

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 Bruce Kraus									
STREET ADDRESS 157 S. 18th Street									
CITY Pittsburgh				STATE PA		ZIP CODE 15203			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY	DATE OF ELECTION		
6TH TUESDAY PRE-PRIMARY		Pittsburgh City Council			3	Dem	MO.	DAY	YEAR
<input type="checkbox"/>							11	05	2019
2ND FRIDAY PRE-PRIMARY									
<input type="checkbox"/>									
30 DAY POST-PRIMARY									
<input type="checkbox"/>									
6TH TUESDAY PRE-ELECTION									
<input type="checkbox"/>									
2ND FRIDAY PRE-ELECTION									
<input checked="" type="checkbox"/>									
30 DAY POST-ELECTION									
<input type="checkbox"/>									
ANNUAL REPORT									
<input type="checkbox"/>									

DATES OF REPORTING PERIOD		MO. DAY YEAR			TO	MO. DAY YEAR		
		09 01 19				09 30 19		

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	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
TERMINATION REPORT?	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>

RECEIVED

OCT 01 2019

ETHICS HEARING BOARD

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

1 DAY OF October 20

[Signature] SIGNATURE

[Signature] SIGNATURE OF PERSON SUBMITTING REPORT

Bruce A Kraus PRINTED NAME

MY COMMISSION EXPIRES 11 20 20 AREA CODE 412 DAYTIME TELEPHONE NUMBER 412-583-6082

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

____ PRINTED NAME

MY COMMISSION EXPIRES MO. DAY YR. AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 NOTARIA - SEAL
 Dea J. Hekevsky, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Nov 20, 2021
 My Commission Expires Nov 20, 2021