



Reset Form

Print Form

## Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	92-3202971	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	Friends of Susannah Faulkner								
Street Address	1037 W. 4th St.								
City	Erie	State	PA	Zip Code	16507				

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<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"/>
Date Of Election (MM/DD/YYYY)	11/07/2023	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
	10/24/2023	11/27/2023	
A. Amount Brought Forward From Last Report	\$	1,661.58	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	144.00	
C. Total Funds Available (Sum of Lines A and B)	\$	1,805.58	
D. Total Expenditures (From Schedule III)	\$	236.88	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	1,568.70	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	190.00	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0	

Part I- If this is a <b>Committee</b> report, treasurer sign here. If this is a <b>Candidate</b> report, candidate sign here.	Notary Seal
I swear (or affirm) that this report, including the attached schedule on page 2, is to the best of my knowledge and belief true, correct and complete.	
Sworn to and subscribed before me this 16 <sup>th</sup> day of December 2023 Angela L. Watson Signature	Signature of Person Submitting report Nicholas Taylor Printed Name
My Commission expires 12/02/2026 MO. DAY YR.	Area Code 814 392 8514 Daytime Telephone Number

Part II- If this is a report of a <b>Candidate's Authorized Committee</b> , candidate sign here.	Notary Seal
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 16 <sup>th</sup> day of December 2023 Angela L. Watson Signature	Signature of Candidate Susannah Faulkner Printed Name
My Commission expires 12/02/2026 MO. DAY YR.	Area Code 814 Daytime Telephone Number 746 0002

SCHEDULE I  
**Contributions and Receipts**  
Detailed Summary Page

<b>Filer Identification Number</b>	92-3202971		
<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>			
Total for the reporting period		(1)	\$ 144.00
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>			
Contributions Received from Political Committees (Part A)		\$	
All Other Contributions (Part B)		\$	
Total for the reporting period		(2)	\$
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>			
Contributions Received from Political Committees (Part C)		\$	
All Other Contributions (Part D)		\$	
Total for the reporting period		(3)	\$
<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>			
Total for the reporting period		(4)	\$
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>		\$	144.00

**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	
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										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]		\$		

**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.)

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$

**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.

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributing Committee</b>					Date [MM/DD/YYYY]	\$	
<b>House #</b>		<b>Street Address</b>			Date [MM/DD/YYYY]	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		Date [MM/DD/YYYY]	\$
<b>Full Name of Contributing Committee</b>					Date [MM/DD/YYYY]	\$	
<b>House #</b>		<b>Street Address</b>			Date [MM/DD/YYYY]	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		Date [MM/DD/YYYY]	\$
<b>Full Name of Contributing Committee</b>					Date [MM/DD/YYYY]	\$	
<b>House #</b>		<b>Street Address</b>			Date [MM/DD/YYYY]	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		Date [MM/DD/YYYY]	\$
<b>Full Name of Contributing Committee</b>					Date [MM/DD/YYYY]	\$	
<b>House #</b>		<b>Street Address</b>			Date [MM/DD/YYYY]	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		Date [MM/DD/YYYY]	\$
<b>Full Name of Contributing Committee</b>					Date [MM/DD/YYYY]	\$	
<b>House #</b>		<b>Street Address</b>			Date [MM/DD/YYYY]	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		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)

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Employer Name</b>						<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>								
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Employer Name</b>						<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>								
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$
<b>Employer Name</b>						<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>								

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:	
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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									
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**

<b>Filer Identification Number:</b>	92-3202971
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the reporting period	(1)	\$	190.00

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

<b>3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)</b>			
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)		\$	190.00
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SCHEDULE II  
PART F  
**In-Kind Contributions Received**  
VALUE OF \$50.01 TO \$250

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	<b>\$</b>	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	<b>\$</b>
<b>Description of Contribution</b>							

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

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

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

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

SCHEDULE II  
Part G  
**In-Kind Contributions Received**  
VALUE OVER \$250

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

**SCHEDULE III**  
**Statement of Expenditures**

<b>Filer Identification Number:</b>	92-3202971
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<b>To Whom Paid</b>		Mighty Fine Donuts				<b>Date [MM/DD/YYYY]</b>	\$	35.87
						10/25/2023		
<b>House #</b>	2612	<b>Street Address</b>	Parade Street			<b>Description of Expenditure</b>		
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16504	Donuts for outreach event		
<b>To Whom Paid</b>		Ember + Forge				<b>Date [MM/DD/YYYY]</b>	\$	22.00
						10/25/2023		
<b>House #</b>	401	<b>Street Address</b>	State Street			<b>Description of Expenditure</b>		
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16507	Coffee for outreach event		
<b>To Whom Paid</b>		Faulkner's Screenprinting				<b>Date [MM/DD/YYYY]</b>	\$	110.00
						10/26/2023		
<b>House #</b>	123	<b>Street Address</b>	Main Street West			<b>Description of Expenditure</b>		
<b>City</b>	Girard	<b>State</b>	PA	<b>Zip Code</b>	16417	Campaign t-shirts		
<b>To Whom Paid</b>		UPS Store #5271				<b>Date [MM/DD/YYYY]</b>	\$	69.01
						11/6/2023		
<b>House #</b>	707	<b>Street Address</b>	W 38th Street			<b>Description of Expenditure</b>		
<b>City</b>	Erie	<b>State</b>	PA	<b>Zip Code</b>	16508	Flyers for election day		
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				

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.

<b>Filer Identification Number:</b>	
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<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED</b> [MM/DD/YYYY]		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED</b> [MM/DD/YYYY]		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED</b> [MM/DD/YYYY]		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED</b> [MM/DD/YYYY]		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED</b> [MM/DD/YYYY]		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							