

COMMONWEALTH OF PENNSYLVANIA
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 <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>															
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST MAURICE "MO" TROOP																				
STREET ADDRESS 2109 JUNE STREET																				
CITY ERIE		STATE PA	ZIP CODE 16510 -																	
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY <input checked="" type="checkbox"/> 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE CITY COUNCIL		DISTRICT NO.	PARTY DEMOCRAT																
	DATE OF ELECTION		<table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>05</td> <td>18</td> <td>2021</td> </tr> </table>				MO.	DAY	YEAR	05	18	2021								
	MO.	DAY	YEAR																	
	05	18	2021																	
	DATES OF REPORTING PERIOD		<table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> <th>TO</th> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>05</td> <td>04</td> <td>2021</td> <td></td> <td>06</td> <td>07</td> <td>2021</td> </tr> </table>				MO.	DAY	YEAR	TO	MO.	DAY	YEAR	05	04	2021		06	07	2021
	MO.	DAY	YEAR	TO	MO.	DAY	YEAR													
	05	04	2021		06	07	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"/>																
FOR OFFICE USE ONLY 2021 JUN 17 AM 11:54 ERIE COUNTY 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 17th DAY OF June 2021

Jill Pennsy
 SIGNATURE

Maurice Troop
 SIGNATURE OF PERSON SUBMITTING REPORT

Maurice Troop
 PRINTED NAME

MY COMMISSION EXPIRES _____

Commonwealth of Pennsylvania - Notary Seal
 Jill Pennsy, Notary Public
 Erie County
 My commission expires October 4, 2022
 Member, Pennsylvania Association of Notaries

814 AREA CODE 602-5375 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 _____ DAY OF _____ 20____

 SIGNATURE

 SIGNATURE OF CANDIDATE

 PRINTED NAME

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.

 AREA CODE _____ DAYTIME TELEPHONE NUMBER

