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		REPORT FILED		2. 3.
NUMBER NAME OF FILING COMMITTEE, CAI	NDIDATE OF LORBYIST	ON BEHALF OF	CANDIDATE COMMITTEE	LOBBYIST 3
Mary	Bennû	•	•	
STREET ADDRESS 383	E/ St SQ.			
CITY		STAPE FR	ZIP CODE	
TYPE OF REPORT (GHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY DATE	OF ELECTION
6th Tuesday PRE-PRIMARY		3	0001 1)	03 ZO
2ND ERIDAY 2. PRE-PRIMARY	DATES OF REPORTING PERIOD NO. DAY YEAR	MO. DAY YEAR 170 172 31 20	POR GI	Action 1
30 pay Post-Primary	CASH BALANCE AT END			OTER EL
6TH TUESDAY PRE-ELECTION	OF REPORTING PERIOD: TOTAL AMOUNT OF FILER'S	\$		<u> </u>
2nd FRIDAY PRE-ELECTION 6.	OUTSTANDING DEBTS OR LI AT THE END OF REPORTING	ABILITIES PERIOD: \$		AMIO: 51
30 DAY POST-ELECTION	AMENDMENT YE	s NO X		§ 5
REPORT	TERMINATION YE	s NO X		
		AFFIDAVIT SECTION		
statement is filed on	behalf of a <u>Political Committee</u> behalf of a <u>Candidate</u> , the Car behalf of a <u>Contributing Lobby</u>	ididate must sign here. <u>ist,</u> the Lobbyist must siç	gn here.	
EVOEED 1100 HOUDKED MUD	HE AGGREGATE RECEIPTS OR DISBURSEMEN FIFTY DOLLARS (\$250.00) AND THIS REPOR	TS OR LIABILITIES INCURRED DURIN T IS, TO THE BEST OF MY KNOWLEE	G THE REPORTING PERIOD INDICATE OGE AND BELIEF, TRUE, CORRECT A	D ABOVE DID NOT ND COMPLETE.
SWORN TO AND SUBS	CRIBED BEFORE ME THIS 20	SIGNA	JAMULL &	PORT
	·	Mary	Rennie .	
MY COMMISSION EXPI	SIGNATURE	814	PRINTED NAME	
	MO. DAY YR.	AREA CODE	DAYTIME TELEPHONE	IUMBER
ART II - statement is filed on	behalf of a <u>Candidate's Author</u>	ized Committee, Candid	ate must sign here.	
I SWEAR (OR AFFIRM) T JUNE 3, 1937 (P.L. 1	HAT TO THE BEST OF MY KNOWLEDGE AND 8 333, No. 320) AS AMENDED.	ELIEF THIS POLITICAL COMMITTEE H	AS NOT VIOLATED ANY PROVISIONS	OF THE ACT OF
SWORN TO AND SUBS	CRIBED BEFORE ME THIS			
DAY OF	20	<u>.</u>	SIGNATURE OF CANDIDATE	
			PRINTED NAME	
MY COMMISSION EXPIR	SIGNATURE EESMO. DAY YR,	AREA CODE	PRINTED NAME DAYTIME TELEPHONE N	UMRER

Department of State Bureau of Commissions, Elections and Legislation 210 North Office Building Harrisburg, PA 17120-0029 (717) 787-5280

DSEB-503 (12-99)



Pennsylvania Department of State

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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

2021 FEB - 1 AM 10: 50

VOTER REGISTRATION

Updated 1/22/2021

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.

Cycle 1 6th Tuesday Pre-Primary	Cycle 2 2 nd Friday Pre-Primary	Cycle 3 30 Day Post Primary	Cycle 4 6th Tuesday Pre-Election		☐ Cycle 5 2 nd Friday Pre-Election				
☐ Cycle 6 30 Day Post-Election	Cycle 7 Annual Report	☐ Cycle 8 2 nd Friday Pre-Specia	į ·		cle 9 st-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.									
May 6-	gweec asurer, Candidate		1 5n	30 2 ate (DD/M	M/YYYY)				
					DSEB-502R				



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AM 10: 50

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VOTER REGISTRATION

Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

By signing or typing my name below, I hereby declare under the penalty of perjury, pursuant to 18 Pa.C.S. § 4904, that the information contained in the accompanying Campaign Finance Report is to the best of my knowledge and belief true, correct and complete.

Mary Ramie	1/30/21
Signature of Candidate	Date
Mary Rennie	
Printed Name	