

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	1.	COMMITTEE	2. <input checked="" type="checkbox"/>	LOBBYIST	3.	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Jason Gibbs										
STREET ADDRESS 9515 Babbitt Rd										
CITY Cranesville				STATE PA		ZIP CODE 16410 -				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.		PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY 1.		County Council			7		Rep		MO. DAY YEAR 5 21 2019	
2ND FRIDAY PRE-PRIMARY 2.										
30 DAY POST-PRIMARY 3. <input checked="" type="checkbox"/>										
6TH TUESDAY PRE-ELECTION 4.										
2ND FRIDAY PRE-ELECTION 5.										
30 DAY POST-ELECTION 6.										
ANNUAL REPORT 7.										

DATES OF REPORTING PERIOD			TO						
MO.	DAY	YEAR	MO.	DAY	YEAR				
5	10	2019	TO	6	20	2019			

CASH BALANCE AT END OF REPORTING PERIOD:		\$	0
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$	0

AMENDMENT REPORT?	YES		NO	
TERMINATION REPORT?	YES	<input checked="" type="checkbox"/>	NO	

FOR OFFICE USE ONLY	
2019 JUN 24 PM 3:37 KX	

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.

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 TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 24th DAY OF June 2019
 Kimberly S. Alexander
 SIGNATURE
 MY COMMISSION EXPIRES 10 31 2019
 MO. DAY YR.

NOTARIAL SEAL
 Kimberly S. Alexander, Notary Public
 City of Erie, Erie County
 My Commission Expires April 3, 2023
 My Commission number 1288912

Jennifer Gibbs
 SIGNATURE OF PERSON SUBMITTING REPORT
 PRINTED NAME
 844-4266
 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 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
 24th DAY OF June 2019
 Sonia Hernandez
 SIGNATURE
 MY COMMISSION EXPIRES 4-3-23
 MO. DAY YR.

NOTARIAL SEAL
 Sonia Hernandez, Notary Public
 Erie County
 My Commission Expires April 3, 2023
 My Commission number 1288912

Jason Gibbs
 SIGNATURE OF CANDIDATE
 PRINTED NAME
 449 9311
 DAYTIME TELEPHONE NUMBER