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	COMMITTEE 2. LOBBYIST 3.
NAME OF FILING COMMITTEE, CANDI	DATE OR LOBBYIST	OR BERKET OF	
/ harles	Nelson 9+n (L		
STREET ADDRESS			
646 W	9-h St		
OITY		STATE	ZIP CODE
tric.		PA	16502 -
THE OF REPORT	ME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO. PARTY	DATE OF ELECTION
(CHECK ONE)	Lita Land		MO. DAY YEAR
6th tuesday	Laure.		FOR OFFICE USE ONLY
2.	DATES OF MO, DAY YEAR	MO. DAY YEAR	FOR OFFICE USE ONLY
2ND FRIDAY PRE-PRIMARY	DEDODTING C	10 00 01	1
	PERIOD 5 18 2 (10 (8 20	779.3
30 day S. Post-primary			Const. Const.
4.	CASH BALANCE AT END OF REPORTING PERIOD:	s ()	3 3 8
6TH TUESDAY PRE-ELECTION		4	entry () Services
5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILIT	IFS (
2ND FRIDAY PRE-BLECTION	AT THE END OF REPORTING PERIO		The second secon
30 DAY 6.			
POST-ELECTION	AMENDMENT YES	NO X	- A we desirate
7.	properties with a state of the		
REPORT	TERMINATION YES	NO X	
	AFFII	DAVIT SECTION	
ART I - statement is filed on I	schalf of a Political Committee or C	andidatas's Committee the	Tananan in talah kanal
statement is filed on t	pehalf of a <u>Political Committee <i>or</i> C</u> pehalf of a <u>Candidate</u> , the Candidat	e must sign here	rreasurer must sign nere.
statement is filed on t	pehalf of a Contributing Lobbyist, th	e Lobbyist must sign here.	
SWEAR (OR AFFIRM) THAT TH	E AGGREGATE RECEIPTS OR DISBURSEMENTS OR L	IABILITIES INCURRED DURING THE REPOR	RTING PERIOD INDICATED ABOVE DID NOT
	FTY DOLLARS (\$250.00) AND THIS REPORT IS, TO	THE BEST OF MY KNOWLEDGE AND BEL	IEF, TRUE, CORRECT AND COMPLETE.
SWORN TO AND SUBSC	RIBED BEFORE ME THIS		
DAY OF	20	SIGNATURE OF PER	ISON SUBMITTING REPORT
		Charles M	Je (son
	SIGNATURE	CL ()	TED NAME 20 - 9996
MY COMMISSION EXPIRE	MO. DAY YR.	AREA CODE D	AYTIME TELEPHONE NUMBER
			ATTIME TEEL HOME NUMBER
ART II -			
statement is filed on b	ehalf of a <u>Candidate's Authorized (</u>	<u>Committee</u> , Candidate must	sign here.
I SWEAR (OR AFFIRM) TH	AT TO THE BEST OF MY KNOWLEDGE AND BELIEF T	HIS POLITICAL COMMITTEE HAS NOT VIOL	ATED ANY REQUISIONS OF THE ACT OF
JUNE 3, 1937 (P.L. 13	33, No. 320) as amended.	THE POLITICAL COMMITTEE PAGENCY NO.	STED ANT PROVISIONS OF THE ACT OF
SWORN TO AND SUBSC	RIBED BEFORE ME THIS		
		SIGNATURI	E OF CANDIDATE
LIAY OF	20		
	SIGNATURE	PRIN	TED NAME
MY COMMISSION EXPIRE		ADEC COOL	
	MO DAY VO	AREA CODE DA	AYTIME TELEPHONE NUMBER



Pennsylvania Department of State

Name of Filing Committee Candidate or Labbuist

Bureau of Campaign Finance & Civic Engagement
210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports.** This form must be signed by hand where a signature is required.

Reporting Cycle Cycle 1	and Charles and Annual Control of the Annual	Cuolo 2			
	☐ Cycle 2	☐ Cycle 3		Cycle 4	☐ Cycle
6 th Tuesday	2 nd Friday	30 Day		uesday	2 nd Friday Pre-Election
Pre-Primary	Pre-Primary	Post Primary	Pre-E	lection	TTG-EIGCEION
☐ Cycle 6	☐ Cycle 7	☐ Cycle 8	<u> </u>		cle 9
30 Day Post-Election	-	-			
. 1	Annual Report	2 nd Friday Pre-Special Election 30 Da		30 Day Po	st-Special Election
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Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist	Date (DD/MM/YYYY)		
Printed Name	Location (City/State/Country)		