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.

PALER IDENTIFICATION NUMBER	· · · · · · · · · · · · · · · · · · ·	REPORT FILED ON BEHALF OF	ATE 1. COMMITTEE 2 LOBBYIST 3.	
NAME OF FILING COMMITTEE, CA				
	TIM WINARSK			
STREET ADDRESS	140 E. 31 ST	_		
ERIZ		STATE PA	16504 -1371	
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE BOUGHT BY CANDIDATE	DISTRICT NO. PARTY	DATE OF FLECTION MO. DAY YEAR	
6TH TUESDAY PRE-PRIMARY			FOR OFFICE USE ONLY	
2ND FRIDAY PRE-PRIMARY	DATES OF REPORTING PERIOD / / / JO	TO 12 31 20		
30 DAY	CASH BALANCE AT END	. 0	7	
OTH TUESDAY PRE-BLECTION	OF REPORTING PERIOD: TOTAL AMOUNT OF FILER'S	\$ <u>U</u>	2021.	
2ND FRIDAY PRE-ELECTION	OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$			
30 DAY B. B. POST-ELECTION	AMENDMENT YES	NO X		
ANNUAL REPORT	TERMINATION YES	NO X	AT 9: 2	
	AF	FIDAVIT SECTION		
f statement is filed or f statement is filed or	n behalf of a <u>Political Committee or</u> n behalf of a <u>Candidate</u> , the Candid n behalf of a <u>Contributing Lobbyist</u>	date must sign here. , the Lobbyist must sign her	re.	
EXCEED TWO HUNDRED AND	THE AGGREGATE RECEIPTS OR DISBURSEMENTS OF FIFTY DOLLARS (5250,00) AND THIS REPORT IS SCRIBED BEFORE ME THIS			
DAY OF	20	JAMES /	PERSON SUBMITTING REPORT	
MY COMMISSION EXF	SIGNATURE IRES MO. DAY YR.	8/4 S	PRINTED NAME OG -7228 DAYTIME TELEPHONE NUMBER	
ART II -	n behalf of a <u>Candidate's Authorize</u>	d Committee. Candidate m	ust sian here.	
I SWEAR (OR AFFIRM)	THAT TO THE BEBT OF MY KNOWLEDGE AND BELLE 1333, No. 320) AS AMENDED.			
	SCRIBED BEFORE ME THIS	SIGNA	TURE OF CANDIDATE	
ĐAY OF	20	F	PRINTED NAME	
MY COMMISSION EXP	BIGNATURE IRES MO. DAY YR.	AREA CODE	DAYTIME TELEPHONE NUMBER	

Department of State • Bureau of Commissions, Elections and Legislation 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 767-5280



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

2021 FEB - 1 AM 9: 23

Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per the temporary walver granted by the Governor on April 6, 2020, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), and Independent Expenditure Reports (form DSEB-505) need not be notarized. (See <u>Temporary Waiver of Notarization Requirement for Campaign Finance Reports and Statements</u>). 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 and only so long as the waiver referenced above is in effect. This form must be signed by hand or by typing your name where a signature is required. If you type your name, you understand that's your electronic signature and will constitute the legal equivalent of your signature on this form.

Name of Filing Comm	nittee, Candidate, or	Lobbyist				
Reporting Cycle Name						
☐ Cycle 1	☐ Cycle 2	☐ Cycle 3	☐ Cycle 9			
6 th Tuesday Pre-Primary	2 nd Friday Pre-Primary	30 Day Post Primary	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 lobbylst, the lobbyist 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.

Signature of Treasurer, Candidate, or Lobbyist Date

Printed Name

VOTER REGISTRATION



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement 210 North Office Building, Harrisburg, PA 1/120 - PA 1/

ERIE COUNTY 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.

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DSE8-502R 4/15/2020