

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 <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST MICHAEL KEYS						
STREET ADDRESS 3612 REED STREET						
CITY ERIE		STATE PA	ZIP CODE 16504-			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE CITY COUNCIL -		DISTRICT NO. 25	PARTY DEM		
	DATE OF ELECTION		MO. DAY YEAR 11 07 17			
	DATES OF REPORTING PERIOD		MO. DAY YEAR TO MO. DAY YEAR 10 23 17			
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>00</u>		FOR OFFICE USE ONLY 2017 NOV -2 PM 1:13 KA ERIE COUNTY VOTER REGISTRATION			
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>60</u>					
	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>					
	TERMINATION REPORT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>					
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						

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
2nd DAY OF November 2017

Kimberly Alexander
 SIGNATURE

MY COMMISSION EXPIRES 10 31 2019
 MO. DAY YR.

NOTARIAL SEAL
 Kimberly S. Alexander, Notary Public
 City of Erie, Erie County
 My Commission Expires 03/31/2019
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

MICHAEL D KEYS
 SIGNATURE OF PERSON SUBMITTING REPORT

MICHAEL D KEYS
 PRINTED NAME

814 873-1202
 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