

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 <b>Brian P. McGrath</b>						
STREET ADDRESS <b>4008 Commodore Dr.</b>						
CITY <b>Erie</b>	STATE <b>PA</b>	ZIP CODE <b>16505</b>				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <b>Millcreek Supervisor (retired)</b>	DISTRICT NO.	PARTY <b>Dem.</b>	DATE OF ELECTION		
				MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY <input type="checkbox"/>				<b>11</b>	<b>8</b>	<b>2011</b>
2ND FRIDAY PRE-PRIMARY <input type="checkbox"/>						
30 DAY POST-PRIMARY <input type="checkbox"/>						
6TH TUESDAY PRE-ELECTION <input type="checkbox"/>						
2ND FRIDAY PRE-ELECTION <input type="checkbox"/>						
30 DAY POST-ELECTION <input type="checkbox"/>						
ANNUAL REPORT <input checked="" type="checkbox"/>						
DATES OF REPORTING PERIOD		NO. DAY YEAR		NO. DAY YEAR		
		<b>1 1 18</b>		<b>12 31 18</b>		
CASH BALANCE AT END OF REPORTING PERIOD:		\$		<b>0</b>		
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$		<b>0</b>		
AMENDMENT REPORT?	YES		NO			
TERMINATION REPORT?	YES	<input checked="" type="checkbox"/>	NO			
FOR OFFICE USE ONLY						
2019 JAN 23 AM 11:00 ERIE COUNTY VOTER REGISTRATION						

**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

**22** DAY OF **Jan.** 20**19**

*Gabriella Petric*  
 SIGNATURE **Gabriella Petric**

MY COMMISSION EXPIRES **June 19, 2021**  
 MO. DAY YR.

*Brian P. McGrath*  
 SIGNATURE OF PERSON SUBMITTING REPORT

**Brian P. McGrath**  
 PRINTED NAME

**814** **873-0006**  
 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