

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.

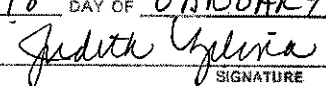
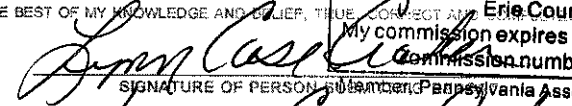
FILER IDENTIFICATION NUMBER	REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST LYNN CASE CRAKER																
STREET ADDRESS 5411 MILLFAIR RD																
CITY FAIRVIEW		STATE PA	ZIP CODE 16015													
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION												
6TH TUESDAY PRE-PRIMARY <input type="checkbox"/>	TAX COLLECTOR	HILLCREAK	DEM	MO. DAY YEAR												
2ND FRIDAY PRE-PRIMARY <input type="checkbox"/>				MO. DAY YEAR												
30 DAY POST-PRIMARY <input type="checkbox"/>				MO. DAY YEAR												
6TH TUESDAY PRE-ELECTION <input type="checkbox"/>				MO. DAY YEAR												
2ND FRIDAY PRE-ELECTION <input type="checkbox"/>				MO. DAY YEAR												
30 DAY POST-ELECTION <input type="checkbox"/>				MO. DAY YEAR												
ANNUAL REPORT <input checked="" type="checkbox"/>				MO. DAY YEAR												
DATES OF REPORTING PERIOD		<table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>1</td> <td>1</td> <td>22</td> </tr> </table> TO <table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>12</td> <td>31</td> <td>22</td> </tr> </table>		MO.	DAY	YEAR	1	1	22	MO.	DAY	YEAR	12	31	22	FOR OFFICE USE ONLY
MO.	DAY	YEAR														
1	1	22														
MO.	DAY	YEAR														
12	31	22														
CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>		<table border="1"> <tr> <th>AMENDMENT REPORT?</th> <th>YES</th> <th>NO</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <th>TERMINATION REPORT?</th> <th>YES</th> <th>NO</th> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> </table>		AMENDMENT REPORT?	YES	NO				TERMINATION REPORT?	YES	NO		<input checked="" type="checkbox"/>		2023 JAN 23 AM 9:49 ERIE COUNTY VOTER REGISTRATION
AMENDMENT REPORT?	YES	NO														
TERMINATION REPORT?	YES	NO														
	<input checked="" type="checkbox"/>															
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>																

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 <u>18</u> DAY OF <u>JANUARY</u> <u>2023</u>  SIGNATURE MY COMMISSION EXPIRES <u>01</u> <u>11</u> <u>2025</u> MO. DAY YR.	Commonwealth of Pennsylvania - Notary Seal Judith Zelina, Notary Public Erie County My commission expires January 11, 2025 Commission number 1212798  SIGNATURE OF PERSON SIGNING <u>Lynn Case Craker</u> PRINTED NAME <u>814</u> <u>873-6607</u> AREA CODE DAYTIME TELEPHONE NUMBER
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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 _____ <u>20</u> _____ SIGNATURE MY COMMISSION EXPIRES _____ MO. DAY YR.	_____ SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE DAYTIME TELEPHONE NUMBER
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