

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 <sup>2</sup> <input type="checkbox"/>	LOBBYIST <sup>3</sup> <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Kenneth L Wolfe					
STREET ADDRESS 723 Eureka Street					
CITY Pittsburgh		STATE PA	ZIP CODE 15210 -		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY
6TH TUESDAY PRE-PRIMARY <sup>1.</sup> 2ND FRIDAY PRE-PRIMARY <sup>2.</sup> <input checked="" type="checkbox"/> 30 DAY POST-PRIMARY <sup>3.</sup> 6TH TUESDAY PRE-ELECTION <sup>4.</sup> 2ND FRIDAY PRE-ELECTION <sup>5.</sup> 30 DAY POST-ELECTION <sup>6.</sup> ANNUAL REPORT <sup>7.</sup>		City Council		3	Dem
		DATE OF ELECTION			
		MO. DAY YEAR		5 21 19	
		DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY	
		MO. DAY YEAR TO MO. DAY YEAR		<b>RECEIVED</b>  <b>MAY 14 2019</b>  <b>ETHICS HEARING BOARD</b>	
		CASH BALANCE AT END OF REPORTING PERIOD: \$ 0			
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0			
		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 13 <sup>th</sup> DAY OF May 2019 Signature: <i>Kathleen A. Schafer</i> NOTARIAL SEAL DAY YR. Kathleen A. Schafer, Notary Public City of Pittsburgh, Allegheny County My Commission Expires Oct. 10, 2021	SIGNATURE OF PERSON SUBMITTING REPORT <i>Kenneth L Wolfe</i> PRINTED NAME Kenneth L Wolfe AREA CODE: 412 DAYTIME TELEPHONE NUMBER: 606 3197
---	---

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