

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 173-58-2389		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 Timothy J. May						
STREET ADDRESS 1087 Boyer Road						
CITY ERIE PA			STATE PA	ZIP CODE 16511		
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/> 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE Harborcreek Township Supervisor		DISTRICT NO. 1	PARTY REP	DATE OF ELECTION	
	DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR 1 1 21 TO 5 3 21		FOR OFFICE USE ONLY			
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>		2021 MAY -6 PM 5:45 ERIE COUNTY VOTER REGISTRATION			
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>					
	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					

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 6th DAY OF May, 2021

Cherie Rae
 CHERIE RAE, Notary Public
 Erie County
 My commission expires March 18, 2025
 Commission number: 1248384
 Member, Pennsylvania Association of Notaries

Timothy J. May
 SIGNATURE OF PERSON SUBMITTING REPORT
 TIMOTHY J. MAY
 PRINTED NAME

814 899-6202
 AREA CODE 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

 PRINTED NAME

MY COMMISSION EXPIRES MO. DAY YR. _____

 AREA CODE _____
 DAYTIME TELEPHONE NUMBER