

## 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 <u>Denise M Buell</u>																							
STREET ADDRESS <u>19039 Hillcrest Dr</u>																							
CITY <u>Corry</u>				STATE <u>PA</u>		ZIP CODE <u>16407</u>																	
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE <u>magisterial District Judge</u>			DISTRICT NO. <u>9</u>		PARTY <u>Republican</u>		DATE OF ELECTION														
6TH TUESDAY PRE-PRIMARY		1.			MO.		DAY		YEAR														
2ND FRIDAY PRE-PRIMARY		2.			MO.		DAY		YEAR														
30 DAY POST-PRIMARY		3.			MO.		DAY		YEAR														
6TH TUESDAY PRE-ELECTION		4.			MO.		DAY		YEAR														
2ND FRIDAY PRE-ELECTION		5.			MO.		DAY		YEAR														
30 DAY POST-ELECTION		6.			MO.		DAY		YEAR														
ANNUAL REPORT		7. <input checked="" type="checkbox"/>			MO.		DAY		YEAR														
DATES OF REPORTING PERIOD					FOR OFFICE USE ONLY																		
<table border="1"> <tr> <td>MO.</td> <td>DAY</td> <td>YEAR</td> <td>TO</td> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>11</td> <td>28</td> <td>23</td> <td></td> <td>12</td> <td>31</td> <td>23</td> </tr> </table>					MO.	DAY	YEAR	TO	MO.	DAY	YEAR	11	28	23		12	31	23	<p>CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u></p> <p>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u></p>				
MO.	DAY	YEAR	TO	MO.	DAY	YEAR																	
11	28	23		12	31	23																	
<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td></td> <td>NO</td> <td></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td><input checked="" type="checkbox"/></td> <td>NO</td> <td></td> </tr> </table>					AMENDMENT REPORT?	YES		NO		TERMINATION REPORT?	YES	<input checked="" type="checkbox"/>	NO		<p>2024 JAN 30 AM 1:52</p> <p>ERIE COUNTY VOTER REGISTRATION</p>								
AMENDMENT REPORT?	YES		NO																				
TERMINATION REPORT?	YES	<input checked="" type="checkbox"/>	NO																				

## 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

30th DAY OF January 2024

Tamara Rodgers  
SIGNATURE

MY COMMISSION EXPIRES \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YR.

Denise M Buell  
SIGNATURE OF PERSON SUBMITTING REPORT

Denise M Buell  
PRINTED NAME

814 881-0437  
AREA CODE 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

\_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
SIGNATURE

MY COMMISSION EXPIRES \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YR.

\_\_\_\_\_  
SIGNATURE OF CANDIDATE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
AREA CODE DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal  
Tamara L. Rodgers - Notary Public  
Venango County  
My commission expires March 13, 2024  
Commission number 1267999  
Member, Pennsylvania Association of Notaries