

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	1. <input checked="" type="checkbox"/>	COMMITTEE	2.	LOBBYIST	3.
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Dan Laughlin</i>									
STREET ADDRESS <i>4619 Autumnwood Ter</i>									
CITY <i>Eric</i>					STATE <i>PA</i>		ZIP CODE <i>14500-</i>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY	DATE OF ELECTION		
6TH TUESDAY PRE-PRIMARY 1.		<i>Senator in the General Assembly</i>			<i>49</i>	<i>Republican</i>	MO.	DAY	YEAR
2ND FRIDAY PRE-PRIMARY 2.							<i>11</i>	<i>08</i>	<i>2022</i>
30 DAY POST-PRIMARY 3.							FOR OFFICE USE ONLY		
6TH TUESDAY PRE-ELECTION 4.		DATES OF REPORTING PERIOD							
2ND FRIDAY PRE-ELECTION 5.		MO. DAY YEAR			MO. DAY YEAR				
30 DAY POST-ELECTION 6.		<i>01 01 2022</i>			<i>12 31 2022</i>				
ANNUAL REPORT 7. <input checked="" type="checkbox"/>		CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>φ</i>			TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>φ</i>		2023 JAN 25 PM 12:00 ERIE COUNTY VOTER REGISTRY		
		AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>			
		TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>			

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
16 DAY OF *January*, 2023

SIGNATURE OF PERSON SUBMITTING REPORT: *[Signature]*

PRINTED NAME: _____

DAYTIME TELEPHONE NUMBER: _____

MY COMMISSION EXPIRES: _____

Notary Seal: Commonwealth of Pennsylvania - Notary Seal, Douglas T. Rickards, Notary Public, Dauphin County, My commission expires August 06, 2023, Commission number 1292437

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 OF CANDIDATE: _____

PRINTED NAME: _____

DAYTIME TELEPHONE NUMBER: _____

MY COMMISSION EXPIRES: _____

MO. DAY YR. AREA CODE