

# 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 type="checkbox"/>	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <input type="checkbox"/>														
NAME OF FILING COMMITTEE, CANDIDATE, OR LOBBYIST <i>Committee to Elect Stephen Franklin</i>																		
STREET ADDRESS <i>636 Ohio St</i>																		
CITY <i>Erie</i>	STATE <i>PA</i>	ZIP CODE <i>16505-</i>																
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT <input checked="" type="checkbox"/>	NAME OF OFFICE SOUGHT BY CANDIDATE <i>Mayor</i>		DISTRICT NO.	PARTY <i>Democrat</i>	DATE OF ELECTION													
	DATES OF REPORTING PERIOD <table border="1" style="display: inline-table; margin-right: 10px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>6</td><td>12</td><td>17</td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>10</td><td>10</td><td>17</td></tr> </table>		MO.	DAY	YEAR	6	12	17	MO.	DAY	YEAR	10	10	17			FOR OFFICE USE ONLY ERIE COUNTY VOTER REGISTRATION OCT 24 PM 3:18 TR	
	MO.	DAY	YEAR															
	6	12	17															
	MO.	DAY	YEAR															
	10	10	17															
	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>																		
AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>																		
TERMINATION REPORT? YES <input checked="" type="checkbox"/> NO <input 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.

**NOTARIAL SEAL**  
 JESSICA ROGA, NOTARY PUBLIC  
 ERIE, ERIE COUNTY, PENNSYLVANIA  
 MY COMMISSION EXPIRES OCT 1, 2019

I (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

10 DAY OF October 2017

*James J. [Signature]*  
 SIGNATURE

COMMISSION EXPIRES 10 03 19  
 MO. DAY YR.

*Christine L. [Signature]*  
 SIGNATURE OF PERSON SUBMITTING REPORT

PRINTED NAME  
*Christine L. [Name]*

814 460-4317  
 AREA CODE DAYTIME TELEPHONE NUMBER

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