

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 173-58-2389		REPORT FILED ON BEHALF OF	CANDIDATE <input type="checkbox"/>	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <input type="checkbox"/>												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Friends of Tim May																	
STREET ADDRESS 1087 Bayer Rd																	
CITY Erie		STATE PA	ZIP CODE 16511														
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION												
<input type="checkbox"/> 1. 6TH TUESDAY PRE-PRIMARY	Harborside Township Supervisor		1	REP	MO. DAY YEAR 11 03 2015												
<input type="checkbox"/> 2. 2ND FRIDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY														
<input type="checkbox"/> 3. 30 DAY POST-PRIMARY	<table border="1" style="display: inline-table; margin-right: 10px;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td>1</td><td>1</td><td>20</td></tr> </table> to <table border="1" style="display: inline-table;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></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	2021 JAN 27 AM 9:42 ERIE COUNTY VOTER REGISTRATION		
MO.	DAY	YEAR															
1	1	20															
MO.	DAY	YEAR															
12	31	20															
<input type="checkbox"/> 4. 6TH TUESDAY PRE-ELECTION	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>35</u>																
<input type="checkbox"/> 5. 2ND FRIDAY PRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>-0-</u>																
<input type="checkbox"/> 6. 30 DAY POST-ELECTION	<table border="1" style="display: inline-table; margin-right: 10px;"> <tr><td>AMENDMENT REPORT?</td><td>YES</td><td>NO</td><td>X</td></tr> </table> <table border="1" style="display: inline-table;"> <tr><td>TERMINATION REPORT?</td><td>YES</td><td>NO</td><td>X</td></tr> </table>		AMENDMENT REPORT?	YES	NO	X	TERMINATION REPORT?	YES	NO	X							
AMENDMENT REPORT?	YES	NO	X														
TERMINATION REPORT?	YES	NO	X														
<input checked="" type="checkbox"/> 7. ANNUAL REPORT																	

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 _____ DAY OF _____ 20____

SIGNATURE

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.


 SIGNATURE OF PERSON SUBMITTING REPORT
 Kelly May
 PRINTED NAME
 814 899-6202
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

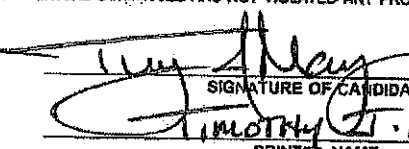
If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

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

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.


 SIGNATURE OF CANDIDATE
 Timothy J. May
 PRINTED NAME
 814 790-2736
 AREA CODE DAYTIME TELEPHONE NUMBER



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 JAN 27 AM 9:42
 ERIE COUNTY
 VOTER REGISTRATION

Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per the temporary waiver 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 Temporary Waiver of Notarization Requirement for Campaign Finance Reports and Statements). 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 Committee, Candidate, or Lobbyist			
FRIENDS OF <u>Tim May</u>			
Reporting Cycle Name			
<input checked="" type="checkbox"/> Cycle 1 <small>6th Tuesday Pre-Primary</small>	<input type="checkbox"/> Cycle 2 <small>2nd Friday Pre-Primary</small>	<input type="checkbox"/> Cycle 3 <small>30 Day Post Primary</small>	<input type="checkbox"/> Cycle 9 <small>30-Day Post Special Election</small>

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 lobbyist, 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

1-21-21

 Date

Kelly May

 Printed Name



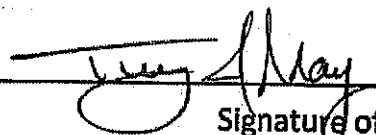
Pennsylvania Department of State

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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

1-20-21
Date

TIMOTHY J. MAY

Printed Name