

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 CASIMIR J KWITOWSKI						
STREET ADDRESS 4015 STANLEY AVE.						
CITY ERIE		STATE PA	ZIP CODE 16504 -			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY		DATE OF ELECTION	
	6TH TUESDAY PRE-PRIMARY	CITY TREASURER - ERIE PA.			MO. DAY YEAR	
	2ND FRIDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
	30 DAY POST-PRIMARY	MO. DAY YEAR	TO	MO. DAY YEAR	<p style="writing-mode: vertical-rl; transform: rotate(180deg);"> 2020 JAN 30 AM 10:07 NOTARY PUBLIC LAURIE A WATSON </p>	
	6TH TUESDAY PRE-ELECTION	1 1 19		12 31 19		
	2ND FRIDAY PRE-ELECTION	CASH BALANCE AT END OF REPORTING PERIOD: \$ (195.05)				
	30 DAY POST-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 195.05				
ANNUAL REPORT <input checked="" type="checkbox"/>	AMENDMENT REPORT?		YES	NO <input checked="" type="checkbox"/>		
	TERMINATION REPORT?		YES	NO <input checked="" type="checkbox"/>		

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
28th DAY OF **JANUARY** 20**20**

Laurie A Watson
 SIGNATURE

MY COMMISSION EXPIRES **2-2-2021**
 MO. DAY YR.

Casimir J. Kwitowski
 SIGNATURE OF PERSON SUBMITTING REPORT

CASIMIR J. KWITOWSKI
 PRINTED NAME

814 **825-7601**
 AREA CODE DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal
 LAURIE A WATSON - Notary Public
 Erie County
 My Commission Expires Feb 2, 2023
 Commission Number 1288351

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