

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 | COMMITTEE <input checked="" type="checkbox"/> | LOBBYIST <input type="checkbox"/> | | | | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------------------------------|-----------------------------------|------|----|-----|-----|------|---|----|----|--|---|----|----|----------------------------------|--|
| NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST FRIENDS OF JOE GANKILGA | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS 9 E DIVISION ST | | | | | | | | | | | | | | | | | | | |
| CITY NDLAN EAST | | STATE PA | ZIP CODE 10438 - | | | | | | | | | | | | | | | | |
| TYPE OF REPORT (CHECK ONE) | | NAME OF OFFICE SOUGHT BY CANDIDATE COUNTY COUNCIL | | DISTRICT NO. 5 | PARTY REP | | | | | | | | | | | | | | |
| DATE OF ELECTION | | FOR OFFICE USE ONLY | | | | | | | | | | | | | | | | | |
| 1. 6TH 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 | | 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>4</td> <td>10</td> <td>19</td> <td></td> <td>5</td> <td>10</td> <td>19</td> </tr> </table> | | MO. | DAY | YEAR | TO | MO. | DAY | YEAR | 4 | 10 | 19 | | 5 | 10 | 19 | MO. DAY YEAR 5 21 2019 | |
| MO. | DAY | YEAR | TO | MO. | DAY | YEAR | | | | | | | | | | | | | |
| 4 | 10 | 19 | | 5 | 10 | 19 | | | | | | | | | | | | | |
| | | CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u> | | TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u> | | | | | | | | | | | | | | | |
| | | 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
13 DAY OF May 2019

Lana R. Wright
 Commonwealt of Pennsylvania - Notary Seal
 Lana R. Wright, Notary Public
 My COMMISSION EXPIRES Erie County
 My commission expires March 19, 2022
 Commission number 1182495

Elizabeth A. Gankilga
 SIGNATURE OF PERSON SUBMITTING REPORT
ELIZABETH A GANKILGA
 PRINTED NAME
814 490-5812
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

Member, Pennsylvania Association of Notaries

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
14th DAY OF May 2019

Tonia Fernandez
 SIGNATURE
 My COMMISSION EXPIRES 4-3-23
 MO. DAY YR.

Joseph R. Gankilga
 SIGNATURE OF CANDIDATE
Joseph R Gankilga
 PRINTED NAME
814 490-5813
 AREA CODE DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal
 Tonia Fernandez, Notary Public
 DSEB-503-17288
 Erie County
 My commission expires April 3, 2023
 Commission number 1288912
 Member, Pennsylvania Association of Notaries

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280