

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 <u>Patrick L. Fetzner</u>						
STREET ADDRESS <u>3031 Coleridge Drive</u>						
CITY <u>ERIE</u>		STATE <u>PA</u>		ZIP CODE <u>16506</u>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT <input checked="" type="checkbox"/>		<u>ERIE CO. CLERK OF RECORDS</u>			<u>DEM</u>	MO. DAY YEAR <u>11 05 2013</u>
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <u>1 1 2017 TO 12 31 2017</u>		FOR OFFICE USE ONLY 2018 JAN -8 PM 1:27 ERIE COUNTY VOTER REGISTRATION TF		
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> TERMINATION REPORT? YES <input checked="" type="checkbox"/> NO <input 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  
15<sup>th</sup> DAY OF DECEMBER  
Michelle L. Seigworth SIGNATURE  
 MY COMMISSION EXPIRES 01 13 MO. DAY YR.  
 NOTARIAL SEAL  
 Michelle L. Seigworth, Notary Public  
 Erie, Erie County  
 My Commission Expires January 13, 2019

Michael A. Fetzner SIGNATURE OF PERSON SUBMITTING REPORT  
Michael A. Fetzner PRINTED NAME  
814 864-5981 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  
15<sup>th</sup> DAY OF DECEMBER 2017  
Michelle L. Seigworth SIGNATURE  
 MY COMMISSION EXPIRES 01 13 19 MO. DAY YR.

Patrick L. Fetzner SIGNATURE OF CANDIDATE  
Patrick L. Fetzner PRINTED NAME  
814 838-8179 AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL  
 Michelle L. Seigworth, Notary Public  
 Erie, Erie County  
 My Commission Expires January 13, 2019  
 Department of State • Bureau of Commissions, Elections and Legislation  
 Harrisburg Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280