COMMISSION E	SIGNATURE  (PIRES MO. DAY YR.	814	PRINTED N 460 -	1788
PART II -	110.	AREA CODE	DAYTIM	E TELEPHONE NUMBER
	on behalf of a <u>Candidate's Authorized Co</u>	<u>mmittee,</u> Candid	ate must sign	here.
i swear (or affirm June 3, 1937 (P.L	) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS 1333, NO. 320) AS AMENDED.	POLITICAL COMMITTEE I	AS NOT VIOLATED /	ANY PROVISIONS OF THE ACT OF
SWORN TO AND SU	BSCRIBED BEFORE ME THIS			
DAY OF	20		SIGNATURE OF C	ANDIDATE
	BIGNATURE		PRINTED NA	AME
MY COMMISSION EX	PIRES MO. DAY YR.	AREA CODE	DAYTIME	TELEPHONE NUMBER

		e u



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 in Ileu 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.

Name of Filing ( Reporting Cycle		ididate, or Lobby		e proposition of the Anthonormal sec	
Cycle 1 6 <sup>th</sup> Tuesday Pre-Primary	□ Cycle 2  2 <sup>nd</sup> Friday  Pre-Primary	Cycle 3 30 Day Post Primary	☐ Cycle 4 6 <sup>th</sup> Tuesday Pre-Election		☐ Cycle 5 2 <sup>nd</sup> Friday Pre-Election
☐ Cycle 6 30 Day Post-Election	☐ Cycle 7 Annual Report	☐ Cycle 8  2 <sup>nd</sup> 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

Date (DD/MM/YYYY)

Printed Name

Location (City/State/Country)

		·			
					ay Den
	•				
			•		
:					
:					·