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 ON BEHALF OF	CANDIDATE X	COMMITTEE 2.	LOBBÝIST 3.
NAME OF FILING COMMITTEE, CANDIDA	TE OR LOBBYIST DIE X C		(
STREET ADDRESS	13 Nagle	2000	· · · · · · · · · · · · · · · · · · ·		
ERIE		STATE PA	ZIP CC	16510-	
TYPE OF REPORT (CHECK ONE)	E OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	DEM DEM	MO. DA	SLECTION YEAR 1 7 Z
6TH TUESDAY PRE-PRIMARY	- MO: DAY: YEAR	MO. DAY YEAR		FOR OFFICE	USE ONLY
2nd FRIDAY PRE-PRIMARY	DATES OF REPORTING PERIOD	0 12 31 24			
30 day Post-Primary	CASH BALANCE AT END OF REPORTING PERIOD:	s		S	202.
6TH TUESDAY PRE-ELECTION 2ND FRIDAY 5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABII	•			
PRE-ELECTION 5.	AT THE END OF REPORTING PE	RIOD: \$		topped for the second	<u>\(\tilde{\ti}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}</u>
POST-ELECTION ANNUAL REPORT	AMENDMENT YES REPORT? TERMINATION YES REPORT?	NO NO	·		යා ලා <u>ම</u>
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