

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>	LOBBYIST <sup>3</sup>																		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <u>BARBARA Daniels</u>																							
STREET ADDRESS <u>7327 Finance St.</u>																							
CITY <u>Pittsburgh</u>		STATE <u>Pennsylvania</u>	ZIP CODE <u>15208 - 1931</u>																				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY																		
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT		<u>City Council</u>		<u>9</u>	<u>Independent</u>																		
		DATES OF REPORTING PERIOD		DATE OF ELECTION																			
		<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>05</td><td>01</td><td>2019</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>09</td><td>02</td><td>2019</td></tr> </table>		MO.	DAY	YEAR	05	01	2019	MO.	DAY	YEAR	09	02	2019	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>11</td><td>05</td><td>2019</td></tr> </table>		MO.	DAY	YEAR	11	05	2019
MO.	DAY	YEAR																					
05	01	2019																					
MO.	DAY	YEAR																					
09	02	2019																					
MO.	DAY	YEAR																					
11	05	2019																					
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0.00</u>		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0.00</u>																			
		<table border="1"> <tr><td>AMENDMENT REPORT?</td><td>YES</td><td>NO</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>TERMINATION REPORT?</td><td>YES</td><td>NO</td><td><input checked="" type="checkbox"/></td></tr> </table>		AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>	FOR OFFICE USE ONLY <div style="border: 2px solid blue; padding: 10px; text-align: center;"> <p>RECEIVED</p> <p>SEP 03 2019</p> <p>ETHICS HEARING BOARD</p> </div>											
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	<u>2</u> DAY OF <u>September</u> 20 <u>19</u>	<u>Barbara Daniels</u>
SIGNATURE	<u>Melissa C. Lewis</u>	SIGNATURE OF PERSON SUBMITTING REPORT
MY COMMISSION EXPIRES	<u>12</u> DAY <u>2019</u> YR.	<u>BARBARA DANIELS</u>
		PRINTED NAME
		<u>412</u> <u>584-1388</u>
		AREA CODE DAYTIME TELEPHONE NUMBER

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

