

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>JIM WINARSKI</b>								
STREET ADDRESS <b>1140 E. 31 ST.</b>								
CITY <b>ERIE</b>			STATE <b>PA</b>		ZIP CODE <b>16584</b>			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY			
	ERIE City Council							
	DATE OF ELECTION			FOR OFFICE USE ONLY				
	MO. DAY YEAR			2019 FEB - 1 PM 3:14 Kae				
	11 07 2017							
	DATES OF REPORTING PERIOD							
	NO. DAY YEAR TO NO. DAY YEAR			01 01 18 TO 12 31 18				
6TH TUESDAY PRE-PRIMARY	CASH BALANCE AT END OF REPORTING PERIOD:			\$ 0				
2ND FRIDAY PRE-PRIMARY	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:			\$ 0				
30 DAY POST-PRIMARY	AMENDMENT REPORT?			YES	NO	<input checked="" type="checkbox"/>		
6TH TUESDAY PRE-ELECTION	TERMINATION REPORT?			YES	NO	<input checked="" type="checkbox"/>		
2ND FRIDAY PRE-ELECTION								
30 DAY POST-ELECTION								
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  
 30<sup>th</sup> DAY OF January 2019  
Laurie A Watson  
 SIGNATURE  
 MY COMMISSION EXPIRES 2-2-19  
 MO. DAY YR.

James F. Winarski  
 SIGNATURE OF PERSON SUBMITTING REPORT  
**JAMES F WINARSKI**  
 PRINTED NAME  
814 806-7228  
 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  
 30<sup>th</sup> DAY OF January 2019  
Laurie A Watson  
 SIGNATURE  
 MY COMMISSION EXPIRES 2-2-19  
 MO. DAY YR.

James F. Winarski  
 SIGNATURE OF CANDIDATE  
**JAMES F. WINARSKI**  
 PRINTED NAME  
814 806-7228  
 AREA CODE DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation  
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

E-mailed on time