

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	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	Bryan Fife Committee to Elect for District Judge							
Street Address	4160 Woodside Avenue							
City	Erie	State	PA	Zip Code	16510			

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd 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)	05/16	Year	2023	Amendment Report	<input checked="" type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date
	01/26/2023	05/01/2023
A. Amount Brought Forward From Last Report	\$	0
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	8845.00
C. Total Funds Available (Sum of Lines A and B)	\$	8845.00
D. Total Expenditures (From Schedule III)	\$	4882.56
E. Ending Cash Balance (Subtract Line D from Line C)	\$	3962.44
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0
G. Unpaid Debts and Obligations (From Schedule IV)	\$	3400.00

For Office Use Only

2023 MAY -8 PM 12:15
ERIE COUNTY
VOTER REGISTRATION

Affidavit Section

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

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

Sworn to and subscribed before me this

day of 20

Signature

My Commission expires MO. DAY YR.

Gary K Reese
Signature of Person Submitting report

Printed Name

814
Area Code

899-3130
Daytime Telephone Number

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

day of 20

Signature

My Commission expires MO. DAY YR.

Bryan Fife
Signature of Candidate
Printed Name

814
Area Code

823 5425
Daytime Telephone Number



Pennsylvania Department of State

Bureau of Campaign Finance & Lobbying Disclosure

500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports. This form must be signed by hand where a signature is required.**

Name of Filing Committee, Candidate, or Lobbyist				
Reporting Cycle Name				
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input checked="" type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 4 6 th Tuesday Pre-Election	<input type="checkbox"/> Cycle 5 2 nd Friday Pre-Election
<input type="checkbox"/> Cycle 6 30 Day Post-Election	<input type="checkbox"/> Cycle 7 Annual Report	<input type="checkbox"/> Cycle 8 2 nd Friday Pre-Special Election	<input type="checkbox"/> Cycle 9 30 Day Post-Special Election	

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Dany K Reese
Signature of Treasurer, Candidate, or Lobbyist

05/08/2023
Date (MM/DD/YYYY)

GARY K. REESE
Printed Name

Erie, PA, Erie
Location (City/State/Country)



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement

500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist

05/09/2023

Date (MM/DD/YYYY)

Bryan Fife

Printed Name

ERIE PA

Location (City/State/Country)

Pennsylvania Campaign Finance Report

Filed by: Bryan Fife Committee to Elect for District Judge

Filing Method: Paper

District Number: 06-3-01

Office Code: OTH

Party Code: OTH

County Code : 25 Erie

2023 MAY -3 PM 1:42
ERIE COUNTY
VOTER REGISTRATION

Commonwealth of Pennsylvania - Campaign Finance Report

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

Total Pages - 17

Filer Identification Number		Report Filed By (Mark X)	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Bryan Fife Committee to Elect for District Judge						
Street Address		4160 Wooddale Avenue						
City	Erie	State	PA	Zip Code	16510			

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd 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)		05/16	Year	2023	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/26/2023	05/03/2023	
A. Amount Brought Forward From Last Report	\$	0	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	8845.00	
C. Total Funds Available (Sum of Lines A and B)	\$	8845.00	
D. Total Expenditures (From Schedule III)	\$	4882.56	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	3962.44	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	3400.00	

Affidavit Section

Part I- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.
I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

3 day of May 2023
Valerie Lynn Purzycki
Signature

My Commission expires
MO. DAY YR.

COMMONWEALTH OF PENNSYLVANIA
NOTARY SEAL
VALERIE LYNN PURZYCKI
ERIE COUNTY
MY COMMISSION EXPIRES MARCH 4, 2026
COMMISSION NUMBER 1282074

Danny K Reese
Signature of Person Submitting report
Printed Name
814 899-3130
Area Code Daytime Telephone Number

Part II- If this is a report of a Candidate's Authorized Committee, sign here.
I swear (or affirm) that to the best of my knowledge and belief this report and 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

3 day of May 2023
Valerie Lynn Purzycki
Signature

My Commission expires
MO. DAY YR.

[Signature]
Signature of Candidate
Printed Name
814 823 5925
Area Code Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
NOTARY SEAL
VALERIE LYNN PURZYCKI, NOTARY PUBLIC
ERIE COUNTY
MY COMMISSION EXPIRES MARCH 4, 2026
COMMISSION NUMBER 1282074

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number			
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	2315.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	0
All Other Contributions (Part B)		\$	3130.00
Total for the reporting period	(2)	\$	3130.00
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	0
All Other Contributions (Part D)		\$	3400.00
Total for the reporting period	(3)	\$	3400.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	0
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$	8845.00

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from Political Committees
with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification Number									
-----------------------------	--	--	--	--	--	--	--	--	--

								Amount	
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$	
House #						Street Address		Date [MM/DD/YYYY]	\$
City						State		Zip Code	
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$	
House #						Street Address		Date [MM/DD/YYYY]	\$
City						State		Zip Code	
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$	
House #						Street Address		Date [MM/DD/YYYY]	\$
City						State		Zip Code	
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$	
House #						Street Address		Date [MM/DD/YYYY]	\$
City						State		Zip Code	
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$	
House #						Street Address		Date [MM/DD/YYYY]	\$
City						State		Zip Code	
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$	
House #						Street Address		Date [MM/DD/YYYY]	\$
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]		\$		
Margaret Eimers					02/23/2023		\$	60.00	
House #	Street Address				Date [MM/DD/YYYY]		\$		
3404	Edison Avenue						\$		
City	State		Zip Code		Date [MM/DD/YYYY]		\$		
Erie	PA		16510				\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
Darren and Rebecca Hart					02/23/2023		\$	200.00	
House #	Street Address				Date [MM/DD/YYYY]		\$		
4126	Blueberry Drive						\$		
City	State		Zip Code		Date [MM/DD/YYYY]		\$		
Erie	PA		16510				\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
Stephen Sebald					02/23/2023		\$	250.00	
House #	Street Address				Date [MM/DD/YYYY]		\$		
3817	State Street						\$		
City	State		Zip Code		Date [MM/DD/YYYY]		\$		
Erie	PA		16508				\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
Bill Fife					02/23/2023		\$	240.00	
House #	Street Address				Date [MM/DD/YYYY]		\$		
5421	Creek Lane						\$		
City	State		Zip Code		Date [MM/DD/YYYY]		\$		
Erie	PA		16511				\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
Tim George					02/23/2023		\$	250.00	
House #	Street Address				Date [MM/DD/YYYY]		\$		
1488	Elleway Court						\$		
City	State		Zip Code		Date [MM/DD/YYYY]		\$		
Fairview	PA		16415				\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
Ed and Kelly Hess					02/23/2023		\$	150.00	
House #	Street Address				Date [MM/DD/YYYY]		\$		
154	Kraus Drive						\$		
City	State		Zip Code		Date [MM/DD/YYYY]		\$		
Erie	PA		16511				\$		

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]		\$	
Mark and Melinda Krahe						02/23/2023		\$	100.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
6329	East Lake Road		Erie		PA	16511		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Brenda Carr						02/23/2023		\$	160.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
3820	Mingo Avenue		Erie		PA	16510		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Luke and Mikaela Hess						02/23/2023		\$	60.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
6867	Hemmer Trail		Erie		PA	16510		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Richard and Jamie Wagner						02/23/2023		\$	100.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
4228	State Street		Erie		PA	16508		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
William and Joyce McAndrew						02/23/2023		\$	250.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
3805	Mingo Avenue		Erie		PA	16510		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Cristine Horr						02/23/2023		\$	250.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
3953	Leprechaun		Erie		PA	16510		\$	

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]		\$	
Jodi MANNA						02/23/2023		\$	140.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
3223	Dynes Avenue		Erie		PA	16510		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Alex Pol						02/23/2023		\$	60.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
6267	Cobblestone Drive		Erie		PA	16509		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Ed and Marlene Meyer						02/23/2023		\$	140.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
7008	Sandy Trail		Erie		PA	16510		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Eric Hackweider						02/23/2023		\$	250.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
455	West Gore		Erie		PA	16509		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Karen Meyer						02/23/2023		\$	120.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
915	Bowie Brae		Erie		PA	16511		\$	
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
Paul and Diane Vojetek						02/23/2023		\$	250.00
House #	Street Address		City		State	Zip Code	Date [MM/DD/YYYY]	\$	
5072	Westbury Farms		Erie		PA	16506		\$	

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]	\$	
Gary Reese					02/23/2023	\$	100.00
House #	Street Address		Date [MM/DD/YYYY]		\$		
4351	Cooper Road				\$		
City	State	Zip Code	Date [MM/DD/YYYY]		\$		
Erie	PA	16510			\$		
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]		\$		
					\$		
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 C

Contributions Received From Political Committees

Over \$250.00

Use this Part to itemize only contributions received from Political Committees
with an aggregate value over \$250.00 in the reporting period.

Filer Identification Number:									
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$		
City	State			Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$		
City	State			Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$		
City	State			Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$		
City	State			Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$		
City	State			Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$		
House #	Street Address					Date [MM/DD/YYYY]	\$		
City	State			Zip Code		Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee						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					Date [MM/DD/YYYY]		\$	
Bryan Fife					01/26/2023		\$	3000.00
House #	Street Address		Date [MM/DD/YYYY]		\$			
4160	Woodsdale Avenue		03/17/2023		\$	400.00		
City	State	Zip Code	Date [MM/DD/YYYY]		\$			
Erie	PA	16510			\$			
Employer Name					Occupation			
Summit Risk Services					Attorney			
Employer Mailing Address / Principal Place of Business								
120 Gibraltar Avenue, Horsham, PA 19044								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
							\$	
House #	Street Address		Date [MM/DD/YYYY]		\$			
					\$			
City	State	Zip Code	Date [MM/DD/YYYY]		\$			
					\$			
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
							\$	
House #	Street Address		Date [MM/DD/YYYY]		\$			
					\$			
City	State	Zip Code	Date [MM/DD/YYYY]		\$			
					\$			
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
							\$	
House #	Street Address		Date [MM/DD/YYYY]		\$			
					\$			
City	State	Zip Code	Date [MM/DD/YYYY]		\$			
					\$			
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business								

PART E

Other Receipts**REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.**

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Number:

Full Name

House #

Street Address

City

State

Zip
Code

Date [MM/DD/YYYY]

\$

Receipt Description

Full Name

House #

Street Address

City

State

Zip
Code

Date [MM/DD/YYYY]

\$

Receipt Description

Full Name

House #

Street Address

City

State

Zip
Code

Date [MM/DD/YYYY]

\$

Receipt Description

Full Name

House #

Street Address

City

State

Zip
Code

Date [MM/DD/YYYY]

\$

Receipt Description

Full Name

House #

Street Address

City

State

Zip
Code

Date [MM/DD/YYYY]

\$

Receipt Description

Full Name

House #

Street Address

City

State

Zip
Code

Date [MM/DD/YYYY]

\$

Receipt Description

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**

Filer Identification Number:	
------------------------------	--

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the reporting period	(1)	\$

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the reporting period	(2)	\$

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the reporting period	(3)	\$

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)		\$
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SCHEDULE II
PART F
In-Kind Contributions Received
VALUE OF \$50.01 TO \$250

Filer Identification Number:	
------------------------------	--

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Description of Contribution							

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:	
------------------------------	--

Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #	Street Address				Date [MM/DD/YYYY]		\$	
City				State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #	Street Address				Date [MM/DD/YYYY]		\$	
City				State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #	Street Address				Date [MM/DD/YYYY]		\$	
City				State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #	Street Address				Date [MM/DD/YYYY]		\$	
City				State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			

SCHEDULE III

Statement of Expenditures

Filer Identification Number:									
To Whom Paid		Sweets & Giggles Limited				Date [MM/DD/YYYY]		\$	300.00
House #	122	Street Address		Madeline Drive		Description of Expenditure			
City	Edinboro	State	PA	Zip Code	16412	Cookies and Packaging			
To Whom Paid		United States Post Office				Date [MM/DD/YYYY]		\$	31.00
House #	7175	Street Address		Buffalo Road		Description of Expenditure			
City	Harborcreek	State	PA	Zip Code	16421-9800	Post Office Box			
To Whom Paid		Walmart Supercenter				Date [MM/DD/YYYY]		\$	21.72
House #	5741	Street Address		Buffalo Road		Description of Expenditure			
City	Harborcreek	State	PA	Zip Code	16421	Office supplies			
To Whom Paid		Walmart Supercenter				Date [MM/DD/YYYY]		\$	15.62
House #	5741	Street Address		Buffalo Road		Description of Expenditure			
City	Harborcreek	State	PA	Zip Code	16421	Office supplies			
To Whom Paid		Rosco's Sports Bar and Grill				Date [MM/DD/YYYY]		\$	856.80
House #	4646	Street Address		Buffalo Road		Description of Expenditure			
City	Erie	State	PA	Zip Code	16510	Food for fundraiser event			
To Whom Paid		Rosco's Sports Bar and Grill				Date [MM/DD/YYYY]		\$	502.55
House #	4646	Street Address		Buffalo Road		Description of Expenditure			
City	Erie	State	PA	Zip Code	16510	Beverages for fundraiser event			
To Whom Paid		Frameit				Date [MM/DD/YYYY]		\$	284.61
House #	3799	Street Address		Shannon Road		Description of Expenditure			
City	Erie	State	PA	Zip Code	16510	Yard Signs and Stakes			
To Whom Paid		Frameit				Date [MM/DD/YYYY]		\$	49.82
House #	3799	Street Address		Shannon Road		Description of Expenditure			
City	Erie	State	PA	Zip Code	16510	Breast stickers			

SCHEDULE III

Statement of Expenditures

Filer Identification Number:							
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To Whom Paid		Creative Imprint Systems			Date [MM/DD/YYYY]	\$	240.50
House #	2670	Street Address West 11th Street			Description of Expenditure		
City	Erie	State	PA	Zip Code	16505	Tee Shirts	

To Whom Paid		Gohrs on Demand			Date [MM/DD/YYYY]	\$	270.30
House #	4134	Street Address Pittsburgh Avenue			Description of Expenditure		
City	Erie	State	PA	Zip Code	16509	Doorhangers	

To Whom Paid		Erie Promotions & Expos, Inc.			Date [MM/DD/YYYY]	\$	315.09
House #		Street Address P.O. Box 16514			Description of Expenditure		
City	Erie	State	PA	Zip Code	16514	Yard Signs	

To Whom Paid		Valpak of Erie			Date [MM/DD/YYYY]	\$	407.40
House #	1	Street Address Valpak Ave North			Description of Expenditure		
City	Saint Petersburg	State	FL	Zip Code	33716	Single Panel Insert 2 Sided	

To Whom Paid		ENGRAVED IMAGING			Date [MM/DD/YYYY]	\$	143.10
House #	3799	Street Address SHANNON ROAD			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	Magnet Campaign Buttons	

To Whom Paid		Frameit			Date [MM/DD/YYYY]	\$	379.48
House #	3799	Street Address SHANNON ROAD			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	Yard Signs and Stakes	

To Whom Paid		Frameit			Date [MM/DD/YYYY]	\$	379.48
House #	3799	Street Address SHANNON ROAD			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	Yard Signs and Stakes	

To Whom Paid		Frameit			Date [MM/DD/YYYY]	\$	379.48
House #	3799	Street Address SHANNON ROAD			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	Yard Signs and Stakes	

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid					Date [MM/DD/YYYY]		\$
United States Post Office					04/18/2023		21.00
House #	Street Address		Description of Expenditure				
7175	Buffalo Road		Post Office Box				
City	State	Zip Code					
Harborcreek	PA	16421-9800					
To Whom Paid					Date [MM/DD/YYYY]		\$
Framert					04/22/2023		284.61
House #	Street Address		Description of Expenditure				
3799	Shannon Road		Yard Signs and Stakes				
City	State	Zip Code					
Erie	PA	16510					
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					

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number:	
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Name of Creditor						Outstanding Balance of Debt	
Bryan Fife							
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 3000.00	
4160	Woodsdale Avenue	01/26/2023					
City	Erie	State	PA	Zip Code	16510		
Description of Debt							
Loan to Committee to Elect Bryan Fife							

Name of Creditor						Outstanding Balance of Debt	
Bryan Fife							
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 400.00	
4160	Woodsdale Avenue	03/17/2023					
City	Erie	State	PA	Zip Code	16510		
Description of Debt							
Loan to Committee to Elect Bryan Fife							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]					
City		State		Zip Code			
Description of Debt							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]					
City		State		Zip Code			
Description of Debt							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]					
City		State		Zip Code			
Description of Debt							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]					
City		State		Zip Code			
Description of Debt							