

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 LYELL P COOK										
STREET ADDRESS 11391 EDINBORO RD										
CITY EDINBORO				STATE PA		ZIP CODE 16412-				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY	DATE OF ELECTION			
6TH TUESDAY PRE-PRIMARY		CORONER			-	REP	NO. DAY YEAR 11 5 2019			
2ND FRIDAY PRE-PRIMARY										
30 DAY POST-PRIMARY										
6TH TUESDAY PRE-ELECTION										
2ND FRIDAY PRE-ELECTION										
30 DAY POST-ELECTION										
ANNUAL REPORT										
		DATES OF REPORTING PERIOD			MO. DAY YEAR		MO. DAY YEAR		FOR OFFICE USE ONLY	
					5 7 19		TO 6 10 19			
		CASH BALANCE AT END OF REPORTING PERIOD:			\$					
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:			\$					
		AMENDMENT REPORT?			YES		NO	<input checked="" type="checkbox"/>		
		TERMINATION REPORT?			YES		NO	<input checked="" 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.

Commonwealth of Pennsylvania - Notary Seal Tonia Fernandez, Notary Public Erie County My commission expires April 3, 2023 Commission number 1288912 Member, Pennsylvania Association of Notaries	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	
	DAY OF June 20 19 Tonia Fernandez SIGNATURE MY COMMISSION EXPIRES 4-3-23 MO. DAY YR.	SIGNATURE OF PERSON SUBMITTING REPORT LYELL P COOK PRINTED NAME 814 452-2911 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	
DAY OF 20 SIGNATURE MY COMMISSION EXPIRES MO. DAY YR.	SIGNATURE OF CANDIDATE PRINTED NAME AREA CODE DAYTIME TELEPHONE NUMBER