

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	833710783	Report Filed By (Mark X)	☐	Candidate	☐	Committee	☒	Lobbyist	☐
Name of Filing Committee, Candidate or Lobbyist	The Committee to Elect Kim Clear								
Street Address	4855 Asbury Rd								
City	Erie	State	PA	Zip Code	16506				

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
☐	☐	☐	☐	☒	☐	☐	☐	☐
Date Of Election (MM/DD/YYYY)	11-2-21	Year	2	2021	Amendment Report	☐	Termination Report	☐

Summary of Receipts and Expenditures	From Date	To Date
	6/18/21	10/18/21
A. Amount Brought Forward From Last Report	\$	6583.66
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	15,030
C. Total Funds Available (Sum of Lines A and B)	\$	21,613.66
D. Total Expenditures (From Schedule III)	\$	8580.04
E. Ending Cash Balance (Subtract Line D from Line C)	\$	13001.62
F. Value of In-Kind Contributions Received (From Schedule II)	\$	2250.00
G. Unpaid Debts and Obligations (From Schedule IV)	\$	

For Office Use Only

ERIE COUNTY
OCT 22 2021
VOTER REGISTRATION

Affidavit Section

Part I- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

18 day of October 20 21

Signature

My Commission expires
MO. DAY YR.



Signature of Person Submitting report

ALLAN R. THAYER

Printed Name

814

Area Code

882-4952

Daytime Telephone Number

Part II- If this is a report of a Candidate's Authorized Committee, candidate shall sign here.

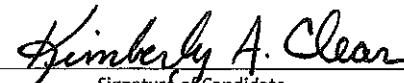
I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this

18 day of October 20 21

Signature

My Commission expires
MO. DAY YR.



Signature of Candidate

Kimberly A. Clear

Printed Name

814

Area Code

881-9270

Daytime Telephone Number

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	83-3710783		
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period		(1)	\$ 550.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	700.00
All Other Contributions (Part B)		\$	3480.00
Total for the reporting period		(2)	\$ 4180.00
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	3500.00
All Other Contributions (Part D)		\$	6800.00
Total for the reporting period		(3)	\$ 10,300.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period		(4)	\$
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$	15,030.00

PART A

See Attached

Contributions Received From Political Committees

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from Political Committees
with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification Number		83-3710783						Amount	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$		

Committee to Elect Kim Clear		Filer ID #: 83-3710783					
Millcreek Township Supervisor							
SCHEDULE I Part A - Contributions and Receipts Political Committies \$50-250							
Full Name	Address	Street	City	State	Zip	date	Amount
LPAC ERIE Attn Tim Sennett	120	W. 10th St.	Erie	Pa	16501	9/2/21	250
Committee To elect Ryan Bizzaro	5005	Forest Crossing	Erie	Pa	16506	9/6/21	250
Friends of Pat Harkins	2665	Schley St.	Erie	Pa	16508	9/2/21	100
Committee to Elect Jack Lee	8620	Honeysuckle Dr	Erie	PA	16509	9/17/21	100
							700

PART B
All Other Contributions
\$50.01 TO \$250

See Attached

Use this Part to itemize all other contributions with an aggregate value from
\$50.01 TO \$250 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	83-3710783
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Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$	
City	State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$	
City	State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$	
City	State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$	
City	State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$	
City	State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$	
City	State		Zip Code	Date [MM/DD/YYYY]	\$	

PART C - *See attached*
Contributions Received From Political Committees
Over \$250.00

Use this Part to itemize only contributions received from Political Committees
with an aggregate value over \$250.00 in the reporting period.

Filer Identification Number:	83-3710783
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Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
				Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
				Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
				Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
				Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
				Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
				Date [MM/DD/YYYY]	\$	

<u>Committee to Elect Kim Clear</u>		Filer ID #: 83-3710783				
<u>Millcreek Township Supervisor</u>						
<u>SCHEDULE I Part C - Contributions and Receipts over \$250</u>						
Full Name	Address	Street	City	State	Zip	date
Friends of Julie Slomski	5510	Mill St,	Erie	Pa	16509	8/8/21
Steamfitters Local Union449	1517	Woodruff St.	Pittsburgh	Pa	15220	9/7/21
AFSCME Council 13	4031	Ex. Park Dr.	Harrisburg	Pa	17111	8/30/21
Erie Insurance Political Action	100	Erie Ins. Pl.	Erie	Pa	16530	9/2/21
Committee to Elect Kathy Dahlker	108	Myrtle St	Erie	PA	16507	9/16/21
						3500

PART D
All Other Contributions

See Attached

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C)

Filer Identification Number:	83-3710783
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Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #					Street Address	Date [MM/DD/YYYY]	\$
City	State			Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #					Street Address	Date [MM/DD/YYYY]	\$
City	State			Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #					Street Address	Date [MM/DD/YYYY]	\$
City	State			Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #					Street Address	Date [MM/DD/YYYY]	\$
City	State			Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #					Street Address	Date [MM/DD/YYYY]	\$
City	State			Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							

Journal of Management Studies, 40(6), 798-814.

Figure 1

[illegible]

PART E
Other Receipts

NONE

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Number:	83-3710783
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Full Name							
House #		Street Address					
City		State	Zip Code	Date [MM/DD/YYYY]		\$	
Receipt Description							
Full Name							
House #		Street Address					
City		State	Zip Code	Date [MM/DD/YYYY]		\$	
Receipt Description							
Full Name							
House #		Street Address					
City		State	Zip Code	Date [MM/DD/YYYY]		\$	
Receipt Description							
Full Name							
House #		Street Address					
City		State	Zip Code	Date [MM/DD/YYYY]		\$	
Receipt Description							
Full Name							
House #		Street Address					
City		State	Zip Code	Date [MM/DD/YYYY]		\$	
Receipt Description							
Full Name							
House #		Street Address					
City		State	Zip Code	Date [MM/DD/YYYY]		\$	
Receipt Description							

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD
DETAILED SUMMARY PAGE**

Filer Identification Number:	83-3710783
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the reporting period	(1)	\$ 0

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the reporting period	(2)	\$ 0

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the reporting period	(3)	\$ 2250.00

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)		\$ 2250.00
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SCHEDULE II
Part G
In-Kind Contributions Received
VALUE OVER \$250

Filer Identification Number:	83-3710783
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Full Name of Contributor				Millerceek Police Association		Date [MM/DD/YYYY]	\$	2250
House #	Street Address		Caughey Rd		Date [MM/DD/YYYY]	\$		
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$	
Employer Name				Millerceek Police Association		Occupation	Millerceek Police officers	
Employer Mailing Address / Principal Place of Business				Caughey Rd Erie PA 16506		Description of Contribution	Bill board by LAMAR	
Full Name of Contributor						Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name						Occupation		
Employer Mailing Address / Principal Place of Business						Description of Contribution		
Full Name of Contributor						Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name						Occupation		
Employer Mailing Address / Principal Place of Business						Description of Contribution		
Full Name of Contributor						Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name						Occupation		
Employer Mailing Address / Principal Place of Business						Description of Contribution		

SCHEDULE III
Statement of Expenditures

See Attached

Filer Identification Number:	83-3710783
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To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address	Description of Expenditure			
City		State		Zip Code	

Millcreek Township Supervisor - Expenses/Payments									
Filer ID #: 83-3710783									
SCHEDULE III Statement of Expenditures									
To Whom Paid	House #	Street	City	State	Zip	date	Amount	Expenditure	
Constant Contact	1601	Tripple Rd Suite 329	Waltham	MA	02451	6/25/21	47.7	Email/Website support	
Gem City Dinor	3545	W. 12th St	Erie	PA	16505	7/1/21	32.91	Meeting for campaign	
Blue Host	1500	N. Priest Drive	Tempe	AZ	85281	7/3/21	10.99	Website hosting	
Constant Contact	1601	Tripple Rd Suite 329	Waltham	MA	02451	7/25/21	47.7	Email/Website support	
Erie Brewing Co.	4102	W. Lake Rd	Erie	PA	16505	8/5/21	300	Down Payment for Fundraiser	
Blue Host	1500	N. Priest Drive	Tempe	AZ	85281	8/3/21	10.99	Website hosting	
Odls 12	3702	W. 12th St	Erie	PA	16505	8/6/21	49.29	Meeting for campaign	
The Cork	100	W. Erie Plaza Dr	Erie	PA	16505	8/7/21	50	Gift Card for Advertising at an Event	
The Colony	2670	W. 8th St	Erie	PA	16505	8/11/21	33.54	Meeting for campaign	
CANVA	1101	Kippax St.	NSW2010	Australia	---	8/16/21	12.99	Social media creation platform	
Constant Contact	1601	Tripple Rd Suite 329	Waltham	MA	02451	8/25/21	47.7	Email/Website support	
Erie Crawford Central Labor Council	1701	State St	Erie	PA	16501	9/1/21	30	Event for Unions	x
Stumpys	3728	Liberty St	Erie	PA	16508	9/5/21	75	Advertising at charity event	
The Committee to Elect Tyler Titus	3607	Poplar St	Erie	PA	16508	9/7/21	100	Canvassing Event	
Blue Host	1500	N. Priest Drive	Tempe	AZ	85281	9/3/21	10.99	Website hosting	
Act Blue (Donation fee)	14	Arrow St.	Cambridge	MA	*02138	9/3/21	31.5	Fee for Donations through ActBlue	
Walmart	5350	W. Ridge Rd	Erie	PA	16506	9/9/21	55.88	Fundraiser supplies and printing	
Desantis Signs	540	W. 18th St.	Erie	PA	16502	9/9/21	862.15	Invitations for Fundraiser	
Walmart	5350	W. Ridge Rd	Erie	PA	16506	9/14/21	30.59	Printing of Sign for Fundraiser	
Walmart	5350	W. Ridge Rd	Erie	PA	16506	9/16/21	30.59	Printing of Sign for Fundraiser	
Millcreek Democratic Caucus	POBox	1184	Erie	PA	16512	8/19/21	140	Tickets for Canvassing Event	
Erie Brewing Co.	4102	W. Lake Rd	Erie	PA	16505	9/20/21	1441.1	Fundraising event	
Rick Klein	1505	State St	Erie	PA	16501	9/14/21	50	Picture for add	
Desantis Signs	540	W. 18th St.	Erie	PA	16502	9/9/21	2754.34	Signs, buttons, stickers	
Gerlachs Floral	3151	W. 32nd St.	Erie	PA	16506	9/20/21	27.56	supplies for fundraiser	
Constant Contact	1601	Tripple Rd Suite 329	Waltham	MA	02451	9/25/21	47.7	Email/Website support	
Desantis Signs	540	W. 18th St.	Erie	PA	16502	9/27/21	1425.12	Palm Cards	
Erie County Dem Party	POBox	1184	Erie	PA	16512	10/1/21	100	Advertising	
Blue Host	1500	N. Priest Drive	Tempe	AZ	85281	10/3/21	10.99	Website hosting	
Act Blue (Donation fee)	14	Arrow St.	Cambridge	MA	*02138	10/3/21	48	Fee for Donations through ActBlue	
Erie Federal Credit Union	5500	Zuck Rd	Erie	PA	16506	10/5/21	100	Return Check fee	
Erie Federal Credit Union	5500	Zuck Rd	Erie	PA	16506	10/5/21	30	Return Check fee	

Primanti Bros	5800 Peach St	Erie	PA	16565	10/12/21	179.72	Campaign meeting
Erie Brewing Co.	4102 W. Lake Rd	Erie	PA	16505	10/15/21	125	Election Night down payment
Erie County Elections	140 W. 6th St	Erie	PA	16501	10/5/21	60	SuperVoter List
The Comm Elect Aubrea Haggerty Haynes	630 Edgevale Dr	Erie	PA	16509	10/15/21	100	Donation for Canvassing event
Erie Democratic Committee	PO Box 1184	Erie	PA	16512	10/17/21	70	Tickets for Fall Dem dinner
						8580.04	

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number:	83-3710783
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Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							



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

ERIE COUNTY
OCT 22 2021
VOTER REGISTRATION

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

Name of Filing Committee, Candidate, or Lobbyist				
Reporting Cycle Name				
☐ Cycle 1 6 th Tuesday Pre-Primary	☐ Cycle 2 2 nd Friday Pre-Primary	☐ Cycle 3 30 Day Post Primary	☐ Cycle 4 6 th Tuesday Pre-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	☐ 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

10/18/21
Date (DD/MM/YYYY)

Allan R. Thayer
Printed Name

Erie PA USA
Location (City/State/Country)



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

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.

Kimberly A. Clear

Signature of Treasurer, Candidate, or Lobbyist

10-18-21

Date (DD/MM/YYYY)

Kimberly A Clear

Printed Name

Erie, PA 16506 USA

Location (City/State/Country)