

Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible. It should be typed)

Filer Identificati	on	(Report		v Ca	ndida			Commi		10 70 70 70		Lobb	vist
Number			(Mark	140000000000000000000000000000000000000				X						
Name of Filing (Lobbyist	Committee, Ca	ndidate or	BRIAN	SHANK										
Street Address		ran en	412 CA	MBRID	GE RD									
City	ERIE	en e			Sta	ite	PA		Zip Coc	le	16511			
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 Tu Pre-Ele	A 10 10 10 10 10 10 10 10 10 10 10 10 10	5- 2 nd Fr Pre- Ele		6-30 Da Election	STATE OF THE PARTY.	7- Anni	ual	Special 2 Pre-Elect	nd Friday tion	The state of the state of the state of	ial 30 Day Election
	X									3766 .52			eti Alan	
Date Of Election (MM/DD/YYYY)		05/17/2023	Year		2023	3	Amendi Report	ment		1	Termina Report	tion		
Summary of Re	ceipts and	From Date		To Date	e de la companya de l					For C	Office Use	Only		
Expenditures		01/01/2023		05	/01/2023		ra na fa Galen Can	Kerista Seria	1 114 150 130 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15					
A. Amount Brou	ight Forward F				1134.61			urtson (Pri		3 22 3 4 7 5				
B. Total Moneta (From Schedule	KIND OF THE PROPERTY OF THE PR	ns and Receipts	\$		3010						*	≪	25	
C. Total Funds A (Sum of Lines A	vailable and B)		\$		1144.61								13 H	
D. Total Expend (From Schedule	itures III)	eder (1982)	\$		3602.83							双 页	2023 MAY -4	
E. Ending Cash E (Subtract Line D	from Line C)		\$		541.78								₩ PM	
F. Value of In-Ki (From Schedule	II)		\$		0							R	.;; ∓	
G. Unpaid Debt (From Schedule		ins	\$		0								250	
Part 1- If this is a (Committee repo	t, treasurer sign h	ere. If t	is a 🗲 aı	റ്റിfida n didage rep	ort ca	ndidate sic	n here.						
l swear (or affirm)	that this report,	including the atta	ched sc	duleg o	is i	to the	best of any	Knowled	ge and be	lief tr	ue, correct	and comple	te.	
I swear (or affirm) Sworn to and subs	scribed before m	e this	r, Pen	missi	wealt	1	15	-(25		1/			
ALL A	(X.11	lotor	nsyrvar 一)	noiss He no	h of Pe		1812:T	ignature	ے of Person	Subm	itting repor	t		
	Signature		_ 8	를	ennsyn atson, N				Printed				_	
My Commission e	xpires <i>]</i>	2 2021 DAY YR.		Decei 14	vania totary	-8	rea Code		_			3612 hone Numbe	 er	
				2 3 4	PN		•		1.	Jay	e reiepi		-1	
Part II- If this is a r I swear (or affirm) amended.					itical c y nn			lated any	/ provision	ns of t	he Act of Ju	ıne 3, 1937 ((P.L. 13	33, NO.320) as
Sworn to and subs	scribed before m	e this		- L	L									
day of_		20		¹ i		_								
, 		_		.				Sigr	nature of (Candic	late			
	Signature		-			_			Printed N	ame				
My Commission e		B/11							-			· · · · · · · · · · · · · · · · · · ·		
	MO.	DAY YR,				P	rea Code			Dayt	ıme Teleph	one Number	r	

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer identification Number			
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		((@)	
	3.653		
Total for the reporting period	(1)	\$	60
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	6.4	6 (3) 1 (3)	
Contributions Received from Political Committees (Part A)		\$	250
All Other Contributions (Part B)		\$	200
Total for the reporting period	(2)	\$	450
3. Contributions Over \$250.00 (From Part C and Part D)	TING HARA		
Contributions Received from Political Committees (Part C)		\$	1500
All Other Contributions (Part D)		\$	1000
Total for the reporting period	(3)	\$	2500
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) : -	2 (1)	
Total for the reporting period	(4)	\$	0
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, ReCover Page, Item B)		\$	3010

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	r Number					
						Amount
Full Name of Cor			————————————————————————————————————	Date [MM/DD/YYYY]	\$	250
Committee	g and the second	KELLY FOR CONGR	RESS	01/20/2023		250
House #	Street Address	3.5		Date [MM/DD/YYYY]	\$	<u> </u>
		PO BOX 476		The state of the s	Linvier Linvier Linvier	1
City LYNDOR	A5	State PA	Zip Code 16045	Date [MM/DD/YYYY]	\$	
Full Name of Cor	itr buting-			Date [MM/DD/YYYY]	\$	
Committee						
House #	Street Address	1		Date [MM/DD/YYYY]	\$	
		2 Maria 1 Ma 1 Maria 1				
City	· · · · · · · · · · · · · · · · · · ·	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Cor	Tributing			Date [MM/DD/YYYY]	\$	
Committee				POSE ININITED VICTOR	4 ? : 1	
House #	Street Address			Date [MM/DD/YYYY]	\$	1
City	FV	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Cor Committee	ntributing			Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
						1
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Cor Committee	ntributing			Date [MM/Db/YYYY]	\$	
g garaget e kergatik dan l				The state of the s		
House#	Street Address			Date [MM/DD/YYYY]	\$	
C(ex. 3		l Caraca	27 K/P22 K/S/S	Date [MM/DD/YYYY]		
City		State	Zip Code	Date (MIM/DD/YYYY)	.	
Full Name of Cor	ntributing	o ogregovanojskoh (E. Nij		Date [MM/DD/YYYY]	_ \$	1
Committee	And the second s			(n <u>2</u> 38000 n 2370 m 25 m 2		
House #	Street Address		_ _	Date [MM/DD/YYYY]	\$ 	-
CH				The state of the s	1	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
						7

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:		
The state of the s		

SCHOOL NEW TOTAL PROVIDE SCHOOL SCHOO				25/40
Full Name of Contributor SUZANNE W	EDED		Date [MM/DD/YYYY]	200
			02/07/2023	
House # Street Address			Date [MM/DD/YYYY]	
3336 N	ORRIS DR			
city ERIE	State PA	Zip Code 16509	Date [MM/DD/YYYY] :	
	FA	10309		
Full Name of Contributor			Date [MM/DD/YYYY]	
House # Street Address			Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/YYYY] - 3	
Full Name of Contributor			Date [MM/DD/YYYY]	
House # Street Address			Date [MM/DD/YYYY]	
City	State •	Zip Code	Date [MM/DD/YYYY]	
Fill Came of Contributors			Date [MM/DD/YYYY]	
House # Street Address			Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/YYYY]	<u> </u>
Full Name of Contributor	[2/03.5/06/5-225.5/1/2-1-]	1 Palmin - Palgody Chillips - Orlino - Palgody - Orlino - Palgody	Date [MM/DD/YYYY]	
House# Street Address		· · · · · · · · · · · · · · · · · · ·	Date [MM/DD/YYYY] :	
City	State	Zip Code	Date [MM/DD/YYYY]	
			*	
Full Names of Contributor	Processing and a second		Date [MM/DD/XYXY]	X
				3
House# Street Address			Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/YYYY]	<u> </u>
71.77	J. G.C.	-ik -oac		
			i i	

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			Date MM/	DD/YYYY] \$	
Contributing Committee	LPAC		01/26/2	2023	500
House # Str	eet Address W 10TH ST		Date (MM/	DD/YYYY] \$	
ERIE	State	A Zip Code	Date [MM/I	DD/YYYY] \$	
Full Name of			Date MM/	OD/YYYYY] \$	
Contributing Committee	COMMITTEE TO ELECT	DAN LAUGHLIN	01/27/2	2023	1000
House # Str 4619	eet Address AUTUMNWOO	DD TRL	Date MM/	\$ [\\\\\\\	
City	State F	A Zip Code	Date [MM/	DD/YYYY) \$	
Full Name of Contributing Committee			Date [MM/	OD/YYYY) s	
House # Str	eet Address		Date [MM/	OD/YYYY] \$	
City	State	Zip Code	Date MM/	od/mmi s	
Full Name of Contributing Committee			Date (MM/	DD/YYYYJ S	
House# Str	eet Address		/Date [MM/	DD/YYYY] \$.	, , , , , , , , , , , , , , , , , , , ,
City	State	Zip Code	Date (MM/	50/77777] \$	
Full Name of Contributing Committee			Date [MM/	5D/YYYYY] \$	
House # Str	eet Address		Date [MM/	OD/YYYY] \$	
City	State	Zip Code	Date [MM/	DD/YYYYJ \$	
Full Name of Contributing Committee			Date (MM/	od/vyvy) s	
House # Str	eet Address		Date (MM/	DD/YYYY] Ś	
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]
	LORI HETRICK	01/02/2023
	reet Address	Date [MM/DD/YYYY] \$
1533	W 30TH ST	
City ERIE	State PA Zip Code 16508	Date [MM/DD/YYYY] \$
	FA 10000	
Employer Name	ONE SENIOR CARE	Occupation ACCOUNTANT
Employer Mailing Addres Principal Place of Busines		
Full Name of Contributor		Date [MM/DD/YYYY] \$
House # St	reet Address	Date [MM/DD/YYYY] 5
city	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Addres Principal Place of Busines		Trigger as entire and the second seco
Full Name of Contributor		Date [MM/DD/YYYY] 5
House# St	reet Address	Date [MM/DD/YYYY] \$
City	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address Principal Place of Busines		
Full Name of Contributor		Date [MM/DD/YYYY] \$
ye ku ciri. Ye da ye d		
House # St	reet Address	Date (MM/DD/YYYY) \$
City	State Zip Code	Date [MM/DD/YYYY] \$
Empløyer Name	Property Server 1 Property Server (Server) (Server)	Occupation .
Employer Mailing Addres	ss/	

Principal Place of Business

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 GONTRIE	3UTIONS RECEIVED-VA	ALUE OF \$50.00 OR LES	SS PER CONTRIBUTOR
TOTAL for the reporting period	(1)	\$	
2. IN-KIND CONTRIBUTIONS REG	ENVER VALUE RESERT	ነቱ ፒሶ ፍንድስ ባህ (EBOW)	DADT C)
2. TRIMING ON MOOTING INC.	ENCOTACOL OF POOL	11 (10/3230:00); (10/11)	CANTITY
TOTAL for the reporting period	(2)	\$	
3. IN-KIND CONTRIBUTION RECE	IVED-VALUE OVER \$25	0.00 (FROM PART G)	
TOTAL for the reporting period	(3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTION PERIOD (Add and enter amount totals from		1 ' 1	
on Page 1, Report Cover Page, Item F)	OM DOXES 1, 2, and 3, a	also enter 0	

Statement of Expenditures

● 使用性性 (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Filer Identification Number:			
ASSEMBLE AND APPROXIMATE AND A			

To Whom Paid SIGNSONTHECH	HEAP.COM		Date [MM/DD/YYYY] \$ 41:	2.08
House # 11525B Street Address	STONEHOLLOW DR #2	20	Description of Expenditure	
City AUSTIN	State TX	Zip	YARD SIGNS	
		Code /8/58		
To Whom Paid MAGNETSONTH	ECHEAP,COM		Date [MM/DD/YYYY] \$ 290	6.59
	STONEHOLLOW DR #1		Description of Expenditure	
City AUSTIN	State TX	Zip Code 78758	DOOR & BUMPER MAGNETS	
To Whom Paid			Date [MM/DD/YYYY] \$	7.00
AMAZON			01/20/2023	7,63
	TERRY AVE N	Holes and rooms and	Description of Expenditure	
SEATTLE	State WA	Zip Code 98109	CAN COOZIES	
To Whom Paid	014		Date [MM/DD/YYYY] \$	
4ALLPROMOS.C	ОМ		01/26/2023	2.39
	WEST AVE		Description of Expenditure	
City ESSEX	State CT	Zip Code 06426	CUSTOM PENS	
To Whom Paid WALMART.COM			Date [MM/DD/YYYY] \$ 90.	.05
	S.W. 8TH ST	LA SALVONIA CONTROL DE LA CONT	Description of Expenditure	
BENTONVILLE	State AK	Zip Code 72716	MAGNETS	
To Whom Paid BESTOFSIGNS.C	СОМ		02/07/2023	4.27
	LAKES PKWY		Description of Expenditure	
City LAWRENCEVILLE	State GA	Zip Code 30043	BANNERS	·
To Whom Paid KINGDOM DTF			Date [MM/DD/YYYY] \$ 10:	5.87
House # 109 Street Address	AMBERSWEET WAY #		Description of Expenditure	
DAVENPORT	State FL	Zip Code 33897	DTF SHIRT SUPPLIES	
To Whom Paid MCLAUD TECHN	OLOGIES		Date [MM/DD/YYYY] \$ 35:	8.01
	W 178TH ST #200		Description of Expenditure	
GARDENA	State CA	Zip Code 90248	INK	

Statement of Expenditures

Filer Identification Number:			
48FHAELMANTHEATINN NIOMNAKSSI			
# 02:00 % A 10:00 M 10			

To Whom Paid AMAZON Date [MIM/DD/YYYY] \$ 21.18	
City SEATTLE State WA Zip Gode 98109 REFLECTIVE WINDOW VINYL	
SEATTLE WA Gode 98109 REFLECTIVE WINDOW VINYL	200 00 00 00 000
To Whom Paid Date [MM/DD/YYYY] \$ 140.25	
House # 4850 Street Address WRIGHT RD #100 Description of Expenditure	
City STAFFORD State TV Zip 27477 RITTONS	
CORE	
To Whom Paid Date [MM/DD/YYYY] \$ 98.54	
House # 410 Street Address TERRY AVE N Description of Expenditure	
SEATTLE STate WA Zip 98109 MAGNETS	2330 333 300
To Whom Paid FLYING FOR VETERANS Date: [MM/DD/YYYY] \$ 30	
House # Street Address Description of Expenditure	
1405 SOUTH FERN ST #702	
City ARLINGTON State VA Zip Code 22202 DONATION	1
To Whom Paid ETSY Date [MM/DD/YYYY] \$ 66.15	
House # 117 Street Address Adams St Description of Expenditure	
ETSY 03/25/2023 66.15	
House # 117 Street Address Adams St Description of Expenditure City O 1.1 State D 1 / Zip 1.10 0.1 CAN COOKES	
House # 117 Street Address Adams St Description of Expenditure City Brooklyn State NY Code 1/20/ CAN COOZIES To Whom Paid KINGDOM DTE	
House # 117 Street Address Adams St Description of Expenditure City Brooklyn State NY Code 1/20/ CAN COOZIES To Whom Paid KINGDOM DTF House # Street Address Description of Expenditure Page 1/20/ CAN COOZIES Date [MM/DD/YYYY] \$ 71.94 Phouse # Street Address Description of Expenditure	
House # 117 Street Address Address Ambersweet way #803 Street Address Fig. State Fig. S	
House # 1/1 Street Address Adams St Description: of Expenditure City Brooklyn State NY Zip Code 1/201 CAN COOZIES To Whom Paid KINGDOM DTF House # 109 Street Address AMBERSWEET WAY #803 City DAVENPORT State FL Zip Code 33897 DTF FILM FOR SHIRTS To Whom Paid HOME DEPOT	
House # 1/1 Street Address Ambersweet Way #803 City Davenport State Dy Zip Code 1/20/ CAN COOZIES Date [MM/DD/YYYY] \$ 71.94 Date [MM/DD/YYYY] \$ 71.94 Description of Expenditure City Davenport State FL Zip Code 33897 DTF FILM FOR SHIRTS To Whom Paid Home Depot Date [MM/DD/YYYY] \$ 147.20 Description of Expenditure Date [MM/DD/YYYY] \$ 147.20 Description of Expenditure	
House # 117 Street Address Adams S+ Description of Expenditure City Brooklyn State NY Zip Code 1/20/ CAN COOZIES To Whom Paid KINGDOM DTF House # 109 Street Address AMBERSWEET WAY #803 City DAVENPORT State FL Zip Code 33897 DTF FILM FOR SHIRTS To Whom Paid HOME DEPOT Date: [MM/DD/YYYY] \$ 147.20 House # 7451 Street Address PEACH ST City FDIF	
House # III Street Address Haams SH City Brooklyn State NY Zip Code IIIO CAN COOZIES To Whom Paid KINGDOM DTF To Whom Paid DAVENPORT State FL Zip Code 33897 DTF FILM FOR SHIRTS To Whom Paid Home DEPOT Date: [MM/DD/YYYY] \$ 147.20	

Statement of Expenditures

Filer Identification Number:			
and the research of the state o			

To Whom Paid CAM ERIE			Date [MM/DD/XYYY] \$	50
			04/17/2023	
	12TH ST		Description of Expenditure	
City ERIE	State PA	Zjp Code 16501	VIDEO AD	
To Whom Paid BESTOFSIGNS.COM			Date [MM/DD/YYYY] \$	225.26
		.,,	04/19/2023	220.20
House # 1625 Street Address LA	KES PKWY		Description of Expenditure	
LAWRENCEVILLE	State GA	Zip Code 30043	BANNERS	
To Whom Paid SIGNSONTHECHEAP.COM			Date [MM/DD/AYAY] S	412.08
			04/19/2023	112.00
	ONEHOLLOW DR #220)	Description of Expenditure	
AUSTIN	State TX	Zip Code 78758	YARD SIGNS	
To Whom Paid AMAZON			Date [MM/DD/YYYY] \$	69.94
			04/27/2023	109.94
House # 410 Street Address TE	RRY AVE N		Description of Expenditure	
City SEATTLE	State WA	Zip Gode 98109	SOLAR LIGHTS FOR BANNE	:RS
To Whom Paid ALLDAYSHIRTS.CO	20.4		Date [MM/DD/YYYY] \$	454.05
	7101		04/27/2023	154.35
House # 3001 Street Address CE	NTERPORT CIRLE		Description of Expenditure	
POMPANO BEACH	State FL	Zíp Code 33064	T-SHIRTS	See a second control of the second control o
To Whom Paid AMAZON			Date [MM/DD/YYYY] \$	12.71
			04/28/2023	12.71
House # 410 Street Address	RRY AVE N		Description of Expenditure	
CITY SEATTLE	State	Zip Gode 98109	LIGHT CHARGER ADAPTER	S
To Whom Paid Austin]	Jotzel		Date [MM/DD/YYYY] \$	150
House # MC Street Address	<u> </u>	<u> </u>	3/16/23 Description of Expenditure	100
(A320) [L	Deer Kun) RAIC		
ERIE	PA PA	Code 16509	Web Design	1
To Whom Paid			Date [IMM/DD/YYYY] \$	
House # Street Address			Description of Expenditure	
City	State	Zip Code		