

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 Vanessa R. Belen																				
STREET ADDRESS 216 Chestnut St.																				
CITY Erie			STATE Pa		ZIP CODE 16507 -															
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION														
1. 0TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/> 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT		City Council			D															
		DATES OF REPORTING PERIOD		<table border="1"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td>3</td><td>5</td><td>19</td></tr> </table> TO <table border="1"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td>5</td><td>6</td><td>19</td></tr> </table>		MO.	DAY	YEAR	3	5	19	MO.	DAY	YEAR	5	6	19	FOR OFFICE USE ONLY		
MO.	DAY	YEAR																		
3	5	19																		
MO.	DAY	YEAR																		
5	6	19																		
		CASH BALANCE AT END OF REPORTING PERIOD:		\$ 100.00		ERIE COUNTY VOTER REGISTRATION 2019 MAY 10 PM 2:40 JTE														
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 100.00																
		AMENDMENT REPORT?		YES	NO															
		TERMINATION REPORT?		YES	NO															

**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  
 DAY OF May 2019  
 Signature: [Signature]  
 MY COMMISSION EXPIRES 4-3-23  
 MO. DAY YR.

Signature of Person Submitting Report: [Signature]  
 PRINTED NAME: Vanessa Belen  
 AREA CODE: 844 DAYTIME TELEPHONE NUMBER: 844-9932

I, [Signature], Secretary of the Pennsylvania Notary Public Commission expires April 1, 2023. Commission number 1288912. Erie County.

**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 \_\_\_\_\_