## CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* <u>did not exceed \$250.00</u> during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED	CANDIDATE	COMM	2.	LOBBYIST 3.
NAME OF FILING COMMITTEE, CA	NDIDATE OR LOBBYIST	ON BEHALF OF				
LYELL	. P COOK	····				
STREET ADDRESS	EDINBORO RD					
CITY	_	STATE O		ZIP CODE	· · · · · · · · · · · · · · · · · · ·	
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TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	SASOMA	Constitute Commensation	ELECTION
TH TUESDAY	CORONER		RE	2	) DA	2019
PRE-PRIMARY	MO DAY UYEAR	MO. DAY YEAR		i cyj	FOR OFFICE	USE ONLY
2ND FRIDAY 2. PRE-PRIMARY	DATES OF REPORTING PERIOD 10 ZZ 19	11 25 19	5		ن بي	21
30 day 3. Post-primary.					Š	<b>5</b>
6TH TUESDAY. 4.	OF REPORTING PERIOD:	\$ <u>U</u>				7019 DEC -
2ND FRIDAY 5. RRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILI AT THE END OF REPORTING PERI					-0 -2
30 DAY: POST-ELECTION	AMENDMENT YES REPORT?	NO X				. မှ သ
ANNUÁL REPORT	TERMINATION YES	NO X	•		y 1 sa	<b>(E)</b>
	AFFI	DAVIT SECTION				
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If statement is filed or if statement is filed or if statement is filed or	behalf of a <u>Political Committee</u> or Go behalf of a <u>Candidate</u> , the Candida behalf of a <u>Contributing Lobbyset</u> , the	candidates's Comm te must sign here. Te Lobbyist must si	gn here.			
If statement is filed or if statement is filed or if statement is filed or I SWEAR (OR AFFIRM) THAT EXCEED TWO HUNDRED AND	behalf of a Political Committee or Committee	te must sign here. Loby vist must sign here.	gn here.			
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