

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	COMMITTEE	LOBBYIST																		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST JACOB NIXON COMMITTEE																							
STREET ADDRESS P.O. Box 42438																							
CITY PITTSBURGH		STATE PA	ZIP CODE 15203																				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE BOUGHT 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		Pittsburgh City Council		3	TRUMP																		
		DATES OF REPORTING PERIOD		DATE OF ELECTION																			
		<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>9</td><td>4</td><td>19</td></tr> </table> to <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>10</td><td>1</td><td>19</td></tr> </table>		MO.	DAY	YEAR	9	4	19	MO.	DAY	YEAR	10	1	19	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>11</td><td>5</td><td>2019</td></tr> </table>		MO.	DAY	YEAR	11	5	2019
MO.	DAY	YEAR																					
9	4	19																					
MO.	DAY	YEAR																					
10	1	19																					
MO.	DAY	YEAR																					
11	5	2019																					
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>60.21</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>		FOR OFFICE USE ONLY <div style="border: 1px solid blue; padding: 5px; text-align: center;"> RECEIVED OCT 01 2019 ETHICS HEARING BOARD </div>																			
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																					

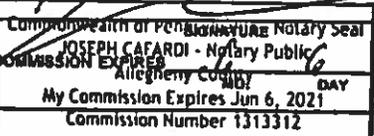
AFFIDAVIT SECTION

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
1 DAY OF October 2019



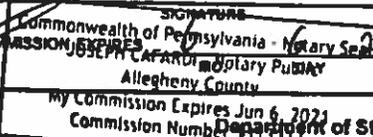

 SIGNATURE OF PERSON SUBMITTING REPORT
JEFFREY WOODARD
 PRINTED NAME
(412) 345-1571
 AREA CODE DAYTIME TELEPHONE NUMBER

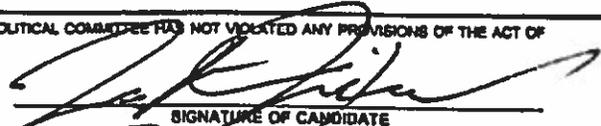
PART II -

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
1 DAY OF October 2019




 SIGNATURE OF CANDIDATE
JACOB NIXON
 PRINTED NAME
(412) 345-1571
 AREA CODE DAYTIME TELEPHONE NUMBER