

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

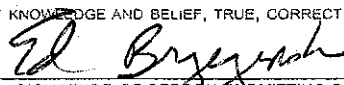
**File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.**

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	<input checked="" type="checkbox"/> COMMITTEE	<input type="checkbox"/> LOBBYIST										
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>ED BRZEZINSKI</b>																
STREET ADDRESS <b>326 West Arlington Rd</b>																
CITY <b>ERIE</b>		STATE <b>PA</b>		ZIP CODE <b>16509</b>												
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 <input checked="" type="checkbox"/> 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT		<b>ERIE City Council</b>			<b>Dem.</b>	MO. <b>11</b> DAY <b>7</b> YEAR <b>2023</b>										
		DATES OF REPORTING PERIOD MO. <b>6</b> DAY <b>6</b> YEAR <b>2023</b> TO MO. <b>10</b> DAY <b>23</b> YEAR <b>2023</b>		FOR OFFICE USE ONLY <div style="writing-mode: vertical-rl; transform: rotate(180deg);">           2023 OCT 23 PM12:15            ERIE COUNTY VOTER REGISTRATION         </div>												
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <b>-0-</b> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <b>-0-</b>														
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td></td> <td>NO</td> <td></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td></td> <td>NO</td> <td></td> </tr> </table>					AMENDMENT REPORT?	YES		NO		TERMINATION REPORT?	YES		NO	
AMENDMENT REPORT?	YES		NO													
TERMINATION REPORT?	YES		NO													

**AFFIDAVIT SECTION**

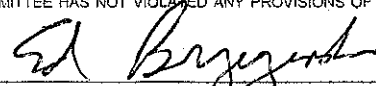
**PART I -**

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.			
COMMONWEALTH OF PENNSYLVANIA Notary Seal Angela L. Watson, Notary Public DAY OF <b>Erie County</b> 20____ My commission expires December 2, 2026 Commission number 1425503 Member, Pennsylvania Association of Notaries MY COMMISSION EXPIRES <b>12 02 2026</b> MO. DAY YR.		SIGNATURE OF PERSON SUBMITTING REPORT  PRINTED NAME <b>ED BRZEZINSKI</b> AREA CODE <b>814</b> DAYTIME TELEPHONE NUMBER <b>392-5577</b>	

**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.		SIGNATURE OF CANDIDATE  PRINTED NAME <b>ED BRZEZINSKI</b> AREA CODE <b>814</b> DAYTIME TELEPHONE NUMBER <b>392-5577</b>	