

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	☐
Name of Filing Committee, Candidate or Lobbyist	Friends of Chris Drexel							
Street Address	2713 Nagle Rd							
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	
☐	☐	☐	☐	☒	☐	☐	☐	☐	
Date Of Election (MM/DD/YYYY)	11/07/2023		Year	2023		Amendment Report	☐	Termination Report	☐

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	06/06/2023	10/23/2023	
A. Amount Brought Forward From Last Report	\$	2,555.49	2023 OCT 27 PM 12:38 ERIE COUNTY VOTER REGISTRATION
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	38,353.95	
C. Total Funds Available (Sum of Lines A and B)	\$	40,909.44	
D. Total Expenditures (From Schedule III)	\$	33,390.91	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	7,518.53	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	70,855.79	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	21,030.83	

Affidavit Section

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

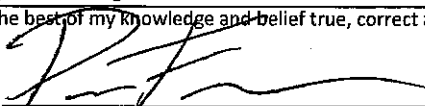
I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

_____ day of _____ 20____

Signature

My Commission expires _____
MO. DAY YR.



Signature of Person Submitting report
Peter Frank

Printed Name

814 _____ 897-5674
Area Code Daytime Telephone Number

Part II- If this is a report of a **Candidate's Authorized Committee**, candidate shall sign here.

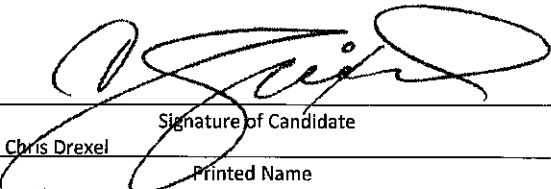
I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this

_____ day of _____ 20____

Signature

My Commission expires _____
MO. DAY YR.



Signature of Candidate
Chris Drexel

Printed Name

814 _____ 504-4108
Area Code Daytime Telephone Number

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)	\$ 1,980.50
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	100
All Other Contributions (Part B)		\$	4,165
Total for the reporting period		(2)	\$ 4,265
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	27,300
All Other Contributions (Part D)		\$	4,808.45
Total for the reporting period		(3)	\$ 32,108.45
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>		\$	38,353.95

PART A

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.

Attached

Filer Identification Number												
										Amount		
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]	\$	

Date	Contribution	Name	Address	City	State	ZIP
10/2/2023	\$ 100.00	LPAC-Erie	120 W 10th St	Erie	PA	16501

PART B

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

See
Attached

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]	\$	
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]	\$	

Date	Contribution	First Name	Last Name	Address	City	State	ZIP
6/12/2023	\$ 250.00	Eric	Purchase	2525 W 26th Street	Erie	PA	16506
7/11/2023	\$ 250.00	Nick	Marinelli	816 Parkside Dr,	Erie	PA	16511
7/20/2023	\$ 100.00	Sarah	Purvis	6135 Spires Dr	Erie	PA	16509
7/20/2023	\$ 75.00	Thomas	Lohse	11062 Freeport Ln	North East	PA	16428
7/20/2023	\$ 100.00	James	McQuiston	11245 Lakefront Drive	North East	PA	16428
7/20/2023	\$ 100.00	Carl	Anderson	3830 Parade St	Erie	PA	16504
7/20/2023	\$ 100.00	Doris	Cipolla	8640 East Lake Rd	Erie	PA	16511
7/20/2023	\$ 200.00	Anna	McCartney	11078 Freeport Ln	North East	PA	16428
7/20/2023	\$ 200.00	Hugh	McCartney	11078 Freeport Ln	North East	PA	16428
7/20/2023	\$ 200.00	Peter	Sala	1637 W 24th St	Erie	PA	16502
7/20/2023	\$ 250.00	Ronald	Filippi	4950 Buffalo Rd	Erie	PA	16510
7/20/2023	\$ 250.00	Richard	Filippi	519 W 9th St	Erie	PA	16502
7/20/2023	\$ 250.00	Preston	Nouri	808 Pasadena Dr	Erie	PA	16505
8/29/2023	\$ 250.00	Carolyn	Ruth	7830 East Lake Road	Erie	PA	16511
8/29/2023	\$ 100.00	Rob	Scypinski	1666 12th Ave	San Francisco	CA	94122
9/15/2023	\$ 100.00	Holly	English	990 Boyer Rd	Erie	PA	16511
9/18/2023	\$ 100.00	MARK	SUNSERI	5480 Old Zuck Rd	Erie	PA	16506
9/25/2023	\$ 250.00	John	Vanco	1317 Parade Street	ERIE	PA	16503
9/26/2023	\$ 100.00	Robert	Rhodes	13050 Fox Hollow Dr	Edinboro	PA	16412
9/26/2023	\$ 200.00	Edmund	Abegg	326 Meadville St	Edinboro	PA	16412
10/4/2023	\$ 65.00	Jerry	Defazio	3907 Raspberry St	Erie	PA	16509
10/4/2023	\$ 75.00	Lisa	Gnibus	1122 Wildwood Way	Erie	PA	16511
10/4/2023	\$ 100.00	Ron	Dinicola	4134 Commodore Dr	Erie	PA	16506
10/4/2023	\$ 100.00	Stephen	Sensor	2023 Harrison St	Erie	PA	16510
10/5/2023	\$ 100.00	Lisa	Gnibus	1122 Wildwood Way	Erie	PA	16511
10/14/2023	\$ 100.00	Douglas	Watts	12663 Forrest Dr	Erie	PA	16412
10/11/2023	\$ 100.00	Paul	Susko	5501 Dobler Rd	Erie	PA	16417
10/12/2023	\$ 100.00	Carl	Anderson	3830 Parade St	Erie	PA	16504
	\$ 4,165.00						

PART C
Contributions Received From Political Committees
Over \$250.00

**See
Attached**

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]		\$							

Date	Contribution	Name	Address	City	State	ZIP
8/11/2023	\$ 500.00	Demstock PA	10 Clark Dr	Bradford	PA	16701
8/17/2023	\$ 300.00	Committee to Elect Chuck Nelson	646 W 9th St	Erie	PA	16502
8/24/2023	\$ 1,000.00	Greater PA Carpenters PEC	1803 Spring Garden St	Philadelphia	PA	19130
9/12/2023	\$ 500.00	CWA - COPE PCC	501 3rd St, NW	Washington	DC	20001
10/4/2023	\$ 14,000.00	Democracy FIRST PAC	611 Pennsylvania Ave SE, #143	Washington	DC	20003
10/17/2023	\$ 11,000.00	Democracy FIRST PAC	611 Pennsylvania Ave SE, #143	Washington	DC	20003
	\$ 27,300.00					

PART D
All Other Contributions

Over \$250.00

**See
Attached**

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]	\$	
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						
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						

[illegible]

PART E
Other Receipts

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

N/A

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							

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)	\$ 17.63

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
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)	\$ 70,838.16

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)		\$ 70,855.79
---	--	--------------

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

N/A

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

See
Attached

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

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

Full Name of Contributor	Address	City	State	Zip	Date	Amount	Description
DemocracyFIRST PAC	611 Pennsylvania Ave SE #143	Washington	DC	20003	9/19/2023	\$ 3,000.00	web design
DemocracyFIRST PAC	611 Pennsylvania Ave SE #143	Washington	DC	20003	10/20/2023	\$ 5,843.84	digital ads
DemocracyFIRST PAC	611 Pennsylvania Ave SE #143	Washington	DC	20003	9/19/2023	\$ 61,994.32	digital and TV ads
						\$70,838.16	

SCHEDULE III
Statement of Expenditures

See
Attached

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

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		

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	Address	City	State	Zip	Date	Amount	Description
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	6/7/2023	\$ 1.33	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	6/7/2023	\$ 0.75	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	6/7/2023	\$ 0.67	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	6/7/2023	\$ 0.30	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	6/12/2023	\$ 5.73	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	6/12/2023	\$ 3.75	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	6/13/2023	\$ 0.78	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	6/13/2023	\$ 0.38	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	7/11/2023	\$ 5.73	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	7/11/2023	\$ 3.75	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	7/17/2023	\$ 11.23	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	7/17/2023	\$ 7.50	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	7/17/2023	\$ 0.78	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	7/17/2023	\$ 0.38	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	7/18/2023	\$ 0.78	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	7/18/2023	\$ 0.38	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	7/19/2023	\$ 0.78	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	7/19/2023	\$ 0.38	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	7/20/2023	\$ 1.33	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	7/20/2023	\$ 0.75	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	8/2/2023	\$ 11.23	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	8/2/2023	\$ 7.50	Service fees for online contributions
Bergmann Zwerdling Direct	1350 Connecticut Avenue, NW #400	Washington	DC	20036	8/4/2023	\$ 269.15	Postcards printing, delivery
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	8/29/2023	\$ 5.73	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	8/29/2023	\$ 3.75	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	8/29/2023	\$ 2.43	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	8/29/2023	\$ 1.50	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	8/30/2023	\$ 22.23	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	8/30/2023	\$ 15.00	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	9/9/2023	\$ 0.78	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	9/9/2023	\$ 0.38	Service fees for online contributions
Harborcreek Township	5601 Buffalo Road	Harborcreek	PA	16421	9/6/2023	\$ 100.00	Pavillion rental for fundraiser
Bergmann Zwerdling Direct	1350 Connecticut Avenue, NW #400	Washington	DC	20036	9/12/2023	\$ 300.00	Postcards printing, delivery
Silkscreen Specialties Unlimited	1702 W 8th St	Erie	PA	16505	9/12/2023	\$ 795.50	T-shirts for campaign
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	9/12/2023	\$ 1.11	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	9/12/2023	\$ 0.60	Service fees for online contributions
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	9/15/2023	\$ 2.43	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	9/15/2023	\$ 1.50	Service fees for online contributions

[illegible]

Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	10/7/2023	\$	0.26	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	10/7/2023	\$	0.02	Service fees for online contributions
Rosco's	4646 Buffalo Rd	Erie	PA	16510	10/11/2023	\$	100.00	Room rental for fundraiser
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	10/12/2023	\$	0.37	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	10/12/2023	\$	0.10	Service fees for online contributions
Widget Financial	2154 E Lake Rd	Erie	PA	16511	10/17/2023	\$	15.00	Bank fee for receiving a wire transfer
Widget Financial	2154 E Lake Rd	Erie	PA	16511	10/20/2023	\$	15.00	Bank fee for sending a wire transfer
Deliver Strategies, LLC	PO Box 100970	Arlington	VA	22210	10/20/2023	\$	7,839.39	Brochure 1 production, shipping, postage
Deliver Strategies, LLC	PO Box 100970	Arlington	VA	22210	10/20/2023	\$	7,680.66	Postcard 2 production, shipping, postage
Stripe	354 Oyster Point Blvd	South San Francisco	CA	94080	10/20/2023	\$	1.33	Credit card processor fees for online contributions
ActBlue	366 Summer St	Somerville	MA	02144	10/20/2023	\$	0.75	Service fees for online contributions
Deliver Strategies, LLC	PO Box 100970	Arlington	VA	22210	10/23/2023	\$	8,054.00	Postcard 5 production, shipping, postage
Deliver Strategies, LLC	PO Box 100970	Arlington	VA	22210	10/23/2023	\$	8,054.00	Postcard 6 production, shipping, postage
							\$33,390.91	

SCHEDULE IV
Statement of Unpaid Debts

See
Attached

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

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

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						

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	Address	City	State	Zip	Date Debt		Outstanding Balance of Debt
					Incurred	Description	
Ad Specialty Solutions LLC	38 Pinelake Dr	Williamsville	NY	14221	8/25/2023	Campaign stickers	\$ 168.00
Chris Drexel	2713 Nagle Rd	Erie	PA	16510	9/27/2023	Paid for digital ads	\$ 50.00
Chris Drexel	2713 Nagle Rd	Erie	PA	16510	10/3/2023	Paid for digital ads	\$ 30.00
Chris Drexel	2713 Nagle Rd	Erie	PA	16510	10/4/2023	Paid for food for fundraiser	\$ 308.45
Deliver Strategies, LLC	PO Box 100970	Arlington	VA	22210	10/11/2023	Postcard 3 production, shipping, postage	\$ 7,968.44
Deliver Strategies, LLC	PO Box 100970	Arlington	VA	22210	10/11/2023	Postcard 4 production, shipping, postage	\$ 7,968.44
Deliver Strategies, LLC	PO Box 100970	Arlington	VA	22210	10/11/2023	Door hangers production, shipping	\$ 4,487.50
Chris Drexel	2713 Nagle Rd	Erie	PA	16510	10/12/2023	Paid for content on local cable access channel	\$ 50.00
							\$ 21,030.83



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

☐ Cycle 1 6 th Tuesday Pre-Primary	☐ Cycle 2 2 nd Friday Pre-Primary	☐ Cycle 3 30 Day Post Primary	☐ Cycle 4 6 th Tuesday Pre-Election	☒ Cycle 5 2 nd Friday Pre-Election
☐ Cycle 6 30 Day Post-Election	☐ Cycle 7 Annual Report	☐ Cycle 8 2 nd Friday Pre-Special Election	☐ 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.

Signature of Treasurer, Candidate, or Lobbyist

Peter Frank

Printed Name

10/24/2023

Date (MM/DD/YYYY)

Erie/PA/U.S.

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.

A handwritten signature in black ink, appearing to read 'Chris Drexel', written over a horizontal line.

Signature of Treasurer, Candidate, or Lobbyist

Chris Drexel

Printed Name

10/24/2023

Date (MM/DD/YYYY)

Erie/PA/U.S.

Location (City/State/Country)