

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 <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST COREY O'CONNOR						
STREET ADDRESS 1108 GOODMAN ST						
CITY PITTSBURGH			STATE PA	ZIP CODE 15218		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY	DATE OF ELECTION
	CITY COUNCIL			5	D	MO. DAY YEAR 11 5 19
6TH TUESDAY PRE-PRIMARY	1	DATES OF REPORTING PERIOD		MO. DAY YEAR	FOR OFFICE USE ONLY	
2ND FRIDAY PRE-PRIMARY	2	9 1 19 TO 9 30 19		<div style="border: 2px solid blue; padding: 10px; text-align: center;"> <p>RECEIVED</p> <p>OCT 01 2019</p> <p>ETHICS HEARING BOARD</p> </div>		
30 DAY POST-PRIMARY	3	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>Ø</u>				
6TH TUESDAY PRE-ELECTION	4	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>Ø</u>				
2ND FRIDAY PRE-ELECTION	5	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
30 DAY POST-ELECTION	6	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
ANNUAL REPORT	7					

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

1st DAY OF October 2019

[Signature]
SIGNATURE

MY COMMISSION EXPIRES 10 20 2021
MO. DAY YR.

[Signature]
SIGNATURE OF PERSON SUBMITTING REPORT

Corey O'Connor
PRINTED NAME

412 613-5982
AREA CODE DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Notary Seal
 Brenda Faye Pree, Notary Public
 Allegheny County
 My commission expires October 20, 2021
 Commission number 1322213

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