

Committee

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	COMMITTEE	LOBBYIST
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Committee to Elect Tom Spagui						
STREET ADDRESS 4517 Sunnydale Blvd						
CITY Scranton		STATE PA		ZIP CODE 16509		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE Mayor		DISTRICT NO.	PARTY D	DATE OF ELECTION MO: DAY: YEAR:
1. 6TH TUESDAY PRE-PRIMARY		DATES OF REPORTING PERIOD MO: DAY: YEAR: 6 18 21 TO 10 18 21		FOR OFFICE USE ONLY ERIE COUNTY OCT 19 2021 VOTER REGISTRATION		
2. 2ND TUESDAY PRE-PRIMARY						
3. 30 DAY POST-PRIMARY						
4. 6TH TUESDAY PRE-ELECTION						
5. 2ND FRIDAY PRE-ELECTION	<input checked="" type="checkbox"/>					
6. 30 DAY POST-ELECTION						
7. ANNUAL REPORT						
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			
TERMINATION REPORT?		YES	NO			

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	20
SIGNATURE	
MY COMMISSION EXPIRES	
MO. DAY YR.	
SIGNATURE OF PERSON SUBMITTING REPORT Bob Cassilio	
PRINTED NAME BOB CASSILIO	
AREA CODE 814	DAYTIME TELEPHONE NUMBER 881-3150

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	20
SIGNATURE	
MY COMMISSION EXPIRES	
MO. DAY YR.	
SIGNATURE OF CANDIDATE Thomas A. Spagui	
PRINTED NAME THOMAS A. SPAGUI	
AREA CODE 814	DAYTIME TELEPHONE NUMBER 434-1655

Committee


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 19 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				
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 4 6 th Tuesday Pre-Election	<input checked="" type="checkbox"/> Cycle 5 2 nd Friday Pre-Election
<input type="checkbox"/> Cycle 6 30 Day Post-Election	<input type="checkbox"/> Cycle 7 Annual Report	<input type="checkbox"/> Cycle 8 2 nd Friday Pre-Special Election	<input type="checkbox"/> 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

BOB CASILLO

Printed Name

19 OCT 2021

Date (DD/MM/YYYY)

ERIE PA

Location (City/State/Country)

DSEB-502R

Updated 1/22/2021

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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.

Bob Casillo
Signature of Treasurer, Candidate, or Lobbyist

19 OCT 2021
Date (DD/MM/YYYY)

BOB CASILLO
Printed Name

Spring PA
Location (City/State/Country)