

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 ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Committee to Elect Jason Klesh</i>							
STREET ADDRESS <i>25 WEBSTER STREET</i>							
CITY <i>Pittsburgh</i>			STATE <i>PA</i>	ZIP CODE <i>15201</i>			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION		
	<i>Mayor Pittsburgh City</i>			<i>Dem</i>	*MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY	1.				<i>11</i>	<i>3</i>	<i>2009</i>
2ND FRIDAY PRE-PRIMARY	2.						
30 DAY POST-PRIMARY	3.						
6TH TUESDAY PRE-ELECTION	4.						
2ND FRIDAY PRE-ELECTION	5.						
30 DAY POST-ELECTION	6.						
ANNUAL REPORT	7.						

DATES OF REPORTING PERIOD		TO			
MO.	DAY	YEAR	MO.	DAY	YEAR
<i>10</i>	<i>20</i>	<i>09</i>	<i>11</i>	<i>23</i>	<i>09</i>

CASH BALANCE AT END OF REPORTING PERIOD:	\$	<i>-0-</i>
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	\$	<i>-0-</i>

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

FOR OFFICE USE ONLY	
RECEIVED	2009 NOV 24 AM 10:07
BOARD OF ELECTIONS LUZERNE COUNTY, PA.	

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 (WE) (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
 DAY OF *November 23* 20*09*
 SIGNATURE *[Signature]*
 MY COMMISSION EXPIRES *Nov 29, 2012*
 MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT
Patrick M. Hasler
 PRINTED NAME
 AREA CODE *570* DAYTIME TELEPHONE NUMBER *237-0425*

My Commission Expires November 29, 2012

PART II
 If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I (WE) (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF APRIL 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 DAY OF *November 23* 20*09*
 SIGNATURE *[Signature]*
 MY COMMISSION EXPIRES *Nov 29 2012*
 MO. DAY YR.

SIGNATURE OF CANDIDATE
Jason Klesh
 PRINTED NAME
 AREA CODE *570* DAYTIME TELEPHONE NUMBER *466-4637*

My Commission Expires November 29, 2012