

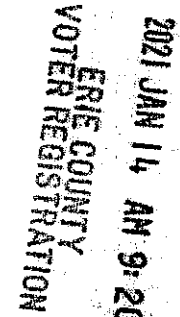
# Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

<b>Filer Identification Number</b>		<b>Report Filed By (Mark X)</b>	<input checked="" type="checkbox"/>	<b>Candidate</b>	<input type="checkbox"/>	<b>Committee</b>	<input type="checkbox"/>	<b>Lobbyist</b>	<input type="checkbox"/>
<b>Name of Filing Committee, Candidate or Lobbyist</b>		Connie Cruz							
<b>Street Address</b>		4420 Dale Drive							
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16511				

Type of Report (Place x under report type)

<b>1- 6<sup>th</sup> Tuesday Pre-Primary</b>	<b>2- 2<sup>nd</sup> Friday Pre-Primary</b>	<b>3- 30 Day Post Primary</b>	<b>4- 6<sup>th</sup> Tuesday Pre-Election</b>	<b>5- 2<sup>nd</sup> Friday Pre-Election</b>	<b>6- 30 Day Post Election</b>	<b>7- Annual</b>	<b>Special 2<sup>nd</sup> Friday Pre-Election</b>	<b>Special 30 Day Post-Election</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Date Of Election (MM/DD/YYYY)</b>		11/05/2019	<b>Year</b>	2020	<b>Amendment Report</b>	<input type="checkbox"/>	<b>Termination Report</b>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2020	12/31/2020	
<b>A. Amount Brought Forward From Last Report</b>	\$	0	
<b>B. Total Monetary Contributions and Receipts (From Schedule I)</b>	\$	0	
<b>C. Total Funds Available (Sum of Lines A and B)</b>	\$	0	
<b>D. Total Expenditures (From Schedule III)</b>	\$	0	
<b>E. Ending Cash Balance (Subtract Line D from Line C)</b>	\$	0	
<b>F. Value of In-Kind Contributions Received (From Schedule II)</b>	\$	0	
<b>G. Unpaid Debts and Obligations (From Schedule IV)</b>	\$	0	

**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, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 14 day of Jan 2021

Signature: Michelle Gonda

Signature of Person Submitting report: Connie Cruz

Printed Name: Connie Cruz

My Commission expires 5 26 23  
MO. DAY YR.

Notary Seal: MICHELLE GONDA - Notary Public, Erie County, My Commission Expires May 26, 2023, Commission Number 1290868

Daytime Telephone Number: 572-6169

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: \_\_\_\_\_

Signature of Candidate: \_\_\_\_\_

Printed Name: \_\_\_\_\_

My Commission expires \_\_\_\_\_ MO. DAY YR.

Area Code: \_\_\_\_\_ Daytime Telephone Number: \_\_\_\_\_