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			<u></u>				RT FILED CHALF OF		ANDIDATE	×	COMMITTEE	2.	ОВВУІЅТ 3.	
NAME OF FILING COMM Rock Copel		NOIDATE OR LOSBYIST											· · · · · · · · · · · · · · · · · · ·	
street address 1336 Patters	on Av	е				•								
Erie					STATE PA					16508 ——				
TYPE OF REPO (CHECK ONE)		Erie County	•	ATE			OISTRICT NO	o. i	PARTY Dem		MO.	E OF EL		
6th tuesday PRE-PRIMARY	1.			1		<u>_</u>					11 FOR C	7 E	2020	
2nd FRIDAY PRE-PRIMARY	2.	DATES OF REPORTING PERIOD	11 28	2023		мо. і 2 3	1 202				2 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		5	
30 day Post-Primary	3.	CASU DALANCE AT END												
6th tuesday PRE-ELECTION	4.	CASH BALANCE AT END OF REPORTING PERIOD: \$ 0.00											4444	
2nd friday PRE-ELECTION	5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$												
30 day Post-election	6,	<u> </u>	AMENDMENT REPORT?	YES		NO							•	
ANNUAL REPORT	X		TERMINATION REPORT?	YES		NO								
				AF	FIDA	VIT S	ECTION	V			•			
r statement is t	iled o	n behalf of a <u>Po</u> n behalf of a <u>Ca</u> n behalf of a <u>Co</u>	andidate, the	e Candi	date r	nust s	ian here	ş		Treas	surer mus	st sign	here.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS SWORN TO AND SUBSCRIBED BEFORE ME THIS SIGNATURE MY COMMISSION EXPIRES AND DAY MO, DAY PART SIGNATURE MO, DAY PART SIGNATURE MO, DAY PART MO, DAY PART SIGNATURE MO, DAY PART MO, DAY PART MO, DAY PART PA						E BEST O	SIGNATURE OF PERSON SUBMITTING REPORT ROCK CAPITAL PRINTED NAME 400-2969 AREA CODE DAYTIME TELEPHONE NUMBER							
		n behalf of a <u>Ca</u>		젊 등	Ď	} ·								
JUNE 3, 193	7 (P.L.	1333, No. 320) As	AMENDED.	C AND BEE	<u></u>	FOLITICA	. COMMITTE	EE HA!	S NOT VIOL	ATED AN	ny provision	S OF THE	ACT OF	
SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY OF DAY OF							SIGNATURE OF CANDIDATE							
·		SIGNATURE				·····			PRINT	ED NAI	ME		·	
MY COMMISS	ION EXP	MO.	DAY YE	₹.		AR	EA CODE		DA	YTIME	TELEPHONE	NUMBER	<u></u>	