

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 1.	COMMITTEE 2. <input checked="" type="checkbox"/>	LOBBYIST 3. <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF 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	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>
	4. 6TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>
	7. ANNUAL REPORT	<input checked="" type="checkbox"/>	YEAR: 2019	FILING METHOD: <input checked="" type="checkbox"/> CHECK ONE	PAPER	<input checked="" type="checkbox"/>	DISKETTE

Name of Office Sought by Candidate: ERIE CITY COUNCIL	DATE OF ELECTION MO: 11 DAY: 5 YEAR: 2013	District Number ERIE CITY COUNCIL	Office Code CITY COUNCIL	Party Code DEM	County Code ERIE
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(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO: 1 DAY: 1 YEAR: 2019	To	MO: 12 DAY: 31 YEAR: 2019	FOR OFFICE USE ONLY 2020 JAN 31 AM 10:23
	A. Amount Brought Forward From Last Report	\$	51.37	
	B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0	
	C. Total Funds Available (Sum of Lines A and B)	\$	51.37	
	D. Total Expenditures (From Schedule III)	\$	0	
	E. Ending Cash Balance (Subtract Line D from Line C)	\$	51.37	
	F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
	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

David M. Pianta
Signature of Person Submitting Report
DAVID M. PIANTA
Printed Name
(814) 392-0216
Area Code Daytime Telephone Number

Gregory J. Kern
Commonwealth of Pennsylvania - Notary Seal
Gregory J. Kern, Notary Public
Erie County
My commission expires October 26, 2022
Commission number 1064255

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 28TH day of JANUARY 20 20

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

Gregory J. Kern
Commonwealth of Pennsylvania - Notary Seal
Gregory J. Kern, Notary Public
Erie County
My commission expires October 26, 2022
Commission number 1064255

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number	FRIENDS OF DAVID BRENNAN	1/1/2019 - 12/31/2019
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period	(1)	\$ 0.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$
Total for the reporting period	(2)	\$ 0.00
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$
Total for the reporting period	(3)	\$ 0.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$ 0.00
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$ 0.00

SCHEDULE II
PART F
In-Kind Contributions Received
VALUE OF \$50.01 TO \$250

Filer Identification Number:	FRIENDS OF DAVID BRENNAN	1/1/2019 - 12/31/2019
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Full Name of Contributor					Date [MM/DD/YYYY]	\$	0.00	
House #	Street Address					Date [MM/DD/YYYY]	\$	
City			State	Zip Code			Date [MM/DD/YYYY]	\$
Description of Contribution								
Full Name of Contributor					Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$	
City			State	Zip Code			Date [MM/DD/YYYY]	\$
Description of Contribution								
Full Name of Contributor					Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$	
City			State	Zip Code			Date [MM/DD/YYYY]	\$
Description of Contribution								
Full Name of Contributor					Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$	
City			State	Zip Code			Date [MM/DD/YYYY]	\$
Description of Contribution								

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	FRIENDS OF DAVID BRENNAN	1/1/2019 - 12/31/2019
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To Whom Paid					Date [MM/DD/YYYY]	\$	0.00
House #	Street Address				Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #	Street Address				Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #	Street Address				Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #	Street Address				Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #	Street Address				Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #	Street Address				Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #	Street Address				Description of Expenditure		
City		State		Zip Code			

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:	FRIENDS OF 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]		\$	5.97
				VARIOUS			
City		ERIE	State	PA	Zip Code	16508	
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							