

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

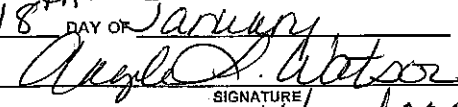
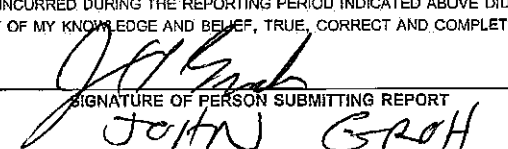
File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

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 JOHN GROH						
STREET ADDRESS 603 MONTRELIAN AVE						
CITY ETHE		STATE PA		ZIP CODE 16505-1526		
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT <input checked="" type="checkbox"/>		NAME OF OFFICE SOUGHT BY CANDIDATE TOWNSHIP AUDITOR		DISTRICT NO.	PARTY DEM	DATE OF ELECTION
						MO. DAY YEAR
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR 1 1 23 TO 12 31 23		FOR OFFICE USE ONLY <div style="text-align: center; border: 1px solid black; padding: 5px;"> 2024 JAN 18 PM 11:40 ERIE COUNTY VOTER REGISTRATION </div>		
		CASH BALANCE AT END OF REPORTING PERIOD: \$ 0 TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0				
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/> TERMINATION REPORT? YES <input checked="" type="checkbox"/> NO <input 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, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS 18th DAY OF January  SIGNATURE MY COMMISSION EXPIRES 12/02/2026 MO. DAY YR.	 SIGNATURE OF PERSON SUBMITTING REPORT JOHN GROH PRINTED NAME 814 449-7264 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