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	Х сомил	TEE 2.	LOBBYIST 1.	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST JOHN M. Persins et							
NOC State Street, Suite 700							
Erre		STATE		ZIP CODE 16507			
TYPE OF REPORT (CHECK ONE) NAME OF OFFICE SOUGH	t by candidate City of Ene	DISTRICT NO.	PARTY	: Mo.	DATE OF		
6TH TUESDAY PRE-PRIMARY 2ND EPIDAY 2. DATES OF		MO. DAY YEAR	<u> </u>	F F	OR OFFICE		
PRE-PRIMARY REPORTING PERIOD 30 DAY 3.							
6TH TUESDAY 4. OF REPORT	CASH BALANCE AT END OF REPORTING PERIOD: TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$				2018 1419 3		
2ND FRIDAY 5. OUTSTANDII AT THE END							
30 DAY 6. POST-ELECTION 7.	AMENDMENT YES REPORT?	NO					
ANNUAL SEPORT	TERMINATION YES	NO			*	11: 21	
AFFIDAVIT SECTION							
RRTI- Statement is filed on behalf of a <u>Political Committee or Candidates's Committee</u> , the Treasurer must sign here. Statement is filed on behalf of a <u>Candidate</u> , the Candidate must sign here. Statement is filed on behalf of a <u>Contributing Lobbyist</u> , the Lobbyist must sign here.							
SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT PEXCEPT TWO HUNDRED AND PIETY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST ON MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.							
3/57 DAY OF JROUGKY 20/8 SIGNATURE OF PERCH SUBMITTING REPORT							
SIGNATURE MY COMMISSION EXPIRES MO.	SI4 AREA CODE	87	TED NAME) 0 - 77 03 AYTIME TELEPHONE NUMBER				
RT II - Les atement is filed on behalf of a <u>Candidate's Authorized Committee</u> , 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				SIGNATURE OF CANDIDATE			
SIGNATURE	uidadannum varan erikiliin da kiliin da k		PRIN	TED NAME			
MY COMMISSION EXPIRES MO.	DAY YR.	AREA CODE	D	AYTIME TELEPH	IONE NUME	IER	

Department of State • Bureau of Commissions, Elections and Legislation 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280