

**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	1	COMMITTEE	2	LOBBYIST	3
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>FRIENDS OF MEIVIN WITHERSPOON</i>							
STREET ADDRESS <i>PO Box 1171</i>							
CITY <i>EME</i>		STATE <i>PA</i>		ZIP CODE <i>16512 -</i>			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		DATE OF ELECTION	
	<i>City Council</i>					MO.	DAY
1. 6TH TUESDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		MO.	DAY	YEAR	FOR OFFICE USE ONLY	
2. 2ND FRIDAY PRE-PRIMARY			<i>1</i>	<i>1</i>	<i>18</i>	TO	
3. 30 DAY POST-PRIMARY			<i>12</i>	<i>31</i>	<i>18</i>		
4. 6TH TUESDAY PRE-ELECTION	CASH BALANCE AT END OF REPORTING PERIOD:				\$ <i>54.82</i>		
5. 2ND FRIDAY PRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:				\$ <i>0</i>		
6. 30 DAY POST-ELECTION	AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>		
7. ANNUAL REPORT	TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>		

2019 FEB - 1 PM 12:03  
 ERIE COUNTY  
 VOTER REGISTRATION

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**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  
*1st* DAY OF *February* 20 *19*

*Kimberly S Alexander*  
 SIGNATURE  
 MY COMMISSION EXPIRES *10 31 2019*  
 MO. DAY YR.

*Sonya L Adams*  
 SIGNATURE OF PERSON SUBMITTING REPORT  
 SONYA L. ADAMS  
 PRINTED NAME  
*814 218-8557*  
 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  
*1st* DAY OF *February* 20 *19*

*Kimberly S Alexander*  
 SIGNATURE  
 MY COMMISSION EXPIRES *10 31 2019*  
 MO. DAY YR.

*Meivin Witherspoon*  
 SIGNATURE OF CANDIDATE  
 MEIVIN WITHERSPOON  
 PRINTED NAME  
*814 746-6851*  
 AREA CODE DAYTIME TELEPHONE NUMBER

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