

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		1. <input checked="" type="checkbox"/> COMMITTEE		2. LOBBYIST		3.	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Charles Nelson</i>											
STREET ADDRESS <i>6416 W 9th St</i>											
CITY <i>Erie</i>				STATE <i>PA</i>				ZIP CODE <i>16502-1214</i>			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE				DISTRICT NO.		PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY		<i>City Controller</i>						<i>D</i>		MO. DAY YEAR <i>5 20 2025</i>	
2ND FRIDAY PRE-PRIMARY		DATES OF REPORTING PERIOD				MO. DAY YEAR		MO. DAY YEAR		FOR OFFICE USE ONLY	
30 DAY POST-PRIMARY		1 1 25 TO				5 5 25				ERIE COUNTY VOTER REGISTRATION MAY -8 PM 1:25	
6TH TUESDAY PRE-ELECTION		CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i>									
2ND FRIDAY PRE-ELECTION		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>									
30 DAY POST-ELECTION		AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/>									
ANNUAL REPORT		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

*8* DAY OF *May* 20 *25*

*Sue Sheffield*  
SIGNATURE

MY COMMISSION EXPIRES *12-02-2026*  
MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT

*Charles Nelson*  
PRINTED NAME

*814* *720-9996*  
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