

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 Deb Gross | | | | | | | | | | | | | | | | | | | | | | | | |
| STREET ADDRESS 5800 Wayne Road | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY Pittsburgh | | | STATE PA | ZIP CODE 15206 | | | | | | | | | | | | | | | | | | | | |
| TYPE OF REPORT (CHECK ONE) | | NAME OF OFFICE SOUGHT BY CANDIDATE | | DISTRICT NO. | PARTY | | DATE OF ELECTION | | | | | | | | | | | | | | | | | |
| 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 <input checked="" type="checkbox"/> 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT | | Pittsburgh City Council | | 7 | Dem | | <table border="1" style="width:100%; border-collapse: collapse;"> <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 | | | | | | | | | | | | | | | | | | | | | | |
| 11 | 05 | 2019 | | | | | | | | | | | | | | | | | | | | | | |
| | | DATES OF REPORTING PERIOD <table border="1" style="display: inline-table; margin-right: 10px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>09</td><td>01</td><td>19</td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>09</td><td>30</td><td>19</td></tr> </table> | | | MO. | DAY | YEAR | 09 | 01 | 19 | MO. | DAY | YEAR | 09 | 30 | 19 | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CASH BALANCE AT END OF REPORTING PERIOD:</td> <td style="width: 50%; text-align: right;">\$ <u>0</u></td> </tr> <tr> <td>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:</td> <td style="text-align: right;">\$ <u>0</u></td> </tr> </table> | | | | CASH BALANCE AT END OF REPORTING PERIOD: | \$ <u>0</u> | TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: | \$ <u>0</u> |
| MO. | DAY | YEAR | | | | | | | | | | | | | | | | | | | | | | |
| 09 | 01 | 19 | | | | | | | | | | | | | | | | | | | | | | |
| MO. | DAY | YEAR | | | | | | | | | | | | | | | | | | | | | | |
| 09 | 30 | 19 | | | | | | | | | | | | | | | | | | | | | | |
| CASH BALANCE AT END OF REPORTING PERIOD: | \$ <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: | \$ <u>0</u> | | | | | | | | | | | | | | | | | | | | | | | |
| | | <table border="1" style="width:100%; border-collapse: collapse;"> <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"/> | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 10px;"> RECEIVED OCT 01 2019 ETHICS HEARING BOARD </td> </tr> </table> | | | | RECEIVED OCT 01 2019 ETHICS HEARING BOARD | | | | | | | |
| AMENDMENT REPORT? | YES | NO | <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | |
| TERMINATION REPORT? | YES | 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 TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE. | |
| SWORN TO AND SUBSCRIBED BEFORE ME THIS <u>1</u> DAY OF <u>October</u> <u>Lisa J. Meko</u> SIGNATURE MY COMMISSION EXPIRES <u>2020</u> MO. DAY YR. | SIGNATURE OF PERSON SUBMITTING REPORT <u>Deborah Gross</u> PRINTED NAME 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 MY COMMISSION EXPIRES _____ MO. DAY YR. | SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____ |