

COMMONWEALTH OF PENNSYLVANIA  
INDEPENDENT EXPENDITURE REPORT

ERIE COUNTY

JAN 19 2022

FULL NAME OF PERSON FILING		NAME OF ORGANIZATION <small>VOTER REGISTRATION</small> Everytown for Gun Safety Victory Fund	
ADDRESS (NUMBER AND STREET) P.O. Box 4184		DATE OF PRIMARY OR ELECTION 11/02/2021	
CITY New York	STATE NY	ZIP CODE 10163	DAYTIME TELEPHONE 646-324-8250
E-MAIL ADDRESS victoryfund@everytown.org			
TYPE OF REPORT (CHECK APPROPRIATE BLOCK)			
<input type="checkbox"/> 6 <sup>TH</sup> TUESDAY PRE-PRIMARY	<input type="checkbox"/> 2 <sup>ND</sup> FRIDAY PRE-PRIMARY	<input type="checkbox"/> 30 DAY POST- PRIMARY	<input type="checkbox"/> AMENDED REPORT
<input type="checkbox"/> 6 <sup>TH</sup> TUESDAY PRE-ELECTION	<input type="checkbox"/> 2 <sup>ND</sup> FRIDAY PRE-ELECTION	<input type="checkbox"/> 30 DAY POST-ELECTION	<input checked="" type="checkbox"/> ANNUAL REPORT

NAME OF CANDIDATE OR QUESTION	<input type="checkbox"/> SUPPORTED	<input type="checkbox"/> OPPOSED
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SUMMARY OF INDEPENDENT EXPENDITURES


PAID TO - FULL NAME AND MAILING ADDRESS	PURPOSE (DESCRIPTION OF EXPENDITURE)	DATE	AMOUNT
No activity	No activity		\$0

IF ADDITIONAL SPACE IS NECESSARY TO REPORT EXPENDITURES, PLEASE ATTACH AN 8 1/2" X 11" SHEET OF PAPER TO THIS FORM.

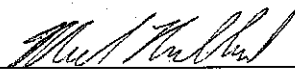
I SWEAR (OR AFFIRM) THAT THIS REPORT, INCLUDING ATTACHMENTS, ARE TO THE BEST OF MY KNOWLEDGE AND BELIEF TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

18<sup>th</sup> DAY OF JANUARY 2022

  
SIGNATURE

MY COMMISSIONS EXPIRES 11-15-2025  
MO. DAY YR.

  
SIGNATURE OF PERSON SUBMITTING REPORT

Michael Brouillard  
PRINTED NAME

646 324-8250  
AREA CODE DAYTIME TELEPHONE NUMBER

MOLLY A. THOMAS-JENSEN  
NOTARY PUBLIC STATE OF NEW YORK  
BUREAU OF COMMISSIONS, ELECTIONS AND LEGISLATION  
110 N. PRINCE STREET BUILDING • HARRISBURG, PENNSYLVANIA 17120-0029 • (717) 787-5280  
No. 02118425245  
Qualified in Kings County  
My Commission Expires 11-15-2025