

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 KAREN KIRLEY						
STREET ADDRESS 322 EAST 9TH ST						
CITY ERIE		STATE PA	ZIP CODE 16503 -			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION	
	JUDGE of ELECTIONS		2-1	REPUBLICAN	MO. 11	DAY 07 YEAR 2017
1. 6TH TUESDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		TO		FOR OFFICE USE ONLY 2017 OCT 27 PM 2:50 ERIE COUNTY VOTER REGISTRATION	
2. 2ND FRIDAY PRE-PRIMARY	MO. DAY YEAR		MO. DAY YEAR			
3. 30 DAY POST-PRIMARY	CASH BALANCE AT END OF REPORTING PERIOD: \$		-0-			
4. 6TH TUESDAY PRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$		-0-			
5. 2ND FRIDAY PRE-ELECTION <input checked="" type="checkbox"/>	AMENDMENT REPORT?		YES	NO <input checked="" type="checkbox"/>		
6. 30 DAY POST-ELECTION	TERMINATION REPORT?		YES <input checked="" type="checkbox"/>	NO		
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, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS	27	DAY OF	October	20	<i>Karen Kirley</i>	SIGNATURE OF PERSON SUBMITTING REPORT
					KAREN KIRLEY	PRINTED NAME
SIGNATURE	<i>Dania Wilt</i>				84	2184778
MY COMMISSION EXPIRES	4-3-19	MO.	DAY	YR.	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 OF CANDIDATE
					_____	PRINTED NAME
SIGNATURE	_____				_____	DAYTIME TELEPHONE NUMBER
MY COMMISSION EXPIRES	_____	MO.	DAY	YR.	AREA CODE	DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation
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