

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.	COMMITTEE	X	LOBBYIST	3.
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST COMMITTEE TO ELECT CASIMIR J. "KAZ" KWITROWSKI								
STREET ADDRESS 4015 STANLEY AVE								
CITY ERIE			STATE PA.		ZIP CODE 16504-2405			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.		PARTY	
6TH TUESDAY PRE-PRIMARY 1.		CITY TREASURER						
2ND FRIDAY PRE-PRIMARY 2.								
30 DAY POST-PRIMARY 3.								
6TH TUESDAY PRE-ELECTION 4.								
2ND FRIDAY PRE-ELECTION 5.								
30 DAY POST-ELECTION 6. X								
ANNUAL REPORT 7.								
		DATES OF REPORTING PERIOD		MO. DAY YEAR		MO. DAY YEAR		DATE OF ELECTION
		10 26 19		11 25 19		11 05 19		
		CASH BALANCE AT END OF REPORTING PERIOD:		\$ 702.65				
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 195.05				
		AMENDMENT REPORT?		YES		NO		X
		TERMINATION REPORT?		YES		NO		X
								FOR OFFICE USE ONLY
								2019 DEC -5 PM 1:24 ERIE COUNTY VOTER REGISTRATION OR

**AFFIDAVIT SECTION**

**PART I -**  
 Statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 Statement is filed on behalf of a Candidate, the Candidate must sign here.  
 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  
 5th DAY OF December 20 19  
 Laurie Watson  
 SIGNATURE  
 MY COMMISSION EXPIRES 2-2-23  
 MO. DAY YR.

Mary Jean M. Kubitaki  
 SIGNATURE OF PERSON SUBMITTING REPORT  
 Mary Jean M. Kubitaki  
 PRINTED NAME  
 814 825-7601  
 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  
 5th DAY OF DECEMBER 20 19  
 Laurie Watson  
 SIGNATURE  
 MY COMMISSION EXPIRES 2-2-23  
 MO. DAY YR.

Casimir J. Kwitrowski  
 SIGNATURE OF CANDIDATE  
 CASIMIR J. KWITROWSKI  
 PRINTED NAME  
 814 825-7601  
 AREA CODE DAYTIME TELEPHONE NUMBER