## Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible: (Eshould be typed)

Number (Mar	OMMITTE	E TO ELEC	TIM BOCK
Gity ERIE	000 / 1AR State	IANNA AVE	··· 16509
Type of Report (Place x under report type)			76207
1-6 <sup>th</sup> ( <b>Uesday 2: 2<sup>th</sup> Friday 3:30 Day Post</b> 4:6 <sup>th</sup> Pre-Primary Pre-El	uesday 15 2 <sup>nd</sup> Friday ection Pre-Election		nnual Special 2 <sup>10</sup> Fritiay Special 30/Day Pre-Election Post-Election
Date Of Election (MIM/DD/XXXX)  (MIM/DD/XXXX)  ################################	2023	Amendment Report	Report .
Summany of Receipts and From Date Expenditures	To Date		For Office Use Only
03/07/2023 A: Amount Brought Forward From Last Report \$	05/01/2023		i i i
B. Total Monetary Contributions and Receipts \$	7 44 0 00	1	500 5
(From Schedule I))  CATOtal Funds Available \$	3,400.00 3,400.00	-	20 %
(Sum of Lines A and B)  D: Total Expenditures \$	152.01		STRATIO:
(From Schedule III) E: Ending Cash Balance \$ (Subtract Line D from Line C)	3,247.99		\$(TIO)
F. Value of In-Kind Contributions Received \$ (From Schedule II)	46.00		
G. Unpaid Debts and Obligations \$ (From Schedule IV)	₹Ø S	-	·
Part 1- If this is a Committee report, treasurer sign here. If the	Affidavit S		
I swear (or affirm) that this report, including the attached so			belief true, correct and complete.
Sworn to and subscribed before me this  2023	of Pe Wat Erie Sion	Ball 1	FROND
ally like the too	son, N Son, N Coun numb	Signature of Person	n Submitting report
Signature (A / A A A A A	vania - lotary lty er 142		ed Name
My Commission expires /A b /2024 Some Mo. DAY YR.		Area Code	Daytime Telephone Number
Part II- If this is a report of a Candidate's Authorized Commit	de, candidate apall sign l		ions of the Act of lune 2 1027 /D L 1222 NO 222
I swear (or affirm) that to the best of my knowledge and belied amended.	:1 🛬 🔞 1	nas not violated any provis	ions of the Act of June 5, 1957 (P.E. 1333, NO.320) as
Sworn to and subscribed before me this	umonwealt Angela L commissi		of ul
Maday of May 2023	Sion e	Signature o	f Candidate
Signature A	of Penns of Penns Watson. Erle Cou n expires sion num	JAMES Printed	S. BOCE
My Commission expires 12/3/00/6	Vivania Notary Unity Unity S Decen	814	572-4209
MO. DAY YR.	monwealth of Pennsylvania - Notar Angela L. Watson, Notary Public Erle County Commission expires December 2 Commission formber 1425503	Area Code	Daytime Telephone Number
	lic Seal		

### SCHEDULE I

### **Contributions and Receipts**

**Detailed Summary Page** 

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1. Uniternized Contributions and Receipts \$50,0					
	Total for the reporting period	(1)	\$ 0		
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)					
Contributions Received from Political Committee	s (Part A)		\$ B		
All Other Contributions (Part B)			\$ 400.00		
	Total for the reporting period	(2)	\$ 400.00	A N	
3: Contributions Over \$250:00 (From Part Cand					
Contributions Received from Political Committee	s (Part C)		\$ Ø		Transfer of the Property of th
All Other Contributions (Part D)			\$ 3,000.00		
talking transition of the second series and the second second	Total for the reporting period	(3)	\$ 3,000.00		
4. Other Receipts-Refunds, interest Earned, Ret	urned Checks, ETC. (From Part L	)			
	Total for the reporting period		\$ 6		
otal Monetary Contributions and Receipts durin Inter amount totals from Boxes 1, 2, 3 and 4; also Cover Page, Item B)	g this reporting period (Add and o enter this amount on Page 1, R	eport	\$ 3,400.00		

#### **SCHEDULE II**

### IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

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

iler dentification Number			
	MIRIEMANONS RECEIVED WATER	PS507000REESSIDER CONTRIBUTOR	
TOTAL for the reporting period	(1)	\$ 44.00	
2) IN KIND CONTRIBUTIONS	REGEIVED VALUE OF \$50.01 TO	5250(00)(ERGIMIPARTEE)	
TOTAL for the reporting period	(2)	\$ 0	
3 IN-KIND CONTRIBUTION R	EGEIVED-VALUE OVER \$250,00 (	ROMIPART G)	
TOTAL for the reporting period	(3)	\$ 6	
TOTAL VALUE OF IN-KIND CONTRIBUTION (Add and enter amount total on Page 1, Report Cover Page, Item.	als from boxes 1, 2, and 3; also en	ster \$ 46.00	

# Statement of Expenditures

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To Whom Paid MAPA	UETTE SAY	INGS BANK	Date [MM/DD/MYXI] \$	29.28
House # 380/ Street Addres	STERRETTA		Description of Expenditure	
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To Whom Paid	en e		Date (MM/DD/YYYM) \$	
House# Street/Address	, , ,	***************************************	Description of Expenditure	
©ity.	State	Zip Cede	Commence of a commence of a commence of the co	

# 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.)

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Fill that next feet management		 	•	1 1			,	-				TYTYY	TOTAL TO	27381	يحصيد	

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	5803 Street Address MILL ST	Date (MM/DD/XXXX)	
	ERIE State PA Zip Gode 165	09 Date (MM/DD/YYY) S	
73.00°	Liuce de convaliencies	Pate (MM/DD/AVXV) S	
	NANCY S. SHEA	04/26/2023	100.000
	4345 Street Address HOLIDAY DR	Date (MM/DD/xyyy) 5	
	ERIE State PA ZIA CODE 165	O6 Date [MM/DD/YYYY] \$	
(111)	AMERICA SHELLEY WATERMAN	Date (MIN/DD/ARAY)	
Hous	Street Address	04/29/2023 Date [MM/DD/YYYY] S	200.00
alv.	2553 Street Address KIMBERLY DR		
	ERIE State PA Zip Gode 1650	9 Date [MM/DD/YYYY] S	
(1741);XI	an eo (contributo)	@arawwy.dowara	
11. 11	# Street Address	Date (MM/DD/YYYY)	
		Date (MW/Db//YYW) (6	
CIV:	State Zip.Code	Date (MM/Db/YYYY) 5	
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Kloude	# Street Address		
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City	State Zip Gode	Date [MM/DD/YYYY] \$	
Folloge	ne of Contributor	CAG (MM/DD/WWW	
Häuse			
nuuse	Street Address	Date [MM/DD/YYYY] 3	
City	State Zip Code	Date (MM/DD/yyyy) S	
			·

#### 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)

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Professional Professional Committee Committee (Committee Committee			
\$P\$   \$P\$			
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Established to Authorities and the control of the c		
Full Name of Contributor	JAMES S. & RACHEL E. BOCK	Date [MM/DD/YYYY] \$ 500.00
<b>开放的外部,是对连续用等的使用的现在分词,并没有对抗不同的</b>	Address	03/07/2023 300.00  Date [MM/DD/YYYY] \$
1000	MARIANNA AVE	3,041000/25/11(1)
City ERIE	State   AA   Zip Code   16.509	Date [MM/DD/YYYY] \$
Employer Name	MILLCREEK TOWNSHIP	Occupation TOWNSHIP SUPERVISOR
Employer Mailing Address / Principal Place of Business	3608 W 26 THST ERIE 1	
Full Name of Contributor		Date [MM/DD/YYYY] \$
	ROBERT E. GLOWACKI	03/22/2023 500.00
	Address	Date [MM/DD/YYYY] \$
3645	WLAKERD	
ERIE	State PA Zip Code 16505	Date [MM/DD/YYYY] S
Employer Name	GLOWACKI MANAGEMENT CO LLC	Occupation REALTOR
Employer Mailing Address / Principal Place of Business	3645 WLAKERO ERIE	
Section of the appropriate of the section of the se		
Full Name of Contributor		Date [MM/DD/YYYY] \$
	DARYL E. TERELLA	03/28/2023 500,00
e i podera de se En alesa de	DARYL E. TERELLA  Address LONGWOOD DR	CONTROL TO THE CONTROL OF THE CONTRO
House # 6354 Street.  City ERIE	Address	03/28/2023 500,00  Date [MM/DD/YYYY] \$
House # 6354  City  ERIE  Employer Name	Address LONG-WOOD DR State Zip Code	03/28/2023 500,00  Date [MM/DD/YYYY] \$
House # 6354 Street.  City ERIE	Address LONG-WOOD DR  State PA Zip Code 16505  PASSPORT REALTY LLC	03/28/2023 500,00  Date [MM/DD/YYYY] \$    Date [MM/DD/YYYY]
House # 6354  Giry ERIE  Employer Name  Employer Mailing Address /	Address LONG-WOOD DR State PA Zip Code 16505	03/28/2023 500,00  Date [MM/DD/YYYY] \$    Date [MM/DD/YYYY]
House # 6354  City ERIE  Employer Name  Employer Mailing Address / Principal Place of Business  Full Name of Contributor	Address LONG-WOOD DR  State PA ZIP CODE 16505  PASSADRT REALTY LLC  5050 W RIDGE RD SUITE  SANDRA L. BOCK	03/28/2023 500,00  Date [MM/DD/YYYY] 5  Date [MM/DD/YYYY] 5.  Occupation REALTOR  201 EAIE PA 16506
House # 6354  City ERIE  Employer Name  Employer Mailing Address / Principal Place of Business  Full Name of Contributor  House # 5405	Address LONG-WOOD DR  State PA ZIP Code 16505  PASSPORT REALTY LLC  5050 W RIDGE RD SUITE	03/28/2023 500,00  Date [MM/DD/YYYY] 5  Date [MM/DD/YYYY] 5  Occupation REALTOR  201 EAIE PA 16506  Date [MM/DD/YYYY] 5
House # 6354  Giry ERIE  Temployer Name  Employer Mailing Address / Principal Place of Business  Full Name of Contributor  House # S405  City FAIRULE W	Address LONG-WOOD DR  State PA Zip Code 16505  PASSPORT REALTY LLC  5050 W RIDGE RD SUITE  SANDRA L. BOCK  Address TNOMAS RD  State Zip Code	03/28/2023 500,00  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  Occupation REALTOR  201 EAIE PA 16506  Date [MM/DD/YYYY] \$  03/31/2023 1,500.00
House # 6354  Giry ERIE  Temployer Name  Employer Mailing Address / Principal Place of Business  Full Name of Contributor  House # 5405  City Street	Address LONG-WOOD DR  State PA Zip Code 16505  PASSPORT REALTY LLC  5050 W RIDGE RD SUITE  SANDRA L. BOCK  Address TNOMAS RD  State Zip Code	03/28/2023   500,00     Date [MM/DD/YYYY]   5     Occupation   REALTOR     20