## COMMONWEALTH OF PENNSYLVANIA

## CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each <u>did not exceed \$250.00</u> during the reporting period.

	FILER IDENTIFICATION NUMBER	•					REPORT FILE ON BEHALF (		CANDIDATE	X	COMMITTEE	2	LOBEYIST	3.	]
	NAME OF FILING COMM	NTTEE, CANDIO	_ //	TOWSK					-						}
	STREET ADDRESS YOLS STANLEY AVE														
	ERIE		s			STATE A			ZIP CODE /6504 —						
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	2nd FRIDAY PRE-PRIMARY	2.	DATES OF REPORTING PERIOD	MO. DAY	мо. 12	2 21 21									
	30 day post-primary	3. ***		ANCE AT END		s (195-05) s 195-05						i sa Maria Maria			
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