

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

RECEIVED

AUG 27 2019

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.

ETHICS HEARING BOARD

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE	<input checked="" type="checkbox"/> COMMITTEE ²	LOBBYIST ³	
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	DATE OF ELECTION	
	6TH TUESDAY PRE-PRIMARY	City Council	3	Dem	MO.	DAY
	2ND FRIDAY PRE-PRIMARY				5	21
	30 DAY POST-PRIMARY					19
	6TH TUESDAY PRE-ELECTION				FOR OFFICE USE ONLY	
	2ND FRIDAY PRE-ELECTION				ALLEGHENY COUNTY DEPT. OF ELECTIONS 2019 MAY 13 PM 2:21	
	30 DAY POST-ELECTION					
ANNUAL REPORT						
DATES OF REPORTING PERIOD		CASH BALANCE AT END OF REPORTING PERIOD: \$		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$		
MO.	DAY	YEAR				
03	01	19	0		0	
			TO		TO	
MO.	DAY	YEAR				
05	06	19				
AMENDMENT REPORT?		YES	NO			
TERMINATION REPORT?		YES	NO			

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
 13th DAY OF May 20 19

Kathleen A. Schafer
 SIGNATURE
 COMMONWEALTH OF PENNSYLVANIA 2019
 NOTARIAL SEAL DAY YR.
 Kathleen A. Schafer, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Oct. 10, 2021

Kenneth L Wolfe
 SIGNATURE OF PERSON SUBMITTING REPORT
 Kenneth L Wolfe
 PRINTED NAME
 412 AREA CODE
 606 3197 DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Contributing Candidate, 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