

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		REPORT FILED ON BEHALF OF	CANDIDATE 1	COMMITTEE 2	LOBBYIST 3							
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Friends of Robert Yates</i>												
STREET ADDRESS <i>P.O. Box 8619</i>												
CITY <i>Erie</i>			STATE <i>PA</i>	ZIP CODE <i>16505 -</i>								
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION							
					MO.	DAY	YEAR					
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"/>												
DATES OF REPORTING PERIOD			TO		FOR OFFICE USE ONLY							
<table border="1" style="display: inline-table;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td><i>01</i></td><td><i>22</i></td><td><i>20</i></td></tr> </table>			MO.	DAY	YEAR	<i>01</i>	<i>22</i>	<i>20</i>			2021 FEB - 1 PM 12:04 ERIE COUNTY VOTER REGISTRATION	
MO.	DAY	YEAR										
<i>01</i>	<i>22</i>	<i>20</i>										
<table border="1" style="display: inline-table;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td><i>01</i></td><td><i>31</i></td><td><i>21</i></td></tr> </table>			MO.	DAY	YEAR	<i>01</i>	<i>31</i>	<i>21</i>				
MO.	DAY	YEAR										
<i>01</i>	<i>31</i>	<i>21</i>										
CASH BALANCE AT END OF REPORTING PERIOD:			\$ <i>800.73</i>									
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:			\$ <i>0</i>									
AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>								
TERMINATION REPORT?		YES	NO									

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.

Barbara Makarowski
SIGNATURE OF PERSON SUBMITTING REPORT

Barbara Makarowski
PRINTED NAME

814 *838-6635*
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.

Robert Yates
SIGNATURE OF CANDIDATE

ROBERT S. YATES
PRINTED NAME

814 *449-7750*
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

Friends of Robert Yates committee

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			
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.

Barbara Makarowski
 Signature of Treasurer, Candidate, or Lobbyist

1/28/2021
 Date

Barbara Makarowski
 Printed Name



Pennsylvania Department of State

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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

Date

Printed Name