

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 Genevieve Mattern						
STREET ADDRESS 1002 Northgate Drive						
CITY Erie		STATE PA	ZIP CODE 16505 -			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE Millcreek Township School Board	DISTRICT NO.	PARTY	DATE OF ELECTION		
				NO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY	1.			5	17	2021
2ND FRIDAY PRE-PRIMARY	2. <input checked="" type="checkbox"/>					
30 DAY POST-PRIMARY	3.					
6TH TUESDAY PRE-ELECTION	4.					
2ND FRIDAY PRE-ELECTION	5.					
30 DAY POST-ELECTION	6.					
ANNUAL REPORT	7.					

DATES OF REPORTING PERIOD <table style="width:100%;"> <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>1</td><td>1</td><td>21</td> <td></td> <td>5</td><td>3</td><td>21</td> </tr> </table>	MO.	DAY	YEAR	TO	MO.	DAY	YEAR	1	1	21		5	3	21	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>	FOR OFFICE USE ONLY 2021 MAY -6 PM 12:18 ERIE COUNTY VOTER REGISTRATION
MO.	DAY	YEAR	TO	MO.	DAY	YEAR										
1	1	21		5	3	21										
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 <u>10th</u> DAY OF <u>May</u> , 20 <u>21</u> <u>Donia Fernandez</u> SIGNATURE MY COMMISSION EXPIRES <u>4-3-23</u> MO. DAY YR.	Notary Public Erie County My commission expires April 3, 2023 My commission number 1288912	SIGNATURE OF PERSON SUBMITTING REPORT <u>Genevieve Mattern</u> PRINTED NAME <u>Genevieve Mattern</u> AREA CODE <u>330</u> DAYTIME TELEPHONE NUMBER <u>718-2204</u>	

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 _____	