#### 308360

#### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identifica	ation 790	0315		Repo		CANDIDAT	re	COM	ALTTEE	<b>Y</b>	LOB	BYIST				
Name of Filing	Committee, Candi	date or L	.obbyist:		CO REF	COM					•					
Street Address	PO BOX 1144	4		•		• • • • • • • • • • • • • • • • • • • •										
City:	ERIE					State: PA	i		Zip Cod	ie: 10	6512-1	1144				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRI PRIMARY	E- 2.)	X 30 DA		POST- 3.		AMENDMENT REPORT?		Yes	No	V			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4,	2ND FRIDAY PR ELECTION	Æ- 5.		WE TO SECULD THE CONTRACT TO SECULD THE TOTAL THE CONTRACT THE CONTRAC		DAY POST- 6. ECTION		80.983 (18.99-19.19. p. 19.49-19.19. p. 19.4 (19.49-19.19. p. 19.49-19.19. p. 19.4 (19.49-19.19. p. 19.49-19.1		TERMINA REPORTA		Yes	No	Y
report type)	ANNUAL REPORT	7.	Year 2019			NG METHOD CHECK ONE	ka kita ka wasani ka	riseas Nei	PAPER		<b>V</b>	DISKET	TE			
Name of Office	Sought by Candida	te:				DATE OF E	LECTION	١	District Number	Office Code	Par		County Code			
						MO DAY	Y ŸE	iR'				<u> </u>				
						11	5	2019		(SEE IN	STRUCTION	ONS FOR CO	ODES)			
	Receipts and	MO	DAY YEAI	R in the		MO DAY	Y YEA	IR	FO	R OFFI	E USE	ONLY				
Expenditure	es trom:		4 2 2	019	ГО	5	6	2019		ŗ		sir yer an isala ana yeg				
A. Amount Bro	ought Forward Fron	n Last Ro	eport		\$		39,88	6.72		<b>#</b> **		<u>ب.</u>	. 2			
B. Total Mone	tary Contributions /	And Rec	eipts (From Sche	dule I)	\$			0.00		,			CP			
C. Total Funds	Available (Sum Of	Lines A	and B)		\$		39,88	6.72				12 - 15 m 22 m 12 m 12 m				
D. Total Exper	nditures (From Sche	dule III	()		\$		69	9.98				r)				
E. Ending Casi	h Balance (Subtract	Line D	From Line C)		\$		39,18	6.74			ي الم	73				
F. Value Of In-	-Kind Contributions	Receive	d (From Schedu	le II)	. \$		(	0.00								
G. Unpaid Deb	ts And Obligations	(From S	chedule IV)		\$			0.00								
						CTION										
ART I - If this i	s a Committee repo	rt, treas	urer sign here, 1	Cf this le	s e Can	didate report,	, candida	te sign	here.	1			* *			
I swear (or affirm correct and compl	) that this report, incli lete.	ıding the	attached schedules	filed on	paper o	r by electronic :	medium, a	resto th	best of	know	riedge a	nd belief	, true			
Sworn to and aub	scribed before me this		Jess			ania - Notary Scal otary Public	Sign	Lurf	of Parson	Submitti	ing Rep	ort				
1000	day of Max	<del></del>	20 \641	D.	ia Cour	ty April 10,		_	uska							
	Signature		Col	nmissio	numb	er 12325	24+26	LSUT		d Name	) (	٥٧_				
My Commission E	Epires April	<u> </u>	201	3		<u></u>	M^	797	~E\$							
	мо •	DA	Y YR			A	rea Code	_	Daytime	Telepho	ne Num	ıber				
art II- If this is	a report of a candi	date's a	uthorized Comm	ittee, C	andida	te shall sign l	nëre.		The same		ing Rooms	ara mala yilin	A STAN			
swear (or affirm) Io 320) as amendi	that to the best of my	y knowled	lge and belief this	political	commit	tee has not viol	ated any p	rovisio	s of the	act of Ju	ne 3,19:	37 (P.L. 1	333,			
worn to and subsc	ribed before me this							Sign	nature of	Candidat	te	<del></del> . —				
	day of		20		_											
	Signature			<del>-</del>	-				Printed	Name						
y Commission Exp	_					**************************************			Email				<u> </u>			
	МО	DAY	YR		-	Area	Code		Day	time Tel	ephone	Number	_			

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	R	eporting Perio	d	
ERIE CO REP COM	F	rom:	<u>4/2/2019</u> то:	5/6/2019
Unitemized Contributions Received - \$ 50.00 or Le	se Per Contributor			
	TOTAL for the Reporting Pe	riod (1)	\$	0.00
Contributions Received - \$ 50.01 To \$250.00 (From	n Part A and Part 8)			
Contributions Received From Political Committees (	(Part A)		\$	0.00
All Other Contributions (Part B)			\$	0.00
	TOTAL for the Reporting Pe	rlod (2)	\$	0.00
Contributions Received Over \$250.00 (From Part C Contributions Received From Political Committees ( All Other Contributions (Part D)	CONTRACTOR OF THE BEAUTION OF THE STATE OF T		s start and the	0.0
	TOTAL for the Reporting Pe	rlod (3)	\$	0.00
Other Receipts, Refunds, Interest Earned, Returned	l Checks, Etc . (From Part E)			
	TOTAL for the Reporting Pe	riod (4)	\$	0.00
Total Monetary Contributions and Receipts During totals from Boxes 1,2,3 and 4; also enter this amount	this Reporting Period (Add and e nt on Page1, Report Cover Page,	nter amount Item B.)	\$	0.00
			I	

#### 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.

Name of Filing Committee or (	Name of Filing Committee or Candidate			Reporting Period						
		F	from:	То	:					
	<del></del>		DATE			AMOUNT				
Full Name of Contributing Comm	ittee		MO DAY	YEAR	!					
Mailing Address					\$	0.00				
City	State	Zip Code (Plus 4)	] ]							
			1 1	1						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL 0.00

### ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee	e or Candidate		Reporting Period						
	#		From:		То	:			
	·			DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Pius 4)							
		<u> </u>	<u> </u>				PAGE TOTAL		
Enter Grand Total of	Part A on Schedule I,	Detailed Summary Pag	e, Section	2.		\$	0.00		

#### 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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candid	iate		Reportin	Reporting Period					
			From:			To:			
· · · · · · · · · · · · · · · · · · ·				D#	TE		А	MOUNT	
Full Name of Contributing Committe	ae			Mo	DAY	YEAR			
Mailing Address			-				*	0.00	
City	State	Zip Code	e (Plus 4)					S	
								PAGE TOTAL	
Enter Grand Total of Part C on S	chedule I, Detail	led Summary Pa	ige, Sectio	on 3.			\$	0.00	

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Froi	m:		To	:	
				D	ATE		AMOU	NT
Full Name of Contributor				MO	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)	1		<u> </u>		
Employer Name	<u> </u>	ı		Occupat	tion		I	-
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Code (Pi	us 4)
Enter Grand Total of Part C on Scho	dule I. Detailed S	ummary Page.	Section	n 3.			PAGE	TOTAL
	and 1, permits a	annina y t ugo,		•.		\$		0.00

### 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.

Name of Filing Committee or Cand	lidatė		Repor	ting Perio	od				
			From:			To:			
				D	ATE			AMOUNT	Γ
Full Name				МО	DAY	YEAR	1. 1.		
Mailing Address							*		0.00
City	State	Zip Code (I	Plus 4)						
Receipt Description		[		<u> </u>		<u> </u>	<u> </u>		·
Faton Conned Tatal of Back Con Co	-badula T. Batallas	I Guarante Dana	Codles.	4				PAGE TO	TAL
Enter Grand Total of Part E on Sc	:nepule 1, Detailet	a Summary Page,	<b>acction</b>	<b>**</b> •			\$		0.00

#### **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** 

Name of Filing Committee or Candidate	Reporting Per	iod	
ERIE CO REP COM	From:	4/2/2019 To:	5/6/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T.D. Walley	erengua garia kalandari da kalandari Marka garia (11. mga bay kalandari	
TOTAL for the Reporting Pe	riod (2)	. \$	0.00
I. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pa	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (A amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, I		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate **Reporting Period** From: To: DATE AMOUNT **Full Name of Contributor** DAY YEAR MO 0.00 **Mailing Address** State Zip Code (Plus 4) City **Description of Contribution:** Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, PAGE TOTAL Section 2.

\$

0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	me of Filing Committee or Candidate				Reporting Period						
					Fre	om:		To:			
					L		DATE			AMOUNT	
Full Name of Contributor						МО	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(i	Plus 4)							
Employer of Contributor	1		l			Occupat	tion	•	<u>                                     </u>		
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption of	F Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, 1	' (n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00	

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period		•	
ERIE CO REP COM			From	4/	2/2019	To:	5/6/2019
				DATE			AMOUNT
<b>To Whom Paid</b> Time Warner Cable			MO	DAY	YEAR		
Mailing Address PO Box 901	5	2	2019	•	99.99		
City Carol Stream	Description of Expenditure Internet Service						
<b>To Whom Paid</b> Time Warner Cable	NO.	DAY	YEAR				
Mailing Address PO Box 901			4	2	2019	\$	99,99
City Carol Stream	State IL	Zip Code (Plus 4) 60132	Description of Expenditure Internet Service				
<b>To Whom Paid</b> James Drumm			мо	DAY	YEAR		······································
Mailing Address 8543 Edinbor	o Road		4	8	2019	\$	500.00
City Erie	State PA	Zip Code (Plus 4) 16509	Descrip HQ Ren	tion of Exp	enditure		
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D	·			\$	PAGE TOTAL 699.98