

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 <i>KATHY DAHRKEMPER</i>																															
STREET ADDRESS <i>108 MYRTLE ST</i>																															
CITY <i>ERIE</i>		STATE <i>PA</i>	ZIP CODE <i>16507</i>																												
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY																											
	DATE OF ELECTION		DATE OF ELECTION		DATE OF ELECTION																										
	6TH TUESDAY PRE-PRIMARY		6TH TUESDAY PRE-PRIMARY		6TH TUESDAY PRE-PRIMARY																										
	2ND FRIDAY PRE-PRIMARY		2ND FRIDAY PRE-PRIMARY		2ND FRIDAY PRE-PRIMARY																										
	30 DAY POST-PRIMARY		30 DAY POST-PRIMARY		30 DAY POST-PRIMARY																										
	6TH TUESDAY PRE-ELECTION		6TH TUESDAY PRE-ELECTION		6TH TUESDAY PRE-ELECTION																										
	2ND FRIDAY PRE-ELECTION		2ND FRIDAY PRE-ELECTION		2ND FRIDAY PRE-ELECTION																										
30 DAY POST-ELECTION		30 DAY POST-ELECTION		30 DAY POST-ELECTION																											
ANNUAL REPORT		ANNUAL REPORT		ANNUAL REPORT																											
<table border="1"> <tr> <th colspan="3">DATES OF REPORTING PERIOD</th> <th colspan="3">TO</th> </tr> <tr> <td>MO.</td><td>DAY</td><td>YEAR</td> <td>MO.</td><td>DAY</td><td>YEAR</td> </tr> <tr> <td>1</td><td>1</td><td>18</td> <td>12</td><td>31</td><td>18</td> </tr> </table>		DATES OF REPORTING PERIOD			TO			MO.	DAY	YEAR	MO.	DAY	YEAR	1	1	18	12	31	18	<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> </tr> </table>		AMENDMENT REPORT?	YES	NO	TERMINATION REPORT?	YES	NO	<p>CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>8,141.37</u></p> <p>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u></p>		<p>FOR OFFICE USE ONLY</p> <p>2019 JAN 30 PM 3:02</p> <p>ERIE COUNTY VOTER REGISTRATION</p>	
DATES OF REPORTING PERIOD			TO																												
MO.	DAY	YEAR	MO.	DAY	YEAR																										
1	1	18	12	31	18																										
AMENDMENT REPORT?	YES	NO																													
TERMINATION REPORT?	YES	NO																													

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
30th DAY OF January 2019

Tonia Wilt
 SIGNATURE

Kathy Dahrkemper
 SIGNATURE OF PERSON SUBMITTING REPORT

KATHY DAHRKEMPER
 PRINTED NAME

818 AREA CODE *392 0827* DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL COMMISSION EXPIRES 4-3-19
 Tonia Wilt, Notary Public
 City of Erie, Erie County
 My Commission Expires April 3, 2019

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