

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: N/A		Report Filed By: CANDIDATE <input checked="" type="checkbox"/> COMMITTEE <input type="checkbox"/> LOBBYIST <input type="checkbox"/>	
Name of Filing Committee, Candidate or Lobbyist: DAVID BRENNAN			
Street Address: 3407 GLENSIDE AVENUE			
City: ERIE		State: PA	Zip Code: 16508-2956
TYPE OF REPORT (place X to the right of report type)	1. 4TH TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST PRIMARY
	4. 4TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST ELECTION
	7. ANNUAL REPORT <input checked="" type="checkbox"/>	YEAR: 2019	FILING METHOD: <input checked="" type="checkbox"/> PAPER <input type="checkbox"/> DISKETTE
Name of Office Sought by Candidate: ERIE CITY COUNCIL		DATE OF ELECTION MO. DAY YEAR 11 5 2013	District Number: ERIE CITY COUNCIL Office Code: CITY COUNCIL Party Code: DEM County Code: ERIE <small>(SEE INSTRUCTIONS FOR CODES)</small>
Summary of Receipts and Expenditures from: 1/1/2019 To 12/31/2019		FOR OFFICE USE ONLY	
A. Amount Brought Forward From Last Report	\$	N/A	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0	
C. Total Funds Available (Sum of Lines A and B)	\$	0	
D. Total Expenditures (From Schedule III)	\$	0	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	N/A	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	N/A	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	5.97	

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this **28TH** day of **JANUARY** 20 **20**

Gregory J. Kern
 Gregory J. Kern, Notary Public
 My commission expires **10/26/2022**
 Commission number 1084295

David Brennan
 Signature of Person Submitting Report
DAVID BRENNAN
 Printed Name
(814) 459-7937
 Area Code Daytime Telephone Number

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall 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 _____

SCHEDULE IV
Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number:	DAVID BRENNAN	1/1/2019 - 12/31/2019
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Name of Creditor		DAVID BRENNAN				Outstanding Balance of Debt	
House #	Street Address	3407 GLENSIDE AVENUE		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
				VARIOUS			
City		State	Zip Code	16508		5.97	
ERIE		PA					
Description of Debt VARIOUS CAMPAIGN EXPENSES INCURRED IN 2011 AND 2012, NET OF REPAYMENTS IN 2013-2015.							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State	Zip Code				
Description of Debt							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State	Zip Code				
Description of Debt							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State	Zip Code				
Description of Debt							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State	Zip Code				
Description of Debt							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State	Zip Code				
Description of Debt							