

**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 <b>LYDIA LAYTHE</b>																								
STREET ADDRESS <b>4970 Kinter Hill Rd</b>																								
CITY <b>Edinboro</b>		STATE <b>PA</b>	ZIP CODE <b>16412 -</b>																					
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"/> 7.		<b>Washington Twp. Council</b>			<b>D</b>																			
		DATES OF REPORTING PERIOD		DATE OF ELECTION																				
		<table border="1" style="display: inline-table; margin-right: 10px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table>		MO.	DAY	YEAR				MO.	DAY	YEAR				<table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td><b>11</b></td><td><b>6</b></td><td><b>2019</b></td></tr> </table>			MO.	DAY	YEAR	<b>11</b>	<b>6</b>	<b>2019</b>
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<b>11</b>	<b>6</b>	<b>2019</b>																						
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>		2021 FEB - 1 PM 2:13 ERIE COUNTY VOTER REGISTRATION																				
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>																						
		<table border="1" style="display: inline-table; margin-right: 10px;"> <tr><td>AMENDMENT REPORT?</td><td>YES</td><td>NO</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>		AMENDMENT REPORT?	YES	NO																		
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**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.

**Lydia Laythe**  
SIGNATURE OF PERSON SUBMITTING REPORT

**LYDIA LAYTHE**  
PRINTED NAME

**814** **4031177**  
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.

\_\_\_\_\_  
SIGNATURE OF CANDIDATE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
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](http://www.dos.pa.gov/campaignfinance) • [ra-stcampaignfinance@pa.gov](mailto:ra-stcampaignfinance@pa.gov)

2021 FEB - 1 PM 2:16  
 ERIE COUNTY  
 VOTER REGISTRATION

## 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.*

<b>Name of Filing Committee, Candidate, or Lobbyist</b>			
<b>Reporting Cycle Name</b>			
<input type="checkbox"/> <b>Cycle 1</b> <small>6<sup>th</sup> Tuesday Pre-Primary</small>	<input type="checkbox"/> <b>Cycle 2</b> <small>2<sup>nd</sup> Friday Pre-Primary</small>	<input type="checkbox"/> <b>Cycle 3</b> <small>30 Day Post Primary</small>	<input type="checkbox"/> <b>Cycle 9</b> <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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2021 FEB - 1 PM 2:17  
ERIE COUNTY  
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