



Reset Form

Print Form

Commonwealth of Pennsylvania - Campaign Finance Report

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

File Identification Number	20230014	Report Filed By (Mark X)	<input type="checkbox"/> Candidate	<input checked="" type="checkbox"/> Committee	<input type="checkbox"/> Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Friends of Tyler Titus				
Street Address	840 East 40th				
City	Erie	State	PA	Zip Code	16504

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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	11/07	Year	2023	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only 2023 OCT 27 AM 8:20 ERIE COUNTY Voter Registration
	05/02/2023	10/23/23	
A. Amount Brought Forward From Last Report	\$	11,507.12	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	6,860.28	
C. Total Funds Available (Sum of Lines A and B)	\$	18,367.40	
D. Total Expenditures (From Schedule III)	\$	14,532.38	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	3,835.02	
F. Value of In-Kind Contributions Received (From Schedule II)	\$		
G. Unpaid Debts and Obligations (From Schedule IV)			

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 schedule, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

27 day of October 2023
Angela L. Watson
SignatureMy Commission expires 12-02-2026
MO. DAY YR.

Signature of Person Submitting report

Shradha Prabhu
Printed Name714
Area Code206-4275
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

27 day of October 2023
Angela L. Watson
SignatureMy Commission expires 12-02-2026
MO. DAY YR.

Signature of Candidate

Tyler Titus
Printed Name614
Area Code431-4553
Daytime Telephone NumberCommonwealth of Pennsylvania - Notary Seal
Angela L. Watson, Notary Public
Erie County
My commission expires December 2, 2026
Commission number 1425503
Member, Pennsylvania Association of Notaries

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number

20230014

1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor

Total for the reporting period	(1)	\$	1335.28
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2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)

Contributions Received from Political Committees (Part A)	\$	250.00	
All Other Contributions (Part B)	\$	2775.00	
Total for the reporting period	(2)	\$	3025.00

3. Contributions Over \$250.00 (From Part C and Part D)

Contributions Received from Political Committees (Part C)	\$	1000.00	
All Other Contributions (Part D)	\$	1500.00	
Total for the reporting period	(3)	\$	2500.00

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>			\$ 6,860.28

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		20230014									
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										Amount		
Full Name of Contributing Committee					LGBTQ Fed PAC					Date [MM/DD/YYYY]	\$	250.00
										05/12/2023		
House #	1225		Street Address		EYE ST NW, ste 525					Date [MM/DD/YYYY]	\$	
City	Washington		State	DC		Zip Code		20005		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 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:	20230014
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Full Name of Contributor		Howard Pulchin		Date [MM/DD/YYYY]	05/07/2023	\$	100.00
House #	300	Street Address	North End Avenue 11C	Date [MM/DD/YYYY]		\$	
City	New York	State	NY	Zip Code	10282	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Beau Whiteman		Date [MM/DD/YYYY]	05/19/2023	\$	100.00
House #	1350	Street Address	Levis st NE	Date [MM/DD/YYYY]		\$	
City	Washington	State	DC	Zip Code	20002	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Alexandra Townsend		Date [MM/DD/YYYY]	06/15/2023	\$	100.00
House #	3500	Street Address	13th st NW #104	Date [MM/DD/YYYY]	09/30/2023	\$	50.00
City	Washington	State	DC	Zip Code	20010	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Carlos Guillermo Smith		Date [MM/DD/YYYY]	06/15/2023	\$	100.00
House #	2237	Street Address	Stonington Avenue	Date [MM/DD/YYYY]		\$	
City	Orlando	State	FL	Zip Code	32817	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Laine Alexander		Date [MM/DD/YYYY]	06/15/2023	\$	100.00
House #	433	Street Address	North Greenway Dr.	Date [MM/DD/YYYY]		\$	
City	Trinity	State	AL	Zip Code	35673	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Hollie Chadwick		Date [MM/DD/YYYY]	06/15/2023	\$	100.00
House #	1141	Street Address	Emanuel street	Date [MM/DD/YYYY]		\$	
City	Henderson	State	NV	Zip Code	89002	Date [MM/DD/YYYY]	\$

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:	20230014
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Full Name of Contributor		Drew Wiburne		Date [MM/DD/YYYY]	\$	100.00
House #	3149	Street Address	N Pine Grove Circle	Date [MM/DD/YYYY]	\$	
City	Wichita	State	KS	Zip Code	67205	
Full Name of Contributor		Maurin McBroom		Date [MM/DD/YYYY]	\$	100.00
House #	1711	Street Address	Lake Washington Blvd S	Date [MM/DD/YYYY]	\$	
City	Seattle	State	WA	Zip Code	98144	
Full Name of Contributor		Eva Mancuso		Date [MM/DD/YYYY]	\$	100.00
House #	194	Street Address	Pine Glen Drive	Date [MM/DD/YYYY]	\$	
City	East Greenwich	State	RI	Zip Code	02818	
Full Name of Contributor		Ebony Washington		Date [MM/DD/YYYY]	\$	100.00
House #	116	Street Address	Roman Ave	Date [MM/DD/YYYY]	\$	
City	Staten Island	State	NY	Zip Code	10314	
Full Name of Contributor		Michael Canfield		Date [MM/DD/YYYY]	\$	100.00
House #	7724	Street Address	Oregano Way	Date [MM/DD/YYYY]	\$	25.00
City	Gilroy	State	CA	Zip Code	95020	
Full Name of Contributor		Laith Wardi		Date [MM/DD/YYYY]	\$	100.00
House #	330	Street Address	Greenhurst Drive	Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16509	

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:	20230014
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Full Name of Contributor		Jayanti Addke man		Date [MM/DD/YYYY]	\$	100.00
House #	12835	Street Address	Corte Cordillera	Date [MM/DD/YYYY]	\$	
City	Salinas	State	CA	Zip Code	93908	
Full Name of Contributor		Crestina Martinez		Date [MM/DD/YYYY]	\$	100.00
House #		Street Address	P.O. Box 66	Date [MM/DD/YYYY]	\$	
City	San Luis	State	CO	Zip Code	81152	
Full Name of Contributor		Darlene Ryan		Date [MM/DD/YYYY]	\$	100.00
House #	11654	Street Address	Martin Road	Date [MM/DD/YYYY]	\$	
City	Waterford	State	PA	Zip Code	16441	
Full Name of Contributor		Chelsea Oliver		Date [MM/DD/YYYY]	\$	160.00
House #	611 1/2	Street Address	S Center St	Date [MM/DD/YYYY]	\$	
City	Corry	State	PA	Zip Code	16407	
Full Name of Contributor		Jana Thompson		Date [MM/DD/YYYY]	\$	100.00
House #	1352	Street Address	West 44th St	Date [MM/DD/YYYY]	\$	5.00
City	Erre	State	PA	Zip Code	16509	5.00
Full Name of Contributor		Jana Thompson		Date [MM/DD/YYYY]	\$	5.00
House #	1352	Street Address	West 44th St	Date [MM/DD/YYYY]	\$	5.00
City	Erre	State	PA	Zip Code	16509	5.00

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:	20230014
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Full Name of Contributor		Jana Thompson		Date [MM/DD/YYYY]	\$	5.00
House #	1352	Street Address	West 44th	Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16509	
Full Name of Contributor		Christina Salvia		Date [MM/DD/YYYY]	\$	25.00
House #	3603	Street Address	Schaper Ave	Date [MM/DD/YYYY]	\$	10.00
City	Erie	State	PA	Zip Code	16508	10.00
Full Name of Contributor		Christina Salvia		Date [MM/DD/YYYY]	\$	10.00
House #	3603	Street Address	Schaper Ave	Date [MM/DD/YYYY]	\$	10.00
City	Erie	State	PA	Zip Code	16508	10.00
Full Name of Contributor		Christina Salvia		Date [MM/DD/YYYY]	\$	10.00
House #	3603	Street Address	Schaper Ave	Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16508	
Full Name of Contributor		Alexander Reber		Date [MM/DD/YYYY]	\$	100.00
House #	277	Street Address	Union St	Date [MM/DD/YYYY]	\$	
City	Millersburg	State	PA	Zip Code	17061	
Full Name of Contributor		Ethan Smith		Date [MM/DD/YYYY]	\$	100.00
House #	1924	Street Address	8th St NW W-407	Date [MM/DD/YYYY]	\$	
City	Washington	State	DC	Zip Code	20001	

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:	20230014
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Full Name of Contributor		Ian Price				Date [MM/DD/YYYY]	\$	125.00
House #	210	Street Address	Gross St.			Date [MM/DD/YYYY]	\$	
City	Pittsburgh	State	PA	Zip Code	15224	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Cecilia Roche				Date [MM/DD/YYYY]	\$	100.00
House #	2703	Street Address	East 44th			Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16510	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Kim Clear				Date [MM/DD/YYYY]	\$	100.00
House #	4855	Street Address	Asbury Road			Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Marlo Torrelli				Date [MM/DD/YYYY]	\$	100.00
House #	4243	Street Address	Fargo Street			Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16510	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		C Ross				Date [MM/DD/YYYY]	\$	100.00
House #	5110	Street Address	3rd St NW			Date [MM/DD/YYYY]	\$	
City	Washington	State	DC	Zip Code	20011	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Kara Crannell				Date [MM/DD/YYYY]	\$	100.00
House #	8706	Street Address	Mayfair Drive			Date [MM/DD/YYYY]	\$	
City	McKean	State	PA	Zip Code	16426	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:	20230014
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Full Name of Contributing Committee		Greater PA Carpenters Pec		Date [MM/DD/YYYY]	\$	1,000. ⁰⁰
House #	1803	Street Address	Spring Garden St.	Date [MM/DD/YYYY]	\$	
City	Philadelphia	State	PA	Zip Code	19130	
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 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:		20230014					
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Full Name of Contributor					Date [MM/DD/YYYY]		\$
David Bohnett					07/07/2023		1,000.00
House #	Street Address		Date [MM/DD/YYYY]		\$		
245	Beverly Drive						
City	State	Zip Code	Date [MM/DD/YYYY]		\$		
Beverly Hills	CA	90212					
Employer Name			Occupation				
Baroda Ventures LLC			Investor				
Employer Mailing Address / Principal Place of Business			245 South Beverly Drive, Beverly Hills, CA 90212				

Full Name of Contributor					Date [MM/DD/YYYY]		\$
Stephanie Sedor					05/31/2023		100.00
House #	Street Address		Date [MM/DD/YYYY]		\$		
373	Mingo Road		06/30/2023			100.00	
City	State	Zip Code	Date [MM/DD/YYYY]		\$		
Wexford	PA	15090	07/31/2023			100.00	
Employer Name			Occupation				
Highmark Health			Actuary				
Employer Mailing Address / Principal Place of Business			120 Fifth Avenue, Pittsburgh, PA 15222				

Full Name of Contributor					Date [MM/DD/YYYY]		\$
Stephanie Sedor					08/31/2023		100.00
House #	Street Address		Date [MM/DD/YYYY]		\$		
373	Mingo Road		09/30/2023			100.00	
City	State	Zip Code	Date [MM/DD/YYYY]		\$		
Wexford	PA	15090					
Employer Name			Occupation				
Highmark Health			Actuary				
Employer Mailing Address / Principal Place of Business			120 Fifth Avenue, Pittsburgh, PA 15222				

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:	20230014
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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:	20230014
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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: 20230014

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:	20230014
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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			

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	20230014
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To Whom Paid		Erie County Democratic Party			Date [MM/DD/YYYY]	\$	375.00
House #	1305	Street Address	State Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16501	Fall Fundraiser - Host Table	
To Whom Paid		USPS			Date [MM/DD/YYYY]	\$	51.00
House #	2108	Street Address	East 38th		Description of Expenditure		
City	Erie	State	PA	Zip Code	16515	P.O. Box Fees	
To Whom Paid		Lavery's Brewing Co.			Date [MM/DD/YYYY]	\$	123.00
House #	128	Street Address	West 12th		Description of Expenditure		
City	Erie	State	PA	Zip Code	16501	Space Rental	
To Whom Paid		Your Daily Serving			Date [MM/DD/YYYY]	\$	280.00
House #	51	Street Address	W Congress St		Description of Expenditure		
City	Corry	State	PA	Zip Code	16407	Catering for fundraiser	
To Whom Paid		Safe Net			Date [MM/DD/YYYY]	\$	125.00
House #	1702	Street Address	French St		Description of Expenditure		
City	Erie	State	PA	Zip Code	16501	Fundraiser	
To Whom Paid		Erie County Democratic Party			Date [MM/DD/YYYY]	\$	40.00
House #	1305	Street Address	State Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16501	Summer Fundraiser	
To Whom Paid		Deliver Strategies			Date [MM/DD/YYYY]	\$	629.75
House #	100970	Street Address	P.O. Box		Description of Expenditure		
City	Arlington	State	VA	Zip Code	22210	Mailers	
To Whom Paid		USPS			Date [MM/DD/YYYY]	\$	51.00
House #	2108	Street Address	East 38th		Description of Expenditure		
City	Erie	State	PA	Zip Code	16515	P.O. Box fees	

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	20230014
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To Whom Paid		Deliver Strategies			Date [MM/DD/YYYY]	\$	6,500.00
House #	100970	Street Address	P.O. Box		Description of Expenditure		
City	Arlington	State	VA	Zip Code	22210	Mailers	
To Whom Paid		PNC Bank			Date [MM/DD/YYYY]	\$	7.50
House #		Street Address			Description of Expenditure		
City	Erie	State	PA	Zip Code		PNC Bank Fee	
To Whom Paid		Deliver Strategies			Date [MM/DD/YYYY]	\$	6,151.94
House #	140970	Street Address	P.O. Box		Description of Expenditure		
City	Arlington	State	VA	Zip Code	22210	Mailers	
To Whom Paid		Erie Crawford CLC			Date [MM/DD/YYYY]	\$	125.00
House #	32	Street Address	W 8th Ste 502		Description of Expenditure		
City	Erie	State	PA	Zip Code	16501	Spring Fundraiser Sponsor	
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 III
Statement of Expenditures

Filer Identification Number:	20230014
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To Whom Paid		Act Blue		Date [MM/DD/YYYY]		\$	6.23
				10/01/2023			
House #		Street Address	PO Box 441146		Description of Expenditure		
City	Sommerville	State	MA	Zip Code	02144-0031	Service fee	
To Whom Paid		Act Blue		Date [MM/DD/YYYY]		\$	8.94
				09/01/2023			
House #		Street Address	PO Box 441146		Description of Expenditure		
City	Sommerville	State	MA	Zip Code	02144-0031	Service fee	
To Whom Paid		Act Blue		Date [MM/DD/YYYY]		\$	17.26
				08/01/2023			
House #		Street Address	PO Box 441146		Description of Expenditure		
City	Sommerville	State	MA	Zip Code	02144-0031	Service fee	
To Whom Paid		Act Blue		Date [MM/DD/YYYY]		\$	26.15
				07/01/2023			
House #		Street Address	PO Box 441146		Description of Expenditure		
City	Sommerville	State	MA	Zip Code	02144-0031	Service Fee	
To Whom Paid		Act Blue		Date [MM/DD/YYYY]		\$	14.36
				06/01/2023			
House #		Street Address	PO Box 441146		Description of Expenditure		
City	Sommerville	State	MA	Zip Code	02144-0031	Service Fee	
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:	20230014
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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							