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					REPOI	RT FILED		10.9	, , T 1	2.		3.
NUMBER	<u> </u>					HALF OF	CANDIDATE	X	COMMITTEE	r.o	BBYIST	
NAME OF FILING COMM	TTEE, CA	NDIDATE OF LOBBYIST	B	RZI	21,	sti						
STREET ADDRESS		326	NE WE	31 /	ARL	Netin	RA					
CITY		ERI	ર્દ		STATE	Po	:	ZiP Co	16509			<u> </u>
TYPE OF REPO (CHECK ONE)		NAME OF OFFICE SOUGHT	EY CANDIDATE		[[DISTRICT NO.	PARTY	v	MO.	OF ELE	YE.	
6th tuesday pre-primary	-						1		05 FOR OI	الی FFICE USE		20
2nd FRIDAY PRE-PRIMARY	×	DATES OF		VEAR TO		15 2023						
30 day post-primary	3.	CASH BALAN				0			YOT	2023		
6th Tuesday Pre-election	4.	OF REPORTING		ส ร	\$_					023 HAY		
2nd FRIDAY PRE-ELECTION	5.	OUTSTANDIN AT THE END	G DEBTS OF	R LIABILIT		0				N		
30 DAY POST-ELECTION	6.		AMENDMENT REPORT?	YES	но	K			A A			
ANNUAL REPORT			TERMINATION REPORT?	YES	но	X			22 3	5		
				AFFI	AVIT S	ECTION						
f statement is	filed o	n behalf of a <u>Politi</u> n behalf of a <u>Cano</u> n behalf of a <u>Cont</u>	lidate, the	Candidat	e must s	ign here.		Trea	surer mus	st sign f	nere.	
I SWEAR (OR AFFIR EXCEED TWO HUNE	RAHT (ME	THE AGGREGATE RECEIPT D FIFTY DOLLARS (\$250.0	S OR DISBURSE O) AND THIS R	EMENTS OR L	IABILITIES IN	CURRED DURIN	IG THE REPOR	TING F	PERIOD INDICAT UE, CORRECT	ED ABOVE	DID NOT	
		SSCRIBED BEFORE ME TI		!O		SIGNAT	URE OF PER	500	UEMITTING RE	EPORT		
						E	D BRIN	TED N.	AME	ski		
MY COMMISS	SION EX		DAY YR.	**************************************	Al	REA CODE	Di	Z AYTIME	92 52 TELEPHONE	377 NUMBER		
PART II - f statement is t	filed o	n behalf of a <u>Canc</u>	lidate's Au	thorized	Committe	e, Candid	late must	sign	here.			
) THAT TO THE BEST OF M . 1333, No. 320) AS AM		AND BELIEF T	HIS POLITICA	L COMMITTEE I	HAS NOT VIOL	ATED A	ANY PROVISION	S OF THE	ACT OF	
SWORN TO A	AND SUE	BSCRIBED BEFORE ME TI			***	ld	SIGNATURE		ANDIDATE			
D <i>i</i>	Y OF _	- 1 · · · · · · · · · · · · · · · · · ·	2	20		ED	> 13	TED N	ZUZ/N)Ski		
MY COMMISS	SION EX				AI	Q14 REA CODE		39	2 SS	TA 7	, 	
		MO.	DAY YR.		,		0,	.,	, ,,,,,,,	.,		



Pennsylvania Department of State

Bureau of Campaign Finance & Lobbying Disclosure 500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4) www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

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Unsworn Declaration in Lieu of Sworn State in a **Campaign Finance Reports**

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. 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. This form must be signed

eporting Cycle	Name			OTHER DESIGNATION OF THE PARTY		
☐ Cycle 1 6 th Tuesday Pre-Primary	Cycle 2 2 nd Friday Pre-Primary	☐ Cycle 3 30 Day Post Primary	Cycle 4 6 th Tuesday Pre-Election		Cycle 5 2 nd Friday Pre-Election	
☐ Cycle 6 Day Post-Election	☐ Cycle 7 Annual Report	☐ Cycle 8 2 nd Friday Pre-Special	Election	Cycle 9 30 Day Post-Special Election		

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.



Pennsylvania Department of State

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Part II - If this form is submitted with a report by a Candidate (Authorized Continued, the candidate must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist

Ed BRZEZINSKI

Date (MM/DD/YYYY)

Printed Name

Location (City/State/Country)