

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 Erika Strassburger																																															
STREET ADDRESS 1533 Valmont Street																																															
CITY Pittsburgh				STATE PA		ZIP CODE 15217																																									
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		DATE OF ELECTION																																							
		Pittsburgh City Council			8	Dem		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>11</td> <td>02</td> <td>2021</td> </tr> </table>		MO.	DAY	YEAR	11	02	2021																																
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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					SIGNATURE OF PERSON SUBMITTING REPORT				
DAY OF <u>August</u> 20 <u>21</u> SIGNATURE <u>[Signature]</u>					SIGNATURE <u>[Signature]</u> PRINTED NAME <u>Erika Strassburger</u>				
MY COMMISSION EXPIRES					DAYTIME TELEPHONE NUMBER				
MO. DAY YR. <u>11 20 21</u>					<u>491-4801</u>				

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					SIGNATURE OF CANDIDATE				
DAY OF _____ 20__					SIGNATURE _____				
SIGNATURE _____					PRINTED NAME _____				
MY COMMISSION EXPIRES					AREA CODE DAYTIME TELEPHONE NUMBER				
MO. DAY YR. _____					_____				