

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 checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST TIMOTHY MAY					
STREET ADDRESS 1087 BOYD RD					
CITY ERIE PA		STATE PA	ZIP CODE 16511		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE HARRISON TUMSKY Supervisor	DISTRICT NO. 1	PARTY REP	DATE OF ELECTION	
				MO. 11	DAY 03
1. 6TH TUESDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
2. 2ND FRIDAY PRE-PRIMARY	MO. DAY YEAR 1 1 20	TO	MO. DAY YEAR 12 31 20	2021 JAN 27 AM 9:41 ERIE COUNTY VOTER REGISTRATION	
3. 30 DAY POST-PRIMARY	CASH BALANCE AT END OF REPORTING PERIOD: \$ 35				
4. 6TH TUESDAY PRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ —				
5. 2ND FRIDAY PRE-ELECTION	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
6. 30 DAY POST-ELECTION	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
7. ANNUAL REPORT <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 _____ DAY OF _____ 20 _____

SIGNATURE _____

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____

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 _____

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____

SIGNATURE OF CANDIDATE
 TIMOTHY J. MAY
 PRINTED NAME

814 899-6202
 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 22 AM 9:41
 ERIE COUNTY
 VOTER REGISTRATION

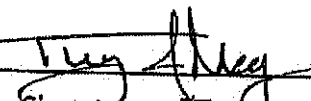
Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

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			
<u>Timothy May</u>			
Reporting Cycle Name			
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 9 30-Day Post Special Election

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

1/22/21
 Date

Timothy J. May
 Printed Name



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 11:09:41 AM
 ERIE COUNTY
 VOTER REGISTRATION

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

1/26/21
 Date

Timothy J. May
 Printed Name