

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 <b>26-4521281</b>		REPORT FILED ON BEHALF OF		CANDIDATE	1. <input checked="" type="checkbox"/> COMMITTEE	2.	LOBBYIST	3.
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>SCOTT OTT</b>								
STREET ADDRESS <b>6635 Mine Drive</b>								
CITY <b>MACUNGIE</b>				STATE <b>PA</b>		ZIP CODE <b>18062</b>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE <b>LEGISL CO EXECUTIVE</b>		DISTRICT NO.	PARTY <b>REP</b>	DATE OF ELECTION		
						MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY		1.						
2ND FRIDAY PRE-PRIMARY		2.						
30 DAY POST-PRIMARY		3.						
6TH TUESDAY PRE-ELECTION		4.						
2ND FRIDAY PRE-ELECTION		5. <input checked="" type="checkbox"/>						
30 DAY POST-ELECTION		6.						
ANNUAL REPORT		7.						

  

DATES OF REPORTING PERIOD		MO.		DAY		YEAR		TO		MO.		DAY		YEAR	
		6		11		13				10		21		13	

  

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

  

**RECEIVED**  
 13 OCT 25 AM 10:05  
 ELECTIONS DIVISION  
 OF THE COMMONWEALTH OF PENNSYLVANIA

**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 <u>24th</u> DAY OF <u>October</u> 20 <u>13</u> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">           COMMONWEALTH OF PENNSYLVANIA            Notarial Seal            Mary E. Christman, Notary Public            City of Allentown, Lehigh County            My Commission Expires Sept. 6, 2015            MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES         </div> MY COMMISSION EXPIRES MO. <u>Sep</u> DAY <u>6</u> YR. <u>2015</u>	<div style="text-align: center;">             SIGNATURE OF PERSON SUBMITTING REPORT  <u>Scott Ott</u>            PRINTED NAME  <u>610</u> <u>810-1688</u>            AREA CODE DAYTIME TELEPHONE NUMBER         </div>
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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 <u>24th</u> DAY OF <u>October</u> 20 <u>13</u> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">           COMMONWEALTH OF PENNSYLVANIA            Notarial Seal            Mary E. Christman, Notary Public            City of Allentown, Lehigh County            My Commission Expires Sept. 6, 2015            MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES         </div> MY COMMISSION EXPIRES MO. <u>Sep</u> DAY <u>6</u> YR. <u>2015</u>	<div style="text-align: center;">             SIGNATURE OF CANDIDATE  <u>Scott Ott</u>            PRINTED NAME  <u>610</u> <u>810-1688</u>            AREA CODE DAYTIME TELEPHONE NUMBER         </div>
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