

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	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Committee to elect Robert Troutner</i>						
STREET ADDRESS <i>4683 Parkview Dr</i>						
CITY <i>Eric</i>		STATE <i>PA</i>		ZIP CODE <i>16570</i>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE <i>Haworth Township Supervisor</i>		DISTRICT NO.	PARTY <i>Dem</i>	DATE OF ELECTION
6TH TUESDAY PRE-PRIMARY	1.					MO. DAY YEAR <i>5 21 2019</i>
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 <i>5 7 2019</i>		MO. DAY YEAR <i>6 10 19</i>	

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

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

FOR OFFICE USE ONLY	
<i>10/20/19 PM 1:00</i>	

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.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS <i>13th</i> DAY OF <i>June</i> 20 <i>19</i> <i>Janice Fernandez</i> SIGNATURE MY COMMISSION EXPIRES <i>4-3-23</i> MO. DAY YR.	Signature of Person Submitting Report <i>Desiree Troutner</i> PRINTED NAME DESIREE TROUTNER AREA CODE <i>814</i> DAYTIME TELEPHONE NUMBER <i>882-9541</i>

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 <i>13th</i> DAY OF <i>June</i> 20 <i>19</i> <i>Janice Fernandez</i> SIGNATURE MY COMMISSION EXPIRES <i>4-3-23</i> MO. DAY YR.	Signature of Candidate <i>Robert Troutner</i> PRINTED NAME ROBERT TROUTNER AREA CODE <i>814</i> DAYTIME TELEPHONE NUMBER <i>922-1683</i>