

## Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	Committee	Lobbyist
			<input checked="" type="checkbox"/>	
Name of Filing Committee/Candidate or Lobbyist <b>COMMITTEE TO ELECT JIM BOCK</b>				
Street Address <b>1000 MARIANNA AVE</b>				
City <b>ERIE</b>	State <b>PA</b>	Zip Code <b>16509</b>		

Type of Report (Place x under report type)

1-6 <sup>th</sup> Tuesday Pre-Primary	2-2 <sup>nd</sup> Friday Pre-Primary	3-30 Day Post Primary	4-6 <sup>th</sup> Tuesday Pre-Election	5-2 <sup>nd</sup> Friday Pre-Election	6-30 Day Post Election	7-Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		Year	Amendment Report		Termination Report			
<b>01/07/2023</b>		<b>2023</b>	<input type="checkbox"/>		<input type="checkbox"/>			

Summary of Receipts and Expenditures	From Date <b>03/07/2023</b>	To Date <b>05/01/2023</b>	For Office Use Only
A- Amount Brought Forward From Last Report	\$	<b>0</b>	<b>2023 MAY -2 AM 10:10</b> <b>ERIE COUNTY</b> <b>VOTER REGISTRATION</b>
B- Total Monetary Contributions and Receipts (From Schedule I)	\$	<b>3,400.00</b>	
C- Total Funds Available (Sum of Lines A and B)	\$	<b>3,400.00</b>	
D- Total Expenditures (From Schedule III)	\$	<b>152.01</b>	
E- Ending Cash Balance (Subtract Line D from Line C)	\$	<b>3,247.99</b>	
F- Value of In-Kind Contributions Received (From Schedule II)	\$	<b>46.00</b>	
G- Unpaid Debts and Obligations (From Schedule IV)	\$	<b>0</b>	

Part I- If this is a Committee report, treasurer sign here. If this is a Candidate's Authorized Committee report, candidate sign here.

I swear (or affirm) that this report, including the attached schedule, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this <b>2nd</b> day of <b>May</b> 20 <b>23</b> <b>Angela L. Watson</b> Signature My Commission expires <b>12/1/2026</b> MO. DAY YR.	Signature of Person Submitting report <b>Rachel E Bock</b> Printed Name <b>814-392-2964</b> Area Code Daytime Telephone Number
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Part II- If this is a report of a Candidate's Authorized Committee, candidate shall 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 <b>2nd</b> day of <b>May</b> 20 <b>23</b> <b>Angela L. Watson</b> Signature My Commission expires <b>12/1/2026</b> MO. DAY YR.	Signature of Candidate <b>JAMES S. BOCK</b> Printed Name <b>814-572-4209</b> Area Code Daytime Telephone Number
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My Commission expires December 2, 2026  
 Commission number 1425503  
 Erie County  
 Commonwealth of Pennsylvania - Notary Public  
 Angela L. Watson, Notary Public  
 My Commission expires December 2, 2026  
 Commission number 1425503  
 Erie County  
 Commonwealth of Pennsylvania - Notary Public  
 Angela L. Watson, Notary Public

SCHEDULE I  
**Contributions and Receipts**  
Detailed Summary Page

<b>Filer Identification Number</b>			
<b>1. Unitemized Contributions and Receipts \$50.00 or Less per Contributor</b>			
Total for the reporting period		(1)	\$ <span style="font-size: 1.5em;">Ø</span>
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>			
Contributions Received from Political Committees (Part A)		\$	<span style="font-size: 1.5em;">Ø</span>
All Other Contributions (Part B)		\$	400.00
Total for the reporting period		(2)	\$ 400.00
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>			
Contributions Received from Political Committees (Part C)		\$	<span style="font-size: 1.5em;">Ø</span>
All Other Contributions (Part D)		\$	3,000.00
Total for the reporting period		(3)	\$ 3,000.00
<b>4. Other Receipts: Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>			
Total for the reporting period		(4)	\$ <span style="font-size: 1.5em;">Ø</span>
Total Monetary Contributions and Receipts during this reporting period (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)		\$	3,400.00

## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD  
DETAILED SUMMARY PAGE

Elder Identification Number

**1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the reporting period

(1)

\$

46.00

**2. IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.01 TO \$250.00 (FROM PART E)**

TOTAL for the reporting period

(2)

\$

0

**3. IN-KIND CONTRIBUTION RECEIVED VALUE OVER \$250.00 (FROM PART G)**

TOTAL for the reporting period

(3)

\$

0

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)

\$

46.00

SCHEDULE III  
Statement of Expenditures

Filer Identification Number	
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To Whom Paid	MIGHTY FINE DONUTS			Date (MM/DD/YYYY)	03/12/2023	\$	72.73
House #	2612	Street Address	PARADE ST	Description of Expenditure			
City	ERIE	State	PA	Zip Code	16504	DONUTS FOR ANNOUNCEMENT GATHERING	

To Whom Paid	MARQUETTE SAVINGS BANK			Date (MM/DD/YYYY)	03/31/2023	\$	29.28
House #	3801	Street Address	STERRETTANIA RD	Description of Expenditure			
City	ERIE	State	PA	Zip Code	16506	CHECKS FOR COMMITTEE	

To Whom Paid	C. A. M.-ERIE			Date (MM/DD/YYYY)	04/21/2023	\$	50.00
House #	142	Street Address	W 12TH ST	Description of Expenditure			
City	ERIE	State	PA	Zip Code	16501	CAMPAIGN VIDEO	

To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			

To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			

To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			

To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			

To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			

## PART B

## All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number

Full Name of Contributor					Date (MM/DD/YYYY)	\$
FRANCIS & ROSALIE CONSTANTINE					03/12/2023	100.00
House #	Street Address				Date (MM/DD/YYYY)	\$
5803	MILL ST					
City	State	Zip Code			Date (MM/DD/YYYY)	\$
ERIE	PA	16509				
Full Name of Contributor					Date (MM/DD/YYYY)	\$
NANCY S. SHEA					04/26/2023	100.00
House #	Street Address				Date (MM/DD/YYYY)	\$
4345	HOLIDAY DR					
City	State	Zip Code			Date (MM/DD/YYYY)	\$
ERIE	PA	16506				
Full Name of Contributor					Date (MM/DD/YYYY)	\$
MARK & SHELLEY WATERMAN					04/29/2023	200.00
House #	Street Address				Date (MM/DD/YYYY)	\$
2553	KIMBERLY DR					
City	State	Zip Code			Date (MM/DD/YYYY)	\$
ERIE	PA	16509				
Full Name of Contributor					Date (MM/DD/YYYY)	\$
House #	Street Address				Date (MM/DD/YYYY)	\$
City	State	Zip Code			Date (MM/DD/YYYY)	\$
Full Name of Contributor					Date (MM/DD/YYYY)	\$
House #	Street Address				Date (MM/DD/YYYY)	\$
City	State	Zip Code			Date (MM/DD/YYYY)	\$
Full Name of Contributor					Date (MM/DD/YYYY)	\$
House #	Street Address				Date (MM/DD/YYYY)	\$
City	State	Zip Code			Date (MM/DD/YYYY)	\$

## PART D

## All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C)

Filer Identification Number:

Full Name of Contributor		JAMES S. & RACHEL E. BOCK		Date [MM/DD/YYYY]	03/07/2023	\$	500.00
House #	1000	Street Address	MARIANNA AVE	Date [MM/DD/YYYY]		\$	
City	ERIE	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$
Employer Name		MILLCREEK TOWNSHIP		Occupation		TOWNSHIP SUPERVISOR	
Employer Mailing Address / Principal Place of Business		3608 W 26TH ST ERIE PA 16506					
Full Name of Contributor		ROBERT E. GLOWACKI		Date [MM/DD/YYYY]	03/22/2023	\$	500.00
House #	3645	Street Address	W LAKE RD	Date [MM/DD/YYYY]		\$	
City	ERIE	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Employer Name		GLOWACKI MANAGEMENT CO LLC		Occupation		REALTOR	
Employer Mailing Address / Principal Place of Business		3645 W LAKE RD ERIE PA 16505					
Full Name of Contributor		DARYL E. TERELLA		Date [MM/DD/YYYY]	03/28/2023	\$	500.00
House #	6354	Street Address	LONGWOOD DR	Date [MM/DD/YYYY]		\$	
City	ERIE	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Employer Name		PASSPORT REALTY LLC		Occupation		REALTOR	
Employer Mailing Address / Principal Place of Business		5050 W RIDGE RD SUITE 201 ERIE PA 16506					
Full Name of Contributor		SANDRA L. BOCK		Date [MM/DD/YYYY]	03/31/2023	\$	1,500.00
House #	5405	Street Address	THOMAS RD	Date [MM/DD/YYYY]		\$	
City	FAIRVIEW	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	\$
Employer Name		BOCK INSURANCE AGENCY		Occupation			
Employer Mailing Address / Principal Place of Business		3915 CAUGHEY RD ERIE PA 16506					