

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

		portmastbe		eg			
Filer Identification Number	(M	ort Filed By ark X)	Candidat		Committee		Lobbyist
Name of Filing Committee, Candi Lobbyist	date or Com	nittee to Elect Jai	nis Filbeck				
Street Address	4879	Thoroughbred Lo	оор				
<b>City</b> Erie	A.A		State F	Α	Zip Code	16506	
Type of Report (Place x under rep	770						
1- 6 <sup>th</sup> Tuesday 2- 2 <sup>nd</sup> Friday 3- Pre-Primary Pre-Primary Pr			<sup>nd</sup> Friday - Election	6-30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
		Mark Mark					
Date Of Election	Yea	NAME !	[V]d), [	Amendment		Termination	
(MM/DD/YYYY)	11/02/2021		2021	Report		Report	
Summary of Receipts and F Expenditures	om Date	To Date			Ford	Office Use Only	
	6 <b>8</b> /2021 % <sup>N.→</sup>	10/18/2	2021				
A. Amount Brought Forward Fron		2,276	.55				**************************************
B. Total Monetary Contributions (From Schedule I)	and Receipts	\$ 100	)			10 m	
C. Total Funds Available (Sum of Lines A and B)		\$ 2,376	.55			Constitution (Constitution)	
D. Total Expenditures		\$ 424.	45				energy (
(From Schedule III)  E. Ending Cash Balance		\$ 1,952	2.1			n 2 4 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(Subtract Line D from Line C) F. Value of In-Kind Contributions (From Schedule II)	Received	\$ 0					. , , , , , , , , , , , , , , , , , , ,
G. Unpaid Debts and Obligations (From Schedule IV)		\$ 2,00	<u>~</u>				المسما
	- Escherica de la companya de la com		Affidavit Sec				
Part 1- If this is a Committee report, t	reasurer sign here. If	this is ECandidia	te report cal	ndidate sign here.	J to . w *:		alata
I swear (or affirm) that this report, inc Sworn to and subscribed before me th  20 day of October  Signature  My Commission expires  Mo.  Part II- If this is a report of a Candidate	2021 LUVE 24 2025 DAY YR.	realth of Pennsylvania - Notary Scan Sc. McCABE, Notary Public Erie County Public Erie County Public Science Charles April 24, 2024 (mmission Number 127554)	A	Signature MICLEC  814 rea Code	of Person Subm Gregury Printed Nam Day	try Julies  The Charles  The Ch	h C 6 40 nber
I swear (or affirm) that to the best of amended.	my knowledge and b	el ef this politica	committee l	nas not violated an	y provisions of	the Act of June 3, 193	37 (P.L. 1333, NO.320) as
Sworn to and subscribed before me the	nis	Con		· · · · ·	m ` 1	000.6	
day of Octuber	20 01	Commonwealth LINDA S. My Commis Commis	7	James 1	nature of Candi	date L	
Signature Signature	come			Janis	Printed Name	DECK	
My Commission expires 4	24 2005	of Pennsylv McCABE, N Erie Count ion Expires sion Numbe	i <u>4</u>	314	_3°	77-3336	2
	AY YR.	i Pennsylvania icCABE, Notary Erie County in Expires April on Number 127	A	rea Code	Day	time Telephone Num	ber
		Public Public 541	ξ				

# SCHEDULE I Contributions and Receipts

**Detailed Summary Page** 

Filer Identification Number			
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	i ved Rije		
Total for the reporting period	(1)	\$	USBCOMUSINI-INSERINZA SZASZUMBYNOM PORTEKTA SZASZUM INTERNISZ SZASZUM SZASZ
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		69595	
Contributions Received from Political Committees (Part A)	arconiulii	\$	о
All Other Contributions (Part B)		\$	
Total for the reporting period	(2)	\$	
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	0
All Other Contributions (Part D)		\$	0
Total for the reporting period	(3)	\$	0
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	10 (E)		
Total for the reporting period	(4)	\$	
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, Re Cover Page, Item B)	port:	\$	0

### 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

				Amount
Full Name of Contributing Committee		_	Date [MM/DD/XXXX] \$	
			Date [MM/DD/YYYY] \$	
House # Street Address				
City :	State	Zip Code	Date [MM/DD/YYYY] \$	
	en fores		100 (101 100 (101 100 (101 100 (101) 100 (101) 100 (101)	
Full Name of Contributing Committee			Date (MM/DD/YYAY) \$	
House # Street Address			Date [MM/DD/YYYY] \$	
Jupet Audress				
City .	State	Zip Gode	Date [MM/DD/YYYY] \$	
(2001) - C			Date (MM/DD/YYYY) S	
Full Name of Contributing Committee				
House # Street Address			Date [MM/DD/YYYY] \$	
GIV 1	State	⊒Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing		energy supering that	Date [MM/DD/YYYY) \$	
Committee	<u></u>		Date [MM/DD/YYYY] S	
House # Street Address				
Gity	State	Zip Code	Date [MM/DD/YYYY] \$	
		DONE OF THE STATE	1925 638	
Full Name of Contributing Committee	_		Date [MM/DD/YYYY] S	
House # Street Address			Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing		operantification	Date [MIV/DD/YYYY]	*
Committee			1367 <u>1</u>	
House # Street Address			Date [MM/DD/YYYY] \$	The state of the s
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:

Full N	ame of Contributor					Date [MM/DD/	YYYY] ;	\$	
		Paul and Nicole 1	Wojcik		İ	10/12/2021	1		100
House	# Sti	reet Address				Date [MM/0D/	YYYY] ;	\$	· · · · · · · · · · · · · · · · · · ·
	3613	Ann	e Marie Drive		Ì				
City			State	Zip Code	16506	Date [MM/DD/	YYYY] .	\$	
	Erie		PA		10300				
Full Na	ame of Contributor					Date [MM/DD/	YYYY]	\$	
House	# St	reet Address				Date [MM/DD/	(YYYY)	\$	
City			State	Zip Code		Date (MM/DD/	[YYYYY]	\$	
Full N	ame of Contributor					Date [MM/DD/	YYYY]	\$	
House	# St	reet Address				Date [MM/DD/	(YYYY) ·	S	
City			State	Zip Code		Date (MM/DD/	/YYYY] <u> </u>	4	
Full N	ame of Contributor					Date [MM/DD/	(4444)	\$	
House	1#   51	reet Address				Date [MM/DD)	/үүүү]	\$	
City			State	Zip Code		Date (MM/DD)	/YYYY]	\$	
Full N	ame of Contributor					Date [MM/DD/	YYYYY	\$	
					,,				
House	s#   St	reet Address				Date [MM/DD/	/YYYY]	\$	
City			State	Zip Code		Date [MM/DD)	/YYYY)	S	
						D 4 (6444/55	Agya/1		
Full N	ame of Contributor					Date [MM/DD)		\$	
					<del></del>				
House	e# St	reet Address				Date [MM/DD/	/YYYY] <u> </u>	\$	
					Nair			.,,	
City			State	Zip Code		Date [MM/DD	[YYYYY]	\$	

### 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 Contributing Committee			Date [MM/DD/YYYY] \$	
House # Street Ad	dress		Date [MM/Db/YYYY] \$	
City	State	Zip Code	Date [MM/Db/YYYY] \$	
Full Name of Contributing Committee	10-20-20-20-20-20-20-20-20-20-20-20-20-20	garma, pomprimentale distinct case din con	Date (MM/DD/YYMY) \$	- W W
House# Street Ad	dress		Date [MM/DD/YYYY] \$	
Chy .	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing Committee			Date [MM/DD/YYYY] \$	
House# Street Ad	dress		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date MM/DD/YYYY \$	
Full Name of Contributing Committee			Date [MM/DD/YYYY] \$	4
House # Street Ad	dress		Date [MM/DD/YYYY] \$	(
City ::	State	Zip Code	Date [MM/DD/YYYY] \$.	
Full Name of Contributing Committee			Date [MM/DD/YYYY] \$	
House # Street Ad	dress		Date [MM/DD/YYYY] \$	
City	State	Zip Cade	Bate [MM/DD/YYYY] \$	
Full Name of Contributing Committee			Date (MM/DD/YYYY) \$	
House # Street Ad			Date [MM/DD/YYYY] \$	*
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:

	<u> </u>		
Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Add	ress		Date [MM/DD/YYYY] \$
Clty	State	Zip Code:	Date [MM/DD/YYYY] \$
Employer Name Employer Mailing Address /			Occupation
Principal Place of Business	144		
Full Name of Contributor			Date [MM/DD/YYYY) \$
House # Street Add			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/ĐD/YYYY] \$
House # Street Add	ress		Date [MM/DD/YYYY] \$
City	State	Zip Code	Date (MM/DD/YYYY) \$
Employer Name	dajid		Occupation
Employer Mailing Address / Principal Place of Business	r and Stan		
Full Name of Contributor	4.000019999		Date [MM/DD/YYYY) \$
House# Street Add			Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Gecupation .
Employer Mailing Address / Principal Place of Business			

### PART E

# **Other Receipts**

REFUNDS, INTREST 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	er:			
Füll Name				
House#	Street Address			
City — — — — — — — — — — — — — — — — — — —		State	Zip Code	Date (MM/DD/YYYY) 5
Receipt Description				
Full Name				
2.000	Street Address			
City The Control of t		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			TO COLOR THE PROPERTY OF THE P	Example 1
Full Name				
	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	is in the second of the second			1 Tools
Full Name				
	Street Address			The state of the s
City Company of the Company		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	[	4		
Full Name				
	Street Address	Consequence Control of the Control o	Transport and the second	
City	72 v = 5 18 s s s	State	Zip. Code	Date [MM/DD/YYYY] \$
Receipt Description			<u> </u>	L PETERS .
Full Name				
House #	Street Address		IN INC.	
City		State	Zip Code	Date [MM/DD/\YYYY] \$
Receipt Description				

### SCHEDULE II

### IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Piler Identification Number:			
L. UNITEMIZED IN-KIND CONTRIBU	restantine en en en en en en en en	n nn r	IR LESS DEP CONTRIBUTOR
TOTAL for the reporting period		\$	
	6D-VALUE OF \$50.01 TO \$250	00 (F)	ROM PARTE)
TOTAL for the reporting period	(2)	\$	
3. IN-KIND CONTRIBUTION RECEIVE	D-VALUE OVER \$250.00 (FROM	A PAR	TG)
TOTAL for the reporting period	(3)	\$	1,500
TOTAL VALUE OF IN-KIND CONTRIBUTIONS PERIOD (Add and enter amount totals from on Page 1, Report Cover Page, Item F)		\$	1,500

# SCHEDULE II PART F

# **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

Filer identification Number:

House 8 Street Address State State Date (MM/DD/YYY) 5  House 8 Street Address State State State Date (MM/DD/YYY) 5  House 8 Street Address State State State Date (MM/DD/YYY) 5  House 8 Street Address State Stat						4
House # Street Address   Jip Code   Date [MM/DD/YYY]   S    Description of Contribution    Full Name of						
Date   MM/DD/YYYY    S	Full Name of Contribu	tor				1.000 1.000
State   Zip Code   Date IMM/DD/YYYI   State   Zip Code   Zip Co		Street Address				
House # Street Address   Date [MM/DD/YYYY]   S    City   State   Zip Code   Date [MM/DD/YYYY]   S    Description of Contributor   Date [MM/DD/YYYY]   S    Plus   Name of Contributor   Date [MM/DD/YYYY]   S    City   State   Zip Code   Date [MM/DD/YYYY]   S    Description of Contributor   Date [MM/DD/YYYY]   S    City   State   Zip Code   Date [MM/DD/YYYY]   S    City   State   Zip Code   Date [MM/DD/YYYY]   S    City   Date [MM/DD/YYYY]   S    City   State   Zip Code   Date [MM/DD/YYYY]   S    City   State   Zip Code   Date [MM/DD/YYYY]   S    City   State   Date [MM/DD/YYYY]   S    City   State   Zip Code   Date [MM/DD/YYYY]   S    City   State   State   State   State   State   State   State   State   State			State	Zip Code	Date [MM/DD/YYYY]	
House # Street Address   Date [MM/DD/YYYY]   S    Description of Contribution    Full Name of Contribution    City   State   Zip Code   Date [MM/DD/YYYY]   S    Dat	Description of Contrib	ution	_ <del></del>			
City State Zip Code Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  House # Street Address Date [MM/DD/YYYY] \$  Description of Contributor Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$	is experience and the second s					
Description of Contributor  Full Name of Contributor  House # Street Address  Date [MM/DD/YYYY]	21 (2) (3) (1) (3) (3)	Street Address				Abla T
Date [MM/DD/YYYY]   S			State	Zip Code	Date [MM/DD/YYYY]	\$
House # Street Address Date [MM/DD/YYYY] \$  City Description of Contribution  Full Name of Contributor  Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  Pescription of Contributor  Date [MM/DD/YYYY] \$  Pescription of Contributor  Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$	Description of Contrib	ution				
City State Zip Code Date [MM/DD/YYYY] 5  Description of Contributor Date [MM/DD/YYYY] 5  City State Zip Code Date [MM/DD/YYYY] 5  Description of Contributor Date [MM/DD/YYYY] 5  City State Zip Code Date [MM/DD/YYYY] 5  Date [MM/DD/YYYY] 5  City Date [MM/DD/YYYY] 5  City State Zip Code Date [MM/DD/YYYY] 5  City Date [MM/DD/YYYY] 5	Full Name of Contribu	tor (1945)			Massagement of a particle of the particle of t	
Description of Contributor    Date [MM/DD/YYYY]   S		Street Address				
Full Name of Contributor    Date [MM/DD/YYYY]   S		utioe	State.	Zip Code	Date [MM/DD/YYYY]	
House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Description of Contributor Date [MM/DD/YYYY] \$  House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$						COMPANIES -
Gity State Zip Code Date [MM/DD/YYYY] \$  Description of Contributor Date [MM/DD/YYYY] \$  House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$		Same in Mark				
Description of Contributor   Date [MM/DD/YYYY]   \$			CONTROL OF THE PROPERTY OF THE	Transic cooper committee a reason		A Barrier Charles
Full Name of Contributor  House # Street Address  Date [MM/DD/YYYY] \$  City State Zip-Code Date [MM/DD/YYYY] \$		utjor	State	Zip Code	Date [MM/DD/YYYY]	
House # Street Address Date [MM/DD/YYYY] \$  City Date [MM/DD/YYYY] \$						Transport I
City State Zip-Code Date IMM/DD/YYYY] \$	e postanta de servicio. Anterior de servicio.					
		Street Address				
DESCRIPTION OF CONTRIBUTION	1.5			Zip Code	Date [MM/DD/YYYY]	<b>\$</b>
	Description of Contrib	nuton				

# SCHEDULE II

### Part G

# **In-Kind Contributions Received**

**VALUE OVER \$250** 

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

# Statement of Expenditures

		<u></u>	 <u> </u>	<u> </u>
Filer Identification Number:	A			,
Liter inciding four languages.	A			, , , , , , , , , , , , , , , , , , ,
	A			, , , , , , , , , , , , , , , , , , ,
	All			,
	A			
	A			

To Whom Paid	McDowell Cross Country Boosters		Date [MM/DD/YYYYY] 8/8/2021	\$ 100
House#	Street Address W. 38th Street		Description of Expenditu	Jre .
3580				
City Erle	State PA	Zip Code 16506	Donation	
To Whom Paid	Erie Crawford CLC Picnic		Date [MM/DD/YYYY]	50
House #	Street Address		8/8/2021  Description of Expenditu	ING.
32	w. 8th Street #604			ordinalis materialistica (1944). Est est
<b>City</b> Erie	State PA	Zip Code 16501	Donation	
To Whom Paid	McDowell Band Aids		Date [MM/DD/YYYY] 8/8/2021	50
House # 3580	Street Address W. 38th Street	1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Description of Expenditu	re
City Erie	State PA	Zip Code 16506	Donation	
To Whom Paid	Ministrative and a second	450000000000000000000000000000000000000	Date [MM/DD/YYYY]	\$
$(x_0,y_1)$	Vista Printing		9/8/2021	218.45
House#	Street Address Hudsonweg 8		Description of Expenditu	
City. Venlo	State Ne	Zip Code <sup>5928LW</sup>	Door Hangers	
To Whom Paid	PNC Bank (Services Charges on Checking Account)		Date [MM/DD/YYYY]	\$ 2
	PNC Bank (Services Charges on Checking Account)		7/30/2021	. <b>\$</b> 2
To Whom Paid-	PNC Bank (Services Charges on Checking Account)  Street Address Peach Street			\$ 2 I/C
House#	Street Address	<b>Zip</b> 16509	7/30/2021	
House# 5001	Street Address Peach Street	<b>Zip</b> <b>Code</b> 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]	
House # 5001  City Erie  To Whom Paid	Peach Street  State PA  PNC Bank (Service Charges)	<b>Zip Code</b> 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021	) (\$) 2
House # 5001 City Erle	Street Address Peach Street State PA	Code 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]	) (\$) 2
House # 5001  City Erie  To Whom Paid	Peach Street  State PA  PNC Bank (Service Charges)  Street Address	Zip 16509  Zip 16509  Zip 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021	Si 2
House # 5001  City Erle  To Whom Paid  House # 5001	Peach Street  State PA  PNC Bank (Service Charges)  Street Address Peach Street  State PA  PA	Zip 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021  Description of Expenditu  Bank Service Charges (Septem	S 2 Ife
House #   5001  City   Erie  To Whom Paid   5001  City   Erie  To Whom Paid	Peach Street  State PA  PNC Bank (Service Charges)  Street Address Peach Street  State PA  PNC Bank (service Charges)	Zip 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021  Description of Expenditu  Bank Service Charges (Septem  Date [MM/DD/YYYY]  10/11/2021	)    Control
House #   5001  City   Erie  To Whom Paid  House #   5001  City   Erie	Street Address Peach Street  State PA  PNC Bank (Service Charges)  Street Address Peach Street  State PA  PNC Bank (service Charges)  Street Address Peach Street	Zip 16509 Code 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021  Description of Expenditu  Bank Service Charges (Septem	)    Control
House # 5001  City Erle  To Whom Paid  House # 5001  City Erie  To Whom Paid	Peach Street  State PA  PNC Bank (Service Charges)  Street Address Peach Street  State PA  PNC Bank (service Charges)	Zip 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021  Description of Expenditu  Bank Service Charges (Septem  Date [MM/DD/YYYY]  10/11/2021  Description of Expenditu  Bank Service Charges (Octobe	sper)
House # 5001  City Erie  To Whom Paid  House # 5001  City Erie  To Whom Paid  House # 5001	Street Address Peach Street  State PA  PNC Bank (Service Charges)  Street Address Peach Street  State PA  PNC Bank (service Charges)  Street Address Peach Street	Zip 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021  Description of Expenditu  Bank Service Charges (Septem  Date [MM/DD/YYYY]  10/11/2021  Description of Expenditu	sper)
House #   5001  City   Erle  To Whom Paid  House #   5001  City   Erie  To Whom Paid  House #   5001	Street Address Peach Street  State PA  PNC Bank (Service Charges)  Street Address Peach Street  State PA  PNC Bank (service Charges)  Street Address Peach Street	Zip 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021  Description of Expenditu  Bank Service Charges (Septem  Date [MM/DD/YYYY]  10/11/2021  Description of Expenditu  Bank Service Charges (Octobe	s. 2  If a control of the control of
House #   5001  City   Erle  To Whom Paid  House #   5001  City   Erle  To Whom Paid  House #   5001  City   Erle  To Whom Paid	Street Address Peach Street  State PA  PNC Bank (Service Charges)  Street Address Peach Street  State PA  PNC Bank (service Charges)  Street Address Peach Street  State PA  PNC Bank (service Charges)  Street Address Peach Street  State PA	Zip 16509	7/30/2021  Description of Expenditu  Bank Service Charges (August  Date [MM/DD/YYYY]  8/15/2021  Description of Expenditu  Bank Service Charges (Septem  Date [MM/DD/YYYY]  10/11/2021  Description of Expenditu  Bank Service Charges (Octobe  Date [MM/DD/YYYY]	s. 2  If a control of the control of

### 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.

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	80		
Name of Creditor	Michael and Janis Filbeck		Outstanding Balance of Debt
House # Str 4879	eet Address Thoroughbred Loop	DATE DEBT INCURRED [MM/DD/YYYY] 03/11/2021	9
City .	Erie State	PA	500
Description of Debt	Load to open bank account for Committee to Elect Janis	200	FAMOUR I
Name of Creditor	Michael and Janis Filbeck		Outstanding Balance of Debt
House # Str. 4879	Thoroughbred Loop	DATE DEBT INCURRED [MM/DD/YYYY] 03/18/2021	\$
City	Erie State	PA Zip 16506	1,500
Description of Debt	Loan to purchase campaign materials		
Name of Creditor			Outstanding Balance of Debt
Hause # Stre	et Address	DATÉ DEBT INCURRED [MM/DD/YYYY]	5
City  Description of Debt	State	Zip Cade	
Name of Creditor	CONSTRUCTION OF THE CONSTR		Outstanding Balance of Debt
House # Stre	et Address	DATE DEBT INCURRED [MM/DD/YYYY]	
City	State	Zip Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House # Stre	et Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$
Clty	State	Zip Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House # Stre	et Address	DATE DEBT INCURRED [MM/DD/YYYY]	
City and an interest of the second	State	Zip Code	
Description of Debt		·· <del>···</del>	

### PENNSYLVANIA CAMPAIGN FINANCE REPORT

This Report must be typed or printed legibly in blue or black ink.

#### INSTRUCTIONS

This form is intended for the use of candidates, political committees and contributing lobbyists who are required to disclose contributions and expenditures. Candidates must file separate reports when they make expenditures or receive contributions on their own behalf and separate from their campaign committee. A candidate's report discloses contributions received and expenditures made individually by the candidate. A contributing lobbyist's report discloses only expenditures the lobbyist personally made to influence the outcome of a candidate's election.

Candidates and their authorized political committees file reports in the office where their nomination documents are filed. If the candidate's reports are filed with the Secretary of the Commonwealth, a copy of the reports filed by the candidate and the authorized committee must be filed with the County Board of Elections in the county in which the candidate resides.

#### REPORT COVER PAGE

The Report Cover Page identities the filer, the type of report and what reporting period is covered. It also summarizes the detailed contribution and expenditure sections from the body of the report.

Filer Identification Number - This number is assigned by the Bureau of Commissions, Elections and Legislation to candidates and committees who register and file with the Secretary of the Commonwealth. A candidate's filer identification number is assigned by the Bureau when the candidate files nomination patitions. A political committee or lobbyist filer identification number is assigned when the committee or lobbyist files registration documents in the Bureau.

Report Filed By - Please indicate which type of filer you are by checking the appropriate box on the cover page.

Name of Filing Committee, Candidate or Lobbyist, Street Address, City, State, Zip Code - Please enter appropriate name and address.

Type of Report - Please place an "X" by the applicable report type.

Amendment Report - Check "Yes" only if the report is being filed to correct, add to, or in some way change a report that has stready been filed.

Termination Report - Check "Yes" only if the filer has no cash balance, no unpaid debts or obligations, and wishes to cease operation. Contributing lobbyists may file a termination report if they do not anticipate making further contributions to influence the outcome of a candidate's election.

Filing Method - Indicate whether the complete report is filed on paper, or if the report is filed by diskette accompanied by the signed and notarized cover sheet.

Name of Office Sought - If filed by a candidate or candidate's committee, indicate office sought.

Date of Election - If this is a pre- or post-primary/election report, indicate the date of the primary or election.

District Number - If filled by a candidate or candidate's committee, indicate district in which candidate is seeking office.

Office Cade, Party Cade and County Cade - If filed by candidate or candidate's committee, refer to code charts at the back of this report form. Enter the corresponding code letters for the office sought and the political party of the candidate; enter the corresponding code number for the county of residence of the candidate. Candidates for local offices who file only with the County Board of Elections should enter Office Code OTH for Offices.

Summary of Receipts and Expanditures - Enter the appropriate dates of the reporting period covered.

Amount Brought Forward From Last Report (Item A) - The balance, if any, as of the first day of the reporting period. For committees, it is the amount reported as the ending cash balance on the previous report filed, if any.

Items B through G - See detailed instructions on each corresponding schedule.

Affidavit Section - Must be awarn to by the filer acknowledging the accuracy of the report (Part I). On reports filed by a candidate's authorized committee, the candidate must sign an additional affidavit (Part II).

Page Number - Calculate the total number of pages in the completed report and indicate on top of cover page. Subsequent pages should be numbered consecutively.

Reports Filed on Diskette: The cover page must accompany all filings, including diskette filings. Diskette filings must also meet the technical specifications of the Department. These specifications are available at www.dos.state.pa.us or by contacting the Bureau.

#### SCHEDULE I

#### CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page - provides a summary of all monetary contributions and receipts during the reporting period.

Item 1: Unitermized Contributions and Receipts represents the total amount of contributions and receipts of \$50.00 or less in the aggregate per contributor received during the reporting period. Items 2, 3 and 4: Enter the total for each section from the corresponding schedules in the report (Part A, Part B, Part C, Part D and Part E).

Enter the total from Schedule I on the Report Cover Page, Item B.

Definition of Contribution: Any payment, gift, subscription, assessment, contract, payment for services, dues, loan, forbearance, advance or deposit of money or any valuable thing, to a candidate or political committee made for the purpose of influencing any election in this Commonwealth or for paying debts incurred by or for a candidate or committee before or after any election. "Contribution" shall also include the purchase of tickets for events such as dinners, luncheons, rallies and other fund-raising events; the granting of discounts or rebates by television and radio stations and newspapers not extended on an equal basis to all candidates for the same office; and any payments provided for the benefit of any candidate, including any payments for the services of any person serving as an agent of a candidate or committee by a person other than the candidate or committee or a person whose expenditures the candidate or committee must report under the act. The word "contribution" includes any receipt or use of anything of value received by a political committee from another political committee and also includes any return on investments by a political committee. (See 25 P.S. §3241)

### Instructions for Reporting Contributions

The aggregate total of contributions from an individual contributor within a reporting period determines which part of the report form should be used to disclose a contribution or receipt. The form is designed to list the dates and amounts of as many as three separate contributions from the same source in one line item.

Contributions and receipts of \$50 or less, per contributor, during the reporting period, need not be itemized on the report. The total amount of all unitemized contributions should appear on Schedule I. Contributions and Receipts Detailed Summary Page, Line 1. A record must be kept of the receipt dates of contributions and the names and addresses of each person from whom a contribution of over \$10 has been received.

Contributions and receipts over \$50 to \$250 - report the name of the contributor, mailing address, amount and date received on Schedule I, Part A, "Contributions Received from Political Committees," or Part B "All Other Contributions."

Contributions and receipts over \$250 - report the name of the contributor, mailing address, occupation, employer's name and address, amount and date received on Schedule I, Part C, "Contributions Received from Political Committees," or Part D, "All Other Contributions."

Receipts - Use Part E, "Other Receipts" to report all other monetary receipts or income; e.g. refunds received, interest income, returned checks and prior expenditures that were returned to the filer during the reporting period.

Address - In all Parts, a complete address, including zip code, must be provided. Space is provided for the Zip Code Plus Four. The State block should be completed with the U.S. Postal Service's standard two-letter abbreviation, such as PA for Pennsylvania.

Date - all date blocks in the report must be completed with eight digits. For instance, March 24, 2000 would appear as 03 24 2000.

Total - of each Part should be transferred to the appropriate section on the Schedule I, "Contributions and Receipts Detailed Summary Page" (Page 2 of the report form).

Occupation and Employer - Part D, which lists individuals who have contributed over \$250, also requires the occupation and name and address of the employer of the contributor. Report the principal place of business of any contributor who is self-employed.

### SCHEDULE II

### IN-KIND CONTRIBUTIONS RECEIVED

Detailed Summary Page - provides a summary of all in-kind contributions and valuable things received during the reporting period.

Item 1: Unitemized In-Kind Contributions Received represents the total value of in-kind contributions of \$50.00 or less, in the aggregate per contributor, received during the reporting period.

Items 2 and 3: Enter the total for each section from the corresponding schedules in the report (Part F and Part G).

Enter the page total on Page 1, Report Cover Page, Item F.

Part F and Part G - Use these Parts to itemize in-kind contributions from individuals or political committees according to the dollar value of the contribution. The form is designed to list the dates and amounts of as many as three separate in-kind contributions from the same source in one line item. The amount is equal to the current market value of the item or service contributed.

Totals of Parts F and G should be transferred to the appropriate section on the Schedule II Detailed Summery Page.

#### SCHEDULE III

#### EXPENDITURES

Definition of Expenditure: The payment, distribution, loan or advancement of money or any valuable thing by a candidate, political committee or other person for the purpose of influencing the outcome of an election; the payment, distribution, loan, advance or transfer of money or other valuable thing between or among political committees; the providing of a service or other valuable thing for the purpose of influencing the outcome of a nomination or election of any person to any public office to be voted for in this Commonwealth; or the payment or providing of money or other valuable thing by any person other than a candidate or political committee, to compensate any person for services rendered to a candidate or political committee. (See 25 P.S. \$3241)

### Instructions for Reporting Expenditures

Pursuant to state law, the Statement of Expenditures requires the filer to report the purposes for which funds were expended, the name and address of the entity to whom the expenditure was made, and the amount and date of each expenditure.

Vouchers for all expenditures over \$25.00 must be retained by the candidate or committee treasurer and shall be available for public inspection or copying. Filers are not required to submit vouchers with reports; however, vouchers must be retained for a period of three years.

Transactions between a candidate and his/her committee should be recorded on both the candidate's and committee's reports. For example, if a candidate contributes to or loans the committee money, the amount should appear on the candidate's report as an expenditure and on the committee's report as a receipt. A loan must also be reported by the recipient on the Statement of Unpaid Debts (Schedule IV).

### SCHEDULE IV

### STATEMENT OF UNPAID DEBTS

All unpaid debts and obligations which are outstanding at the end of the reporting period must be reported. If a debt is incurred in one reporting period and not repaid, every report filed must continue to show the outstanding debt, even though there was no activity during the current reporting period.

A debt owed to an individual may be forgiven. A copy of the letter of forgiveness from the individual to the committee must accompany the report filed by the committee in the reporting period in which the debt was forgiven. A debt that is forgiven is considered a contribution to the committee. Such contributions from corporations or unincorporated associations are prohibited by the Election Code.

#### REPORT FILING DEADLINES

Sixth Tuesday Pre-Election - Reporting period closes 50 days prior to election day. Filed only by candidates for Statewide office and political committees/lobbyists supporting such candidates.

Second Friday Pre-Election - Reporting period closes 15 days prior to election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Thirty Day Post-Election - Reporting period closes 20 days after election day. File 30 days after election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Annual Report - Reporting period closes December 31. File by January 31 of the year following the reporting period. Filed by all candidates for nomination or election, political committees and contributing lobbylists.

Political committees required to file pre-election reports must also file post-election reports.

Postmarks - are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the U.S. Postal Service no later than the day prior to the filing deadline.

Late filing fee - A late filing fee of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the report is overdue, plus an additional fee of \$10.00 for the first six days that a report is overdue will be assessed.

### **County Code Table:**

01	Adams	24	Elk	47	Montour
02	Allegheny	25	Erie	48	Northampton
03	Armstrong	26	Fayette	49	Northumberland
04	Beaver		Franklin	50	Perry
05	Bedford	28	Forest	51	Philadelphia
06	Berks	29	Fulton	52	Pike
	Blair	30	Greene	53	Potter
08	Bradford	31	Huntingdon	54	Schuylkill
09	Bucks	32	Indiana	55	Snyder
10	Butler	33	Jefferson	56	Somerset
11	Cambria	34	Juniata	57	Sullivan
12	Cameron	35	Lackawanna	58	Susquehanna
13	Carbon		Lancaster		Tioga
14	Centre	37	Lawrence	60	Union
	Chester	38	Lebanon	61	Venango
10	Clarion		Lehigh	62	Warren
17	Clearfield		Luzerne	63	Washington
18	Clinton	41	Lycoming	64	Wayne
***	Columbia		McKean	65	Westmoreland
20			Mercer	66	Wyoming
21	Cumberland		Mifflin	67	York
22	Dauphin	45	Monroe		
	Delaware		Montgomery	4.1	

### Party Code Table:

REP	Republican Party
DEM	Democratic Party
CST	Constitutional Party
LIB	Libertarian Party
REF	Reform Party
OTH	Other

### Office Code Table:

GOV	Governor
LTG.	Lieutenant Governor
ATI	Attorney General
AUD	Auditor General
TRE	State Treasurer
SPM	Justice of the Supreme Court
SPA	Judge of the Superior Court
CCJ	Judge of the Commonwealth Court
SIS	Senator in the General Assembly
STH	Representative in the General
	Assembly
CPJ	Judge of the Court of Common Pleas
MCJ	Judge of the Municipal Court
TCJ	Judge of the Traffic Court
ОТН	Other (Candidates for local offices
	who file only with the County
	Board of Elections)