

LATE CONTRIBUTIONS – 24 HOUR REPORT

Name of Filing Committee or Candidate <i>Committee for Elect Ed Brzezinski</i>	Filer Identification Number
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		DATE RECEIVED		
Full Name of Contributor		MO	DAY	YEAR
<i>THOMAS HAGEN</i>		<i>Oct</i>	<i>25</i>	<i>2019</i>
Mailing Address		Amount \$ <i>500.⁰⁰</i>		
City	State	Zip Code (Plus 4)		
<i>ERIE</i>	<i>PA</i>	<i>16511</i>		
Full Name of Contributor		MO	DAY	YEAR
Mailing Address		Amount \$		
City	State	Zip Code (Plus 4)		
Full Name of Contributor		MO	DAY	YEAR
Mailing Address		Amount \$		
City	State	Zip Code (Plus 4)		
Full Name of Contributor		MO	DAY	YEAR
Mailing Address		Amount \$		
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Mailing Address		Amount \$		
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Mailing Address		Amount \$		
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Full Name of Contributor		MO	DAY	YEAR
Mailing Address		Amount \$		
City	State	Zip Code (Plus 4)		
Full Name of Contributor		MO	DAY	YEAR
Mailing Address		Amount \$		
City	State	Zip Code (Plus 4)		

2019 OCT 25 10:10 AM
 ERIE COUNTY
 VOTER REGISTRATION

Name of Person Submitting Report: *Ed Brzezinski* Date of Report: *10/25/2019*
 Contact Phone Number: *814-392-5577*
 Email Address: *ebrzezinski@eriest.org*