

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.

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|---|--|--|--|---|------------------------------------|-----------------------------------|
| 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 ED BRZEZINSKI | | | | | | |
| STREET ADDRESS 324 West Arlington Rd | | | | | | |
| CITY ERIE | | STATE PA | | ZIP CODE 16509 | | |
| TYPE OF REPORT (CHECK ONE) | | NAME OF OFFICE SOUGHT BY CANDIDATE | | DISTRICT NO. | PARTY | DATE OF ELECTION |
| 1. 6TH TUESDAY PRE-PRIMARY | | City Council | | | Dem | MO. DAY YEAR 11 07 2023 |
| 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 <input checked="" type="checkbox"/> | | | | | | |
| 7. ANNUAL REPORT | | | | | | |
| | | DATES OF REPORTING PERIOD | | FOR OFFICE USE ONLY | | |
| | | MO. DAY YEAR 10 24 2023 TO 11 27 2023 | | 2023 DEC -6 PM 1:45 Erie County NOTICE REGISTRATION | | |
| | | 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 Candidate'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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|---|---|
| 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 TRUE, CORRECT AND COMPLETE. | |
| SWORN TO AND SUBSCRIBED BEFORE ME THIS <u>6</u> DAY OF <u>December</u> 20 <u>22</u> <u>Sue Sheffield</u> SIGNATURE MY COMMISSION EXPIRES <u>12-02-24</u> MO. DAY YR. | <u>Ed Brzezinski</u> SIGNATURE OF PERSON SUBMITTING REPORT <u>ED BRZEZINSKI</u> PRINTED NAME <u>814</u> <u>392-5577</u> AREA CODE DAYTIME TELEPHONE NUMBER |

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

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| 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 _____ AREA CODE DAYTIME TELEPHONE NUMBER _____ _____ |