

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 <input checked="" type="checkbox"/>	LOBBYIST ³												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Friends for Jason Monn																	
STREET ADDRESS 716 S. Center St																	
CITY Corry		STATE PA	ZIP CODE 16407 - 2220														
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY												
6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 1. 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 2. 30 DAY POST-PRIMARY <input type="checkbox"/> 3. 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 4. 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 5. 30 DAY POST-ELECTION <input type="checkbox"/> 6. ANNUAL REPORT <input checked="" type="checkbox"/>																	
		DATES OF REPORTING PERIOD <table border="1" style="display: inline-table; margin-right: 10px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>01</td><td>01</td><td>2019</td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>12</td><td>31</td><td>2019</td></tr> </table>		MO.	DAY	YEAR	01	01	2019	MO.	DAY	YEAR	12	31	2019	DATE OF ELECTION MO. DAY YEAR	
MO.	DAY	YEAR															
01	01	2019															
MO.	DAY	YEAR															
12	31	2019															
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>483.03</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0.00</u>		FOR OFFICE USE ONLY 2020 JAN 22 PM 12:10 ERIC CAULFIELD VOTER REGISTRATION H													
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> TERMINATION REPORT? YES <input type="checkbox"/> 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
21 DAY OF January 2020

Kelly Warner
 SIGNATURE
 MY COMMISSION EXPIRES _____
 Commonwealth of Pennsylvania - Notary Seal
 Kelly Warner, Notary Public
 MO. DAY Erie County
 My commission expires January 25, 2023
 Commission number 1345716

Heather Kozuchowsky Stanbro
 SIGNATURE OF PERSON SUBMITTING REPORT
Heather Kozuchowsky- Stanbro
 PRINTED NAME
 814 964-2938
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Political Committee, 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
21 DAY OF January 2020

Kelly Warner
 SIGNATURE
 MY COMMISSION EXPIRES _____
 Commonwealth of Pennsylvania - Notary Seal
 Kelly Warner, Notary Public
 MO. DAY Erie County
 My commission expires January 25, 2023
 Commission number 1345716

Jason Monn
 SIGNATURE OF CANDIDATE
Jason Monn
 PRINTED NAME
 814 964-0207
 AREA CODE DAYTIME TELEPHONE NUMBER