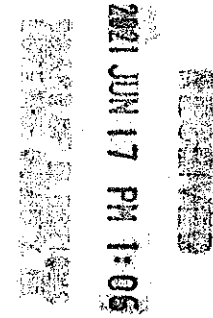


COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

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	COMMITTEE	LOBBYIST				
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>FRIENDS OF CHRIS PERRY</b>								
STREET ADDRESS <b>228 CIRCLE DRIVE</b>								
CITY <b>MOUNTAINTOP</b>		STATE <b>PA</b>	ZIP CODE <b>18707</b>					
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <b>LUZERNE COUNTY COUNCIL</b>	DISTRICT NO.	PARTY <b>Rep</b>	DATE OF ELECTION				
				MO.	DAY	YEAR		
6TH TUESDAY PRE-PRIMARY				<b>05</b>	<b>18</b>	<b>2021</b>		
2ND FRIDAY PRE-PRIMARY								
30 DAY POST-PRIMARY								
6TH TUESDAY PRE-ELECTION								
2ND FRIDAY PRE-ELECTION								
30 DAY POST-ELECTION								
ANNUAL REPORT								
DATES OF REPORTING PERIOD		MO. DAY YEAR		MO. DAY YEAR		FOR OFFICE USE ONLY		
		<b>05 04 21</b>		to		<b>06 07 21</b>		
CASH BALANCE AT END OF REPORTING PERIOD:		\$ <b>59.11</b>						
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ <b>20.00</b>						
AMENDMENT REPORT?		YES		NO	<input checked="" type="checkbox"/>			
TERMINATION REPORT?		YES		NO	<input checked="" type="checkbox"/>			

**AFFIDAVIT SECTION**

**PART I -**

Statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 Statement is filed on behalf of a Candidate, the Candidate must sign here.  
 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

**16th** DAY OF **JUNE** 20**21**

**Christina M. McGarry**  
SIGNATURE

MY COMMISSION EXPIRES **3-24-2024**  
MO. DAY YR.

**Mary Perry**  
SIGNATURE OF PERSON SUBMITTING REPORT

**MARY PERRY**  
PRINTED NAME

**570** AREA CODE      **570-261-5331** 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

**16th** DAY OF **JUNE** 20**21**

**Christina M. McGarry**  
SIGNATURE

MY COMMISSION EXPIRES **3-24-2024**  
MO. DAY YR.

**Chris Perry**  
SIGNATURE OF CANDIDATE

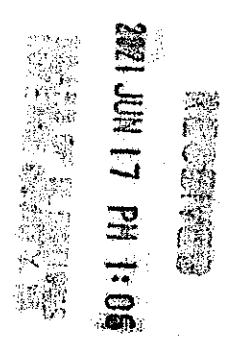
**CHRIS PERRY**  
PRINTED NAME

**570** AREA CODE      **956-1881** DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal  
 Christina M. McGarry, Notary Public  
 Luzerne County  
 My commission expires March 24, 2024  
 Commission number 1205769  
 Member, Pennsylvania Association of Notaries

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 <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>CHRIS PERRY</b>							
STREET ADDRESS <b>228 CIRCLE DRIVE</b>							
CITY <b>MOUNTAINTOP</b>			STATE <b>PA</b>	ZIP CODE <b>18709</b>			
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY <input checked="" type="checkbox"/> 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE <b>LIBERNE COUNTY COUNCIL</b>		DISTRICT NO.	PARTY <b>Rep</b>	DATE OF ELECTION		
					MO.	DAY	YEAR
					<b>05</b>	<b>18</b>	<b>2021</b>
	DATES OF REPORTING PERIOD		MO.	DAY	YEAR	FOR OFFICE USE ONLY	
			<b>05</b>	<b>04</b>	<b>21</b>		
	CASH BALANCE AT END OF REPORTING PERIOD:		\$ <b>&lt;20.00&gt;</b>				
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ <b>0</b>					
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.

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SWORN TO AND SUBSCRIBED BEFORE ME THIS

**16th** DAY OF **JUNE** 20**21**  
 Signature: **Christina M. McGarry**  
 MY COMMISSION EXPIRES **3-24-2024**  
 MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT

Signature: **Chris Perry**  
 PRINTED NAME: **CHRIS PERRY**  
 AREA CODE: **570** DAYTIME TELEPHONE NUMBER: **956-1881**

**PART II -**

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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 \_\_\_\_\_

Commonwealth of Pennsylvania - Notary Seal  
 Christina M. McGarry, Notary Public  
 Luzerne County  
 My commission expires March 24, 2024  
 Commission number: J205769  
 Member, Pennsylvania State Bar