

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 ² <input type="checkbox"/>	LOBBYIST ³ <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Joseph E Sinnott</i>					
STREET ADDRESS <i>650 West 40th St.</i>					
CITY <i>Erie</i>		STATE <i>PA</i>	ZIP CODE <i>16509</i>		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION
1. 6TH TUESDAY PRE-PRIMARY <input checked="" type="checkbox"/>	<i>Judge of the Court of Common Pleas</i>		<i>025</i>	<i>Dem/Rep</i>	MO. <i>5</i> DAY <i>21</i> YEAR <i>19</i>
2. 2ND FRIDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		MO. DAY YEAR		FOR OFFICE USE ONLY
3. 30 DAY POST-PRIMARY	MO. DAY YEAR <i>1 1 19</i> TO <i>4 1 19</i>		MO. DAY YEAR		2019 APR - 5 AM 8:44 ERIE COUNTY VOTER REGISTRATION
4. 6TH TUESDAY PRE-ELECTION	CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i>		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>		
5. 2ND FRIDAY PRE-ELECTION	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
6. 30 DAY POST-ELECTION	ANNUAL REPORT				
7. ANNUAL REPORT					

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 *4th* DAY OF *April* 20*19*

Shellee DelleCurti
 Commonwealth of Pennsylvania-Notary Seal
 My Commission Expires *February 25, 2022*
 Commission No. *1186974*

Joseph E Sinnott
 SIGNATURE OF PERSON SUBMITTING REPORT
 PRINTED NAME
 AREA CODE *814* DAYTIME TELEPHONE NUMBER *874-3460 ext. 107*

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

 PRINTED NAME

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____