

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 <i>Mary B Rennie</i>						
STREET ADDRESS <i>3831 Effort Rd</i>						
CITY <i>Erie</i>			STATE <i>Pa</i>	ZIP CODE <i>16508</i>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION
6TH TUESDAY PRE-PRIMARY 1.		<i>Erie County Council</i>		<i>3</i>	<i>Democrat</i>	MO. DAY YEAR <i>11 05 2019</i>
2ND FRIDAY PRE-PRIMARY 2.		DATES OF REPORTING PERIOD		MO. DAY YEAR	FOR OFFICE USE ONLY	
30 DAY POST-PRIMARY 3.		MO. DAY YEAR		MO. DAY YEAR	OCT 25 PM 9:04 ERIE COUNTY VOTER REGISTRATION 	
6TH TUESDAY PRE-ELECTION 4.		<i>06 11 19</i>		<i>10 21 19</i>		
2ND FRIDAY PRE-ELECTION 5.		CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i>		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>		
30 DAY POST-ELECTION 6.		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
ANNUAL REPORT 7.						

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 23 DAY OF NOVEMBER 2019 AT Washington, Erie County PENNSYLVANIA

[Signature]
 Diane R. Fulton, Notary Public
 My Commission Expires Jan. 16, 2021
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Mary B. Rennie
 SIGNATURE OF PERSON SUBMITTING REPORT
Mary B. Rennie
 PRINTED NAME
 814 504 2802
 AREA CODE 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

 SIGNATURE OF CANDIDATE

 PRINTED NAME

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____

 AREA CODE

 DAYTIME TELEPHONE NUMBER