

COMMONWEALTH OF PENNSYLVANIA
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 NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	<input checked="" type="checkbox"/> COMMITTEE	<input type="checkbox"/> LOBBYIST
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Tim May						
STREET ADDRESS 1087 Boyer Road						
CITY Erie		STATE PA		ZIP CODE 16511		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION
6TH TUESDAY PRE-PRIMARY 2ND FRIDAY PRE-PRIMARY 30 DAY POST-PRIMARY 6TH TUESDAY PRE-ELECTION 2ND FRIDAY PRE-ELECTION 30 DAY POST-ELECTION <input checked="" type="checkbox"/> ANNUAL REPORT		Harborcreek Township supervisor		1	Republican	MO. DAY YEAR 11 23 2021
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR 10 19 21 TO 11 22 21		FOR OFFICE USE ONLY		
		CASH BALANCE AT END OF REPORTING PERIOD: \$ 0				
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0				
		AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/> TERMINATION REPORT? YES NO <input checked="" type="checkbox"/>				

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.

If statement is filed on behalf of a Candidate, the Candidate must sign here.

If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

DAY OF December 2021

SIGNATURE: Michelle Gonda

MY COMMISSION EXPIRES 5 26 2023

Notary Public
 MICHELLE GONDA - Notary Public
 Erie County
 My Commission Expires May 26, 2023
 Commission Number 1290868

SIGNATURE OF PERSON SUBMITTING REPORT: Tim May

PRINTED NAME: Timothy J. May

AREA CODE: 814 DAYTIME TELEPHONE NUMBER: 899-6202

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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

DAY OF December 2021

SIGNATURE: Michelle Gonda

MY COMMISSION EXPIRES 5 26 2023

Notary Public
 MICHELLE GONDA - Notary Public
 Erie County
 My Commission Expires May 26, 2023
 Commission Number 1290868

SIGNATURE OF CANDIDATE: Tim May

PRINTED NAME: Timothy J. May

AREA CODE: 814 DAYTIME TELEPHONE NUMBER: 899-6202