

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 France W. Krazalkovich									
STREET ADDRESS 92 Stone Hill Drive									
CITY Pottstown			STATE PA		ZIP CODE 19464				
TYPE OF REPORT (CHECK ONE) 6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 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"/>	NAME OF OFFICE SOUGHT BY CANDIDATE County Commissioner			DISTRICT NO. Mont	PARTY REP		DATE OF ELECTION		
				MO. DAY YEAR	MO. DAY YEAR	MO.	DAY	YEAR	
				1 1 19	5 6 19	05	21	2019	
	DATES OF REPORTING PERIOD			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>					
	AMENDMENT REPORT?			YES	NO	RECEIVED OFFICE OF VOTER SERVICES MONTG. CO. PA 2019 MAY 10 PM 1:38			
	TERMINATION REPORT?			YES	NO				

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 COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL James Courtland Spring, Notary Public, 2012 Whitpain Twp, Montgomery County My Commission Expires May 2021 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES MY COMMISSION EXPIRES MO. DAY YR.	Signature of Person Submitting Report France W. Krazalkovich PRINTED NAME 610 745-1782 AREA CODE DAYTIME TELEPHONE NUMBER
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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 _____
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