

## 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	1. <input checked="" type="checkbox"/>	COMMITTEE	2.	LOBBYIST	3.	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>X Leatra Tate</b>										
STREET ADDRESS <b>X 1114 West 10th Street</b>										
CITY <b>X Erie</b>				STATE <b>PA</b>		ZIP CODE <b>16502</b>				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.		PARTY		DATE OF ELECTION		
								MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY		1.						11	02	2021
2ND FRIDAY PRE-PRIMARY		2.								
30 DAY POST-PRIMARY		3.								
6TH TUESDAY PRE-ELECTION		4.								
2ND FRIDAY PRE-ELECTION		5. <input checked="" type="checkbox"/>								
30 DAY POST-ELECTION		6.								
ANNUAL REPORT		7.								

DATES OF REPORTING PERIOD		MO.		DAY		YEAR		TO		MO.		DAY		YEAR	
		06		07		2021				10		18		2021	

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"/>

ERIE COUNTY

OCT 22 2021

VOTER REGISTRATION

## 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		SIGNATURE OF PERSON SUBMITTING REPORT	
____ DAY OF _____ 20__		____	
____ SIGNATURE		____ PRINTED NAME	
MY COMMISSION EXPIRES		AREA CODE	
____ MO. ____ DAY ____ YR.		____ DAYTIME TELEPHONE NUMBER	

## 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		SIGNATURE OF CANDIDATE	
____ DAY OF _____ 20__		<b>X Leatra Tate</b>	
____ SIGNATURE		____ PRINTED NAME	
MY COMMISSION EXPIRES		AREA CODE	
____ MO. ____ DAY ____ YR.		814 746-1472	



**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](http://www.dos.pa.gov/campaignfinance) • [ra-stcampaignfinance@pa.gov](mailto:ra-stcampaignfinance@pa.gov)

ERIE COUNTY

OCT 22 2021

VOTER REGISTRATION

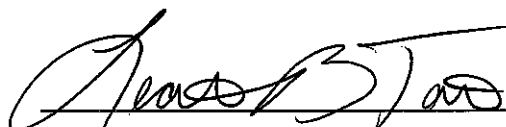
## Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Statements

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

Name of Filing Committee, Candidate, or Lobbyist				
Leatra Tate				
Reporting Cycle Name				
<input type="checkbox"/> <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<input type="checkbox"/> <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	<input type="checkbox"/> <b>Cycle 3</b> 30 Day Post Primary	<input type="checkbox"/> <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election	<input checked="" type="checkbox"/> <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election
<input type="checkbox"/> <b>Cycle 6</b> 30 Day Post-Election	<input type="checkbox"/> <b>Cycle 7</b> Annual Report	<input type="checkbox"/> <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election	<input type="checkbox"/> <b>Cycle 9</b> 30 Day Post-Special Election	

**Part I** – If this form is submitted with a statement in lieu of full report by a political committee, the treasurer must sign here. If this form is submitted with a statement in lieu of a full report by a candidate, the candidate must sign here. If this form is submitted with a statement in lieu of full 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 Statement is true and correct.**

  
Signature of Treasurer, Candidate, or Lobbyist

Leatra Tate

Printed Name

21/10/2021

Date (DD/MM/YYYY)

Erie PA USA

Location (City/State/Country)



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**Part II** - If this is submitted with a statement in lieu of full report by a Candidate's Authorized Committee, candidate sign here.

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Statement is true and correct.**

A handwritten signature in black ink, appearing to read 'Leatra Tate', written over a horizontal line.

Signature of Candidate

21/10/2021

Date (DD/MM/YYYY)

Leatra Tate

Printed Name

Erie / PA / USA

Location (City/State/Country)