

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	COMMITTEE	LOBBYIST																							
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST WASD VOICES																												
STREET ADDRESS 10500 DONATION RD.																												
CITY NORTH EAST			STATE PA	ZIP CODE 16442																								
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY																							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>6TH TUESDAY PRE-PRIMARY</td><td>1.</td></tr> <tr><td>2ND FRIDAY PRE-PRIMARY</td><td>2.</td></tr> <tr><td>30 DAY POST-PRIMARY</td><td>3.</td></tr> <tr><td>6TH TUESDAY PRE-ELECTION</td><td>4.</td></tr> <tr><td>2ND FRIDAY PRE-ELECTION</td><td>5.</td></tr> <tr><td>30 DAY POST-ELECTION</td><td>6.</td></tr> <tr><td>ANNUAL REPORT</td><td>7. <input checked="" type="checkbox"/></td></tr> </table>		6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	ANNUAL REPORT	7. <input checked="" type="checkbox"/>	SCHOOL DIRECTOR												
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MO.	DAY	YEAR																										
11	3	2020																										
		<p>CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0.00</u></p> <p>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0.00</u></p>		<p>FOR OFFICE USE ONLY</p> <p align="center">2021 JAN 15 PM 2:48 ERIE COUNTY VOTER REGISTRATION</p>																								
		<table border="1" style="width:100%; border-collapse: collapse;"> <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"/>																	
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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 <u>13</u> DAY OF <u>JANUARY</u> 20 <u>21</u> <u>Joy M. Biebel</u> SIGNATURE MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.	<u>Joy M. Biebel</u> SIGNATURE OF PERSON SUBMITTING REPORT <u>Joy M. Biebel</u> PRINTED NAME <u>814</u> <u>969-0634</u> AREA CODE DAYTIME TELEPHONE NUMBER
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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 _____ PRINTED NAME _____ AREA CODE DAYTIME TELEPHONE NUMBER
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Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

2021 JAN 15 PM 2:48

____ COUNTY
VOTER REGISTRATION

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			
Reporting Cycle Name			
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input checked="" 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.

Joy M. Biebel

Signature of Treasurer, Candidate, or Lobbyist

1-13-2021

Date

Joy M. Biebel