

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 <b>DANIEL OUELLET</b>																			
STREET ADDRESS <b>3224 WEST 25<sup>th</sup> STREET</b>																			
CITY <b>ERIE</b>			STATE <b>PA</b>	ZIP CODE <b>16506 -</b>															
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY														
6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 30 DAY POST-PRIMARY <input type="checkbox"/> 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 30 DAY POST-ELECTION <input checked="" type="checkbox"/> ANNUAL REPORT <input type="checkbox"/>		<b>Millcreek Township Supervisor</b>			<b>R</b>														
		DATE OF ELECTION																	
		MO. DAY YEAR <b>11 5 2019</b>																	
		DATES OF REPORTING PERIOD <table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> <th>TO</th> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>10</td> <td>22</td> <td>19</td> <td></td> <td>11</td> <td>25</td> <td>19</td> </tr> </table>		MO.	DAY	YEAR	TO	MO.	DAY	YEAR	10	22	19		11	25	19	FOR OFFICE USE ONLY	
MO.	DAY	YEAR	TO	MO.	DAY	YEAR													
10	22	19		11	25	19													
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <b>&lt;2,000.00&gt;</b>		2019 DEC -4 PM 12:00 ERIE COUNTY VOTER REGISTRATION															
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <b>Ø</b>																	
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																	
		TERMINATION REPORT? YES <input type="checkbox"/> 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 20<sup>th</sup> DAY OF December 2019

Kimberly Ann Weber  
 SIGNATURE

MY COMMISSION EXPIRES 5 MO. 20 DAY 21 YR.

Daniel Ouellet  
 SIGNATURE OF PERSON SUBMITTING REPORT

Daniel Ouellet  
 PRINTED NAME

814 AREA CODE 823-5395 DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL  
 COMMONWEALTH OF PENNSYLVANIA  
 Kimberley Ann Weber, Notary Public  
 Fairview Twp., Erie County, PA  
 My Commission Expires May 22, 2021

**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