

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
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST KENNETH J. GAMBLE					
STREET ADDRESS 947 W. 32nd ST.					
CITY ERIE		STATE PA	ZIP CODE 16508 -		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY
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 <input checked="" type="checkbox"/> 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT		ERIE COUNTY CLERK OF RECORDS		Erie County	DEM.
		DATE OF ELECTION MO. DAY YEAR 11 07 2017			
		DATES OF REPORTING PERIOD MO. DAY YEAR to MO. DAY YEAR 06 05 2017 to 10 23 2017		FOR OFFICE USE ONLY 2017 OCT 27 PM 4:07 ERIE COUNTY VOTER REGISTRATION	
		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 checked="" type="checkbox"/>			
		TERMINATION REPORT? YES <input type="checkbox"/> 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 2017

Tracey D. Hodapp
SIGNATURE

MY COMMISSION EXPIRES July 19, 2021
MO. DAY YR.

Kenneth J. Gamble
SIGNATURE OF PERSON SUBMITTING REPORT

KENNETH J. GAMBLE
PRINTED NAME

814 450-2707
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

MY COMMISSION EXPIRES _____
MO. DAY YR.

SIGNATURE OF CANDIDATE

PRINTED NAME

AREA CODE DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal
 Tracey D. Hodapp, Notary Public
 Erie County
 My commission expires July 19, 2021
 Commission number 1317243