

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 Kyle Foust						
STREET ADDRESS 4376 Depot Road						
CITY Erie		STATE PA	ZIP CODE 16510			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION		
				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	TO	MO.	DAY	YEAR
	05	06	19		10	21	19

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"/>

FOR OFFICE USE ONLY

2019 OCT 25 PM 1:00
 ERIE COUNTY
 VOTER REGISTRATION
 TP

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 TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 10th DAY OF October 2019

Tonia Fernandez SIGNATURE
 MY COMMISSION EXPIRES 4-3-23 MO. DAY YR.

Kyle Foust SIGNATURE OF PERSON SUBMITTING REPORT
 PRINTED NAME
814 AREA CODE 218-3407 DAYTIME TELEPHONE NUMBER

Notary Public
 Tonia Fernandez, Notary Public
 Erie County
 My commission expires April 3, 2023
 Commission number 12889

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.

Kyle SIGNATURE OF CANDIDATE
 PRINTED NAME
 _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER