

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	LOBBYIST														
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST FRIENDS OF ROBERT YATES																				
STREET ADDRESS 1020 LINDEN AVE.																				
CITY ERIE		STATE PA		ZIP CODE 16505																
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION														
<input type="checkbox"/> 1. POLITICAL COMMITTEE <input type="checkbox"/> 2. CANDIDATE <input type="checkbox"/> 3. CONTRIBUTING LOBBYIST <input type="checkbox"/> 4. POLITICAL PARTY <input type="checkbox"/> 5. POLITICAL PARTY <input type="checkbox"/> 6. POLITICAL PARTY <input type="checkbox"/> 7. ANNUAL REPORT		ERIE COUNTY COUNCIL		1	R															
		DATES OF REPORTING PERIOD		<table border="1"> <tr> <td>MO.</td> <td>DAY</td> <td>YEAR</td> <td>TO</td> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td>02</td> <td>22</td> <td>19</td> <td></td> <td>05</td> <td>06</td> <td>2019</td> </tr> </table>		MO.	DAY	YEAR	TO	MO.	DAY	YEAR	02	22	19		05	06	2019	FOR OFFICE USE ONLY
MO.	DAY	YEAR	TO	MO.	DAY	YEAR														
02	22	19		05	06	2019														
		CASH BALANCE AT END OF REPORTING PERIOD:		<table border="1"> <tr> <td>\$</td> <td>591.51</td> </tr> <tr> <td></td> <td>446.11</td> </tr> </table>		\$	591.51		446.11	19 MAY - 7 11:11 AM ERIE COUNTY VOTER REGISTRATION										
\$	591.51																			
	446.11																			
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		<table border="1"> <tr> <td>\$</td> <td>0</td> </tr> </table>		\$	0													
\$	0																			
		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
 7th DAY OF May 20
 Sanio Hernandez SIGNATURE
 MY COMMISSION EXPIRES 4-3-23 MO. DAY YR.

Notary Public
 Notary Public
 Commission expires April 3, 2023
 Commission number 1288912

Robert Yates SIGNATURE OF PERSON SUBMITTING REPORT
 ROBERT J. YATES PRINTED NAME
 814 AREA CODE
 449-7750 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
 _____ DAY OF _____ 20____
 _____ SIGNATURE
 MY COMMISSION EXPIRES _____ MO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER