

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	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST ED BRZCZINSKI									
STREET ADDRESS 326 West Ardington Rd									
CITY ERIE				STATE PA		ZIP CODE 16509 -			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		DATE OF ELECTION	
1. 6TH TUESDAY PRE-PRIMARY		ERIE City Controller				DEM		MO. DAY YEAR 65 20 2025	
2. 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/>		DATES OF REPORTING PERIOD			MO. DAY YEAR		FOR OFFICE USE ONLY		
3. 30 DAY POST-PRIMARY		MO. DAY YEAR			MO. DAY YEAR		2025 MAY -9 PM 2:06 ERIE COUNTY VOTER REGISTRATION		
4. 6TH TUESDAY PRE-ELECTION		03 11 25 TO			5 5 25				
5. 2ND FRIDAY PRE-ELECTION		CASH BALANCE AT END OF REPORTING PERIOD: \$ 0							
6. 30 DAY POST-ELECTION		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0							
7. ANNUAL REPORT		AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/> TERMINATION REPORT? YES NO <input checked="" type="checkbox"/>							

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	
9 DAY OF May 20 25	SIGNATURE OF PERSON SUBMITTING REPORT
Rauren E Thayer	ED BRZCZINSKI
MY COMMISSION EXPIRES 12-20-2028	PRINTED NAME
MO. DAY YR.	814 392 5577
	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 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	
9 DAY OF 20	SIGNATURE OF CANDIDATE
Rauren E Thayer	ED BRZCZINSKI
SIGNATURE	PRINTED NAME
MY COMMISSION EXPIRES	814 392 5577
MO. DAY YR.	DAYTIME TELEPHONE NUMBER