## 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	ATE I.	COMMITTEE 2.	LOBBYIST 3
NAME OF FILING COMMITTEE, CANDIDA	TE OR LOBBYIST		J	<u> </u>	<u></u>
STREET ADDRESS	The ROM				
95	orchand Beach Driv				
North E	ast	STATE PA	ZIP C	0DE 8428	- 1435
(CHECK ONE)	e of office sought by candidate of the East Boaugh Counc	DISTRICT NO. PART	<del>,                                    </del>	MO.	DE ELECTION DAY YEAR
6TH TUESDAY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>	[ ] ]	Q QQQ1
2ND FRIDAY PRE-PRIMARY  30 DAY POST-PRIMARY	DATES OF REPORTING PERIOD 10 18 2621 TO	MG. DAY YEAR		TOX OFFI	3
6TH TUESDAY 4. FRE-ELECTION 5.	CASH BALANCE AT END OF REPORTING PERIOD: TOTAL AMOUNT OF FILER'S	\$ <u>-O-</u>			
2nd FRIDAY PRE-ELECTION 6.	OUTSTANDING DEBTS OR LIABILITI AT THE END OF REPORTING PERIO				r.
30 DAY, POST-ELECTION 7	AMENDMENT YES	NO X			
ANNUAL REPORT	TERMINATION YES	NO X			
	AFFID	AVIT SECTION	بسا		
statement is filed on be	ehalf of a <u>Political Committee <i>or</i> Ca</u> ehalf of a <u>Candidate</u> , the Candidate ehalf of a <u>Contributing Lobbyist</u> , the	must sign here.		surer must s	ign here.
SWEAR (OR AFFIRM) THAT THE	AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIA Y DOLLARS (\$250.00) AND THIS REPORT IS, TO	BILITIES INCURRED DURING THE R	EPORTING P	ERIOD INDICATED	ABOVE DID NOT
SWORN TO AND SUBSCRI		THE BEST OF MY KNOWLEDGE AND	BELLEFY RI	JE, CORRECT AND	COMPLETE.
DAY OF	20	SIGNATURE OF	PERSON SI	JBMITTING REPO	Rī
		<u>Kacie</u>	K. 11	1carea	or
	SIGNATURE	911	PRINTED NA 100 á		10
My commission expires	MO. DAY YR.	AREA CODE	V	TELEPHONE NU	
.RT II - statement is filed on be	half of a <u>Candidate's Authorized C</u>	ommittee, Candidate m	ust sign	here.	
I SWEAR (OR AFFIRM) THAT JUNE 3, 1937 (P.L. 1333	TO THE BEST OF MY KNOWLEDGE AND BELIEF THI 3, No. 320) AS AMENDED.	S POLITICAL COMMITTEE HAS NOT	VIOLATED A	NY PRÔVISIONS OF	THE ACT OF
SWORN TO AND SUBSCRIE	BED BEFORE ME THIS				
DAY OF	20	Tyon D.		: Gregor	
	SIGNATURE		RINTED NA		_
MY COMMISSION EXPIRES	MO. DAY YR.	AREA CODE	DAYTIME	TELEPHONE NUM	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

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## 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, Can	didate, or Lobby	ist					
The RI	om Commits	ke						
Reporting Cycle	Name							
☐ <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	☐ <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	☐ Cycle 3 30 Day Post Primary	6 <sup>th</sup> Т	Cycle 4 uesday Election	☐ <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election			
Cycle 6 30 Day Post-Election	☐ Cycle 7	☐ Cycle 8  2 <sup>nd</sup> Friday Pre-Specia	l 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 Treesurer, Candidate, or Lobbyist				30 /11 /2021 Date (DD/MM/YYYY)				
Kalle	L. Mc Gra	gor_	_///r	<i>Hn Eust</i> tion (City/S	<i>L, PA, USA</i> State/Country)			



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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.

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)

Location (City/State/Country)