## 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 OANOIDATI	L COMMITTEE 2 (100BB/151) 3.
	NAME OF FILING COMMITTEE,		ON BEHALF OF	S COMMITTEE CONTRACT
	STREET ADDRESS	o M Hores		
	(031 & 9t	st Apt A	·	
	Ene		STATE Da	ZIP CODE 16583 -
	TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE .	DISTRICT NO. PARTY	DATE OF SECTION
	OTHAUESDAY 1.	City Council		m 5 21 2019
	ZNDERIDAY  ZNDERIDAY  PRE-PRIMARY  30 DAY  COSTP-RIMARY	DATES OF REPORTING PERIOD 5 11 19 T	0 4 10 19	FOR OFFICE USE ONLY
	6rit Tiespay 4.	CASH BALANCE AT END OF REPORTING PERIOD:	<u>s_0.00</u>	
· ·	PRESENTING 5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABIL AT THE END OF REPORTING PER	ITIES \$ 6.00	
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Department of State Sureau of Commissions, Elections and Legislation 210 North Office Building Sureau of Commissions, PA 17120-0029 Sureau (717) 787-5280