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
NAME OF FILINGS COMMITTEE, CANDIDATE OR LOBBYIST
Franz W. Krazalkovich
STREET ADDRESS
92 Stone Hill Drive
CITY
Pottstown
STATE
PA
ZIP CODE
19464

DATE OF ELECTION
MO. DAY YEAR
05 21 2019
OFFICE OF ELECTORAL SERVICES
RECEIVED MAY 10 PM 1:38
DATE OF REPORTING PERIOD
MO. DAY YEAR
1 1 19 TO 5 6 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 NO X
TERMINATION REPORT?
YES NO X

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.

SIGNATURE OF PERSON SUBMITTING REPORT
Franz W. Krazalkovich
PRINTED NAME
010 745-1782

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.

SIGNATURE OF CANDIDATE

SIGNATURE

MY COMMISSION EXPIRES
MO. DAY YR.

Department of State • Bureau of Commissions, Elections and Legislation
210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280