

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	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST The Committee to Elect Lydia Laythe						
STREET ADDRESS 13231 Rt. 99						
CITY EDINBORO		STATE PA	ZIP CODE 16412			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		
	WASHINGTON TWP COUNCIL			D		
	DATE OF ELECTION					
	MO. DAY YEAR		11 6 2019			
	6TH TUESDAY PRE-PRIMARY					
	2ND FRIDAY PRE-PRIMARY					
	30 DAY POST-PRIMARY					
6TH TUESDAY PRE-ELECTION						
2ND FRIDAY PRE-ELECTION						
30 DAY POST-ELECTION						
ANNUAL REPORT		<input checked="" type="checkbox"/>				
DATES OF REPORTING PERIOD						
MO. DAY YEAR		01 01 2020 to 12 31 2020				
CASH BALANCE AT END OF REPORTING PERIOD:		\$ 540.26				
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 0				
AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>		
TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>		
FOR OFFICE USE ONLY						
2021 FEB - 1 PM 2:16 ERIE COUNTY VOTER REGISTRATION						

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 _____ DAY OF _____ 20____

SIGNATURE

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.

Brandon Johnston
SIGNATURE OF PERSON SUBMITTING REPORT

Brandon Johnston
PRINTED NAME

814 403-1150
AREA CODE DAYTIME TELEPHONE NUMBER

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.

Lydia Laythe
SIGNATURE OF CANDIDATE

LYDIA LAYTHE
PRINTED NAME

814 403-117-7
AREA CODE DAYTIME TELEPHONE NUMBER



Pennsylvania Department of State
 Bureau of Campaign Finance & Civic Engagement
 210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

2021 FEB - 1 PM 2:16
 ERIE COUNTY
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Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per the temporary waiver granted by the Governor on April 6, 2020, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements In lieu of full reports (form DSEB-503), and Independent Expenditure Reports (form DSEB-505) need not be notarized. (See Temporary Waiver of Notarization Requirement for Campaign Finance Reports and Statements). Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). This particular form is to be used only for Campaign Finance Reports and only so long as the waiver referenced above is in effect. This form must be signed by hand or by typing your name where a signature is required. If you type your name, you understand that's your electronic signature and will constitute the legal equivalent of your signature on this form.

Name of Filing Committee, Candidate, or Lobbyist			
Reporting Cycle Name			
<input type="checkbox"/> Cycle 1 <small>6th Tuesday Pre-Primary</small>	<input type="checkbox"/> Cycle 2 <small>2nd Friday Pre-Primary</small>	<input type="checkbox"/> Cycle 3 <small>30 Day Post Primary</small>	<input type="checkbox"/> Cycle 9 <small>30-Day Post Special Election</small>

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

By signing or typing my name below, I hereby declare under the penalty of perjury, pursuant to 18 Pa.C.S. § 4904, that the information contained in the accompanying Campaign Finance Report is to the best of my knowledge and belief true, correct and complete.

Brandon Johnston
 Signature of Treasurer, Candidate, or Lobbyist

1/14/2021
 Date

Brandon Johnston
 Printed Name



Pennsylvania Department of State

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VOTER REGISTRATION

Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

By signing or typing my name below, I hereby declare under the penalty of perjury, pursuant to 18 Pa.C.S. § 4904, that the information contained in the accompanying Campaign Finance Report is to the best of my knowledge and belief true, correct and complete.

LYDIA LANTHE

Signature of Candidate

1/14/2021

Date

LYDIA LANTHE

Printed Name