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 NIMBER	REPORT FILED CANDIDATE	GOMMITTEE 2 LOBBYIST 3
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST	10 Company of the common the company of the company	
STREET ADDRESS AUDICE TAGETY Hayn	32 20 20 20 20 20 20 20 20 20 20 20 20 20	
630 Edge Vale Drive		
EGC .	PA	218 COOP 5 0 9 7 G
TYPE OF REPORT NAME OF OFFICE SOUGHT BY CANDIDATE (CHECK-ONE)	DISTRICT NO. PARTY	DATE OF ELECTION
6TH TUESDAY F Erie County Clark of Record		n 11 - 0 > 2021
PREFRIMARY 2 DATES OF MO. DAY. YEAR 2ND FRIDAY: 2 DATES OF	AND DAY YEAR 2021	FOR OFFICE USE ONLY
FOST-PRIMARY CASH BALANCE AT END OF REPORTING PERIOD:	\$ O	
2ND FRIDAY PRE-ELECTION AT THE END OF REPORTING PERIOD		7 3:
30 DAY POST-ELECTION AMENDMENT PERORT? ANNUAL TERMINATION PERORT? SEPORT? YES	NG X	2. See 11. See
PART I - If statement is filed on behalf of a Political Committee or Car If statement is filed on behalf of a Candidate, the Candidate If statement is filed on behalf of a Contributing Lobbyist, the	must sign here.	Treasurer must sign here.
I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIAB EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE	LITIES INCURRED DURING THE REPO IE BEST OF MY KNOWLEDGE AND BE	RTING PERIOD INDICATED ABOVE DID NOT LIEF, TOOK, CORRECT AND COMPLETE.
SWORN TO AND SUBSCRIBED BEFORE ME THIS	Subrilon	that It land
DAY OF	/n // 11 **	SON SUBMITTING REPORT
SIGNATURE	/ Hubrea Hag	WED NAME
MY COMMISSION EXPIRES MO DAY YR	S C S S S S S S S S	460-9922 DAYTIME TELEPHONE NUMBER
PART II - If statement is filed on behalf of a <u>Candidate's Authorized Co</u>	mmittee, Candidate mus	i sign here.
I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.	POLITICAL COMMITTEE HAS NOT VIO	LATED ANY PROVISIONS OF THE ACT OF
SWORN TO AND SUBSCRIBED BEFORE ME THIS		
DAY OF	SIGNATUR	E OF CANDIDATE
		TED NAME
SIGNATURE MY COMMISSION EXPIRES	AREA CODE	DAY ME TELEDUONE NUMBER



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

2012 JAN 31 PM 3: 84

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 Reporting Cycle		ididate, or Lobby	ist		
☐ Cycle 1 6 th Tuesday Pre-Primary	☐ Cycle 2 2 nd Friday Pre-Primary	☐ Cycle 3 30 Day Post Primary	6 th T	Cycle 4 uesday 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, ot lobbyist Date (DE

Location (City/State/Country)

DSE8-502R Updated 1/22/2021