

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.

2021 JAN 20 PM 1:43

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE	COMMITTEE	<input checked="" type="checkbox"/>	LOBBYIST	<input type="checkbox"/>												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST ERIE COUNTY COMMITTEE TO ELECT VOTER REGISTRATION																			
STREET ADDRESS 7277 RUPERT DR																			
CITY FAIRVIEW			STATE PA		ZIP CODE 16415-1103														
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION													
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION ANNUAL REPORT <input checked="" type="checkbox"/>		CORONER		-	REP	<table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>11</td> <td>5</td> <td>2019</td> </tr> </table>		MO.	DAY	YEAR	11	5	2019						
MO.	DAY	YEAR																	
11	5	2019																	
		DATES OF REPORTING PERIOD <table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>1</td> <td>1</td> <td>20</td> </tr> </table> TO <table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>12</td> <td>31</td> <td>20</td> </tr> </table>		MO.	DAY	YEAR	1	1	20	MO.	DAY	YEAR	12	31	20			FOR OFFICE USE ONLY 2021 JAN 20 PM 3:54 VOTER REGISTRATION	
MO.	DAY	YEAR																	
1	1	20																	
MO.	DAY	YEAR																	
12	31	20																	
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>1802.19</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>3500.00</u>																	
		<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>		AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>								
AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>																
TERMINATION REPORT?	YES	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

20th DAY OF January 2021

Marian L Reim
 SIGNATURE

MY COMMISSION EXPIRES 9 4 21
 MO. DAY YR.

Gregory D Tower
 SIGNATURE OF PERSON SUBMITTING REPORT

GREGORY D TOWER
 PRINTED NAME

814 833-9222
 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

MY COMMISSION EXPIRES _____
 MO. DAY YR.

LYELL P COOK
 SIGNATURE OF CANDIDATE

LYELL P COOK
 PRINTED NAME

814 452-2911
 AREA CODE DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania
 County of Erie
 Notarial Seal
 MARIAN L REIM - Notary Public
 My Commission Expires Sep 4, 2021



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

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.

Signature of Candidate

1.2021

Date

Lyell P Cook

Printed Name