

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	23-3710783			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 Kim Clear - Committee to Elect Kim Clear									
STREET ADDRESS 6060 Briar Dr.									
CITY Erie				STATE PA	ZIP CODE 16506 -				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY	DATE OF ELECTION			
	County Council			1	D	MO.	DAY	YEAR	
6TH TUESDAY PRE-PRIMARY	1.						11	05	2019
2ND FRIDAY PRE-PRIMARY	2.								
30 DAY POST-PRIMARY	3.								
6TH TUESDAY PRE-ELECTION	4.								
2ND FRIDAY PRE-ELECTION	5. <input checked="" type="checkbox"/>								
30 DAY POST-ELECTION	6.								
ANNUAL REPORT	7.								
DATES OF REPORTING PERIOD		MO.	DAY	YEAR	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
		6	11	19	10	21	19	2019 OCT 25 PM 2:14 ERIE COUNTY VOTER REGISTRATION	
CASH BALANCE AT END OF REPORTING PERIOD:				\$	0				
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:				\$	0				
AMENDMENT REPORT?		YES		NO	<input checked="" type="checkbox"/>				
TERMINATION REPORT?		YES		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
 25th DAY OF October 2019

 SIGNATURE

MY COMMISSION EXPIRES 07 31 2023
 MO. DAY YR.

 SIGNATURE OF PERSON SUBMITTING REPORT

Kimberly Clear
 PRINTED NAME

814 881-9270
 AREA CODE DAYTIME TELEPHONE NUMBER

Member of Pennsylvania Association of Notaries
 My Commission expires July 31, 2023
 Commission number 1292344
 Erie County
 Nicole Inan, Notary Public
 Commonwealth of Pennsylvania - Notary Seal

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