

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number		Report Filed By (Mark X)	<input checked="" type="checkbox"/>	Candidate		Committee		Lobbyist	
Name of Filing Committee, Candidate or Lobbyist									
Thomas A. Craig									
Street Address									
8505 Shreve Rd									
City									
Union City									
State									
PA									
Zip Code									
10438									

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Date Of Election (MM/DD/YYYY)		Year							
05/18/2021		2021							

For Office Use Only

Summary of Receipts and Expenditures	From Date	To Date	Amount
A. Amount Brought Forward From Last Report	5/3/21	6/11/2021	\$ 0.00
B. Total Monetary Contributions and Receipts (From Schedule I)			\$ 0.00
C. Total Funds Available (Sum of Lines A and B)			\$ 0.00
D. Total Expenditures (From Schedule II)			\$ 0.00
E. Ending Cash Balance (Subtract Line D from Line C)			\$ 0.00
F. Value of In-Kind Contributions Received (From Schedule II)			\$ 0.00
G. Unpaid Debts and Obligations (From Schedule IV)			\$ 0.00

2021 JUN 15 PM 3:48
 ERIE COUNTY
 VOTER REGISTRATION

Affidavit Section

Part I- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here. I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete. Sworn to and subscribed before me this

15 day of June 2021
 Signature: Thomas A. Craig
 Printed Name: Thomas A. Craig

Signature of Person Submitting Report: [Signature]
 Printed Name: Thomas A. Craig
 814 Area Code 923-1893 Daytime Telephone Number

Part II- If this is a report of a Candidate's Authorized Committee, candidate sign here. I swear (or affirm) that to the best of my knowledge and belief this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete. Sworn to and subscribed before me this

NOTARY PUBLIC
 UNION CITY BOROUGH, ERIE COUNTY
 MY COMMISSION EXPIRES September 1, 2021

day of 20
 Signature: _____
 Signature of Candidate: _____
 Printed Name: _____
 My Commission expires MO. DAY YR. Area Code Daytime Telephone Number

