

Commonwealth of Pennsylvania - Campaign Finance Report

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

<u></u>						
Filer Identification Number 83-3969891	Report Filed By (Mark X)	Candidat	e	Committee	X	Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Committe	· 2 + ~	Elect	Chuc	K Nelson	
Street Address	646		th St		INE 300	
City Erie	010 (State	PA	Zip Code	16502	
Type of Report (Place x under report type)			1 73		1000 d	
1- 6 th Tuesday 2- 2 nd Friday 3-30 Day Post	4- 6th Tuesday r - a	2 nd Friday	6- 30 Day Post	7- Annual	Special 2 nd Friday	Special 30 Day
Pre-Primary Pre-Primary Primary	1 .		Election		Pre-Election	Post-Election
		·				
Date Of Election	Year		Amendment		Termination	
(MM/DD/YYYY) 05/21/2019			Report		Report	
Summary of Receipts and From Date	To Date			For	Office Use Only	
Expenditures 13/05/201	9 05/07/	2019				
A. Amount Brought Forward From Last Report		0	· · ·	<u> </u>		
B. Total Monetary Contributions and Receipts	\$ 2 04	$\frac{}{}$			Sell Link	The land Later (12.0%) Later (12.0
(From Schedule I) C. Total Funds Available	\$ 2,240	v.00				an −nT⊈ ‡
(Sum of Lines A and B)	1 2,24	0.00				(C)
D. Total Expenditures (From Schedule III)	\$ 2 08	0.80			Company of the second of the s	
E. Ending Cash Balance	c -				marine services	Ç.)
(Subtract Line D from Line C) F. Value of In-Kind Contributions Received	15°	1,20			ATION TO THE	읍入
(From Schedule II)	<u></u>	0			gili sur	1.
G. Unpaid Debts and Obligations (From Schedule IV)	\$	\bigcirc				
p rom senedule IV)	.	Affidavit Sect	tion			
Part 1- If this is a Committee report, treasurer sign h				ge and belief tr	ue, correct and complete	te.
Sworn to and subscribed before me this		, to the D		11		
9 day of may 20 19						
Germonwealth of Pennsylvania - Notary Seal Marilyn Ruth Belson, Notary Public Signature of Person Submitting report Signature of Person Submitting report To red Lead of						
Marilyn Ruth Belson, Notary Public Frie County My sommission expires April 14, 2023 Angle County Printed Name The County Printed Name						
My Commission expires Commission in	umber 1009842	<u> </u>	<u>814</u>	7	146-275	<u>7</u>
Member, Pennsylvania	Association of Notarie	es ^{Ar}	rea Code	Day	rtime Telephone Numbe	<u></u>
Part II- If this is a report of a Candidate's Authorized I swear (or affirm) that to the best of my knowledge				r provisions of t	he Act of June 3. 1937 (P.L. 1333, NO.320) as
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						
ed day of May 20 19	_ ' i	/			~	
mass on] .		Sign.	nature of Condic	iate (Son	_
Signature		_	_	Printed Name		_
My Commission expires 4 14 33	_		314	<u> 7.</u>	20 - 9990 ime Telephone Number	_
MO. DAY YR.	ala Notan Saal	Ar	rea Code	Dayt	ime Telephone Number	,
Commonwealth of Pennsylv Marilyn Ruth Belson,						
Eric County						
My commission number 1009842 Commission number 1009842						

Member, Pennsylvania Association of Notaries

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

83 - 3969 89 I	[4] 2012年 - 1985年	83-3969891	

1.Uniternized Contributions and Receipts-\$50.00 or Less per Contributor	18000	
Total for the reporting period (1)	\$	340.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)	\$	0
All Other Contributions (Part B)	\$	100.00
Total for the reporting period (2)	\$	100:00
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)	\$	0
All Other Contributions (Part D)	\$	1,800.00
Total for the reporting period (3)	\$	1,800.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC/(From Part E)	15 Mg	
Total for the reporting period (4)	\$	D
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, Report Cover Page, Item B)	\$	2,240.00

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				
				Amount
Full Name of Contributing			Date [MM/DD/YYYY]	\$
Committee				100 100 100
House # Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	S

Full Name of Contributing Committee		_	Date [MM/DD/YYYY]	\$
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House # Street Address	_ 		Date [MM/DD/YYYY] #	\$
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City 3	State	Zip Code	Date [MM/DD/YYYY]	<u> </u>
Full Name of Contributing			Date [MM/DD/YYYY]	
Committee			STREET, THE STREET, ST	
House # Street Address			Date [MM/DD/YYYY]	
Street Address				
City	State	Zip Code 💥	Date [MM/DD/YYYY]	組織 珍 夏
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Full Name of Contributing		g conservation approximate entrement 化基金管 电路	Date [MM/DD/YYYY]	
Committee				
House # Street Address			Date [MM/DD/YYYY]	\$ \$ 1 \$ 1
City	State	Zip Code	Date [MM/DD/YYYY]	(\$1
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Full Name of Contributing Committee			Date [MM/DD/YYYY]	
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Gity."	State	Zip Code	Date [MM/DD/YYYY]	\$
			Date [MM/DD/YYYY]	228% 75M
Committee			Photographical Manager And Administration of the Control of the Co	
House # Street Address		,	Date [MM/DD/YYYY]	
			- (100 to 100 to	
Git	State	Zip Code	Date [MM/DD/YYYY]	**************************************
				15.7 (1)

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.)

83-3969891

Full (Verme) of Contributor	ichael T	Kach		04/03/2019	100.00
House## Street/Addin	schael T Cherry	St		Date [MIM/DD/AVAV]	
626 Eric	Siate PA	Z(p/@cda	16502	Date(MM/DD/AYAYI)	
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Full Name of Gontalbutor					
Hovsett Streetwild	GES			Date [MINNDD/MANN]	<u> </u>
City	State	Zip@de		Date (MIN/DD/AAAA)	
Full Name of Contributor			w	NO ECCENTIVINA DO DA VARANA ()	
City	State	রিচ্ছিত্ত ি		(Pate MM/DD/YAYAY	
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(Sijeat/Addi	iess			Date (VIVIVI) S	5
Gly	Seie	ZIp:Code		Detro (MINI/DED/AYAYA)	

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.

#Fileridentification Number:-	
(Full Name of # Gontributing Committee	[Date [MIM/DD/AYYY] 5
House## Street Address	Date:[MIM/DD/AYAYY]] 353
City State Zip Gode	(Date [MM/DD/XXXX]) = 55
TullNameof ContributingComplites	Date([MM/DD/M/A/A])
House ## Street Address	Date [IVIV/ADD/ANAM] \$
clity. State Zip.code.	(IDate)(XIXI/DD/AKYAY)
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Street/Address	(Date(IMM/DD/AVV4)(I) \$
(dity) State Zip(dode	Date (MM/DD/AYYA)
ContillatifusComulities ContillatifusComulities	Date [MIXI/DDY/YWYY4] S
Houses::: Street Address	Date [MIV/OD/AYAV]] S
(Gisy States Zip/Gode	[Datte [MM/DD/MAM]] S
Fall)Nemerof ContributingCommittee	Date (MW/DO/AVA)
Gouse III Street Address	Date MM/DD/AAAM S
(City) States 72/p/code 3	Date [NIVI/DD/AVVVI] S
Countypergraduring to the countypergradure of the coun	Date ININ/DO/MAM
(House## Street#Addiness	Date IVIM/DID/AYAYI
Glsy State Zipicode	(Pate [IVIM/DD/AXAA4] S

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)

93 - 39 69 8 9 1

Full Name of Conner Maureen O'Conner	O4/16/2019 500.00
House # 12828 Street Address Wells wood Trail	Date [MM/DD/YYYY] \$
Chesterland State 04 Zip-code 44026	Date (MM/DD/W/Y/I
Employer Name: Bremer Greenhouse	Cashic,
Employer Mailing Address / 12265 Chill cothe Rd.	Chesterland, OH 44026
Follinameror Contributor Richard Weber	04/26/2019 \$ 500.00
5338 Street/Address Norris Drive	Date [MM/DD/AYAY] \$
Eric State PA Zip Code 16509	Date [MM/DD/MM/I]
Employed Name Not Employed	Occupation Not Employed
TEMPLOVOEM STUDGE AND SERVE SE	ί, ,
British Place of Business Not Employed	
Full Name of Contributor Charles Nelson	03/05/2014 200.00
Charles Nelson House #1 646 Street Address W 9th St	03/05/2014 200.00 **Date:
Charles Nelson House #1 646 Street Address W 9th St Gity Erie PA Zipicode 16502	03/05/2014 200.00 Pate MM/00/MM 2019 100.00 Date MM/00/MM/M 2019 300.00
Charles Nelson House # 646 Street Address W 9th St Gity Erie PA Zipicode 16502 Employed Name The Cross - Eric	03/05/2014 200.00 Date MM/DD/MW/1 3 1 00,00 Date MM/DD/MW/1 3 5 6 00
Charles Nelson House II 646 Street Address W 9th St Gity Eric State PA Zipicode 16502	03/05/2014 200.00 Date MM/DD/MMM 200.00 Date MM/DD/MM 200.00 Date MM/DD/MM 200.00 Date MM/DD/MM 200.00 Date Date MM/DD/MM 200.00 Date Date MM/DD/MM 200.00 Date Date
Charles Nelson House # Street Address W 9th St City Erie Employer Name The Cross - Erre Employer Malling Address / Paincipel Pake Pake Final of the pake Pake Pake Final of the pake Final of the pake Pake Final of the pake Final of	03/05/2014 200.00 Date MM/DD/MM/1 200.00 Date MM/DD/MM/1 200.00 Date MM/DD/MM/1 200.00 Date MM/DD/MM/1 200.00 Date MM/DD/MM/1 200.00 Date MM/DD/MM/1 200.00
Charles Nelson House 18 646 SuccessAddress W 9th St City Erie PA Zipicode 16502 Employer Name The Cross - Eric Employer Nelling Address / Palmologic Business 646 W 9th St. Eric Full Name of Contributor	03/05/2014 200.00 Date MM/DD/MMM
Charles Nelson House: 646 Street Address On PA State PA Zipicode 16502 Employer Name The Cross - Eric Employer Walling Address Address Find PA The Cross - Eric Find PA Find PA Street Address Find PA Zipicode Charles State PA Zipicode Charles State PA Zipicode Street Address Find PA Street Address State PA Zipicode Zipicode State PA Zipicode	03/05/2014 200.00 Date MM/DD/MM/ 3 500.00 Date MM/DD/MM/ 3 500.00 Date MM/DD/MM/ 3 500.00 Date MM/DD/MM/ 3 500.00 Date MM/DD/MM/ 3 5000
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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.

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Rulktome			
lalousee## Street/Address			
City	State	Z ip Gode	&Date MM/DD/AYAYY \$
Receipt Description			
Edliviane			
House ## Street Address			
efty	State	/4p) (લ₀•[≥	(Datte [[VIIVI/DID/AAAAA]) \$
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Fd) Name			
House # Street/Address	INC. TWO TOWNED		
City	State	, यी ः (Gode	-leage-(jix/ixy/idley/Axxxxi) \$
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House (I) Street Address (I) Street Address	- કોમાં લ	শ্ৰ াহ	Date fylixy/D SYAYAWA] \$
	Skuta	Gode Gode	Leare (makesalahan)
Receipt Desidiption			

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

lálentdéntificationNumber:			
1. UNITEMIZEDHNAKIND GONTRIBUTION	SREGEIVED VALUE OF S50	00 C	RIESSPERCONTRIBUTOR
TOTAL for the reporting period	(1)	\$	
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2. IN-KIND CONTRIBUTIONS RECEIVED V	ALGORO ASSOCIATION SYSTEM		(UVIII/ARTIC)
TOTAL for the reporting period	(2)	\$	
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SP TINENINE SENSITION AND AND AND AND AND AND AND AND AND AN			
TOTAL for the reporting period	(3)	\$	
		,	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DUF PERIOD (Add and enter amount totals from box on Page 1, Report Cover Page, Item F)		\$	

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

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	Particular research and American Control of the Con
[Ettl] Namerof Contributor	Date(MM/DD/AXAM)
House## Street/Address	Date MM/DD/XXXXV
(elly State) Zip Gode	Date/[MM//DD//WWA]) S.
Description of Contillution	
Full Menne of Contributor	DETERMINIMENED (
House(:) SpeakAddress	Date [MM/MDD/XXXXI] 3
(Gly) State 21p.Code	(DETECTIVINATION (VALUE)
Description of Contribution	
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પ્રસ્ત્રવનો ફાઇલન હો વિભાગની પાઇલન 	
િકાનો પ્રિકાન કર્જા ઉગ્લોની પ્રાપ્ય :	Date (IMIXI/IDD/AWAY) S
	Date [MIXI/DID/\^^^\] \$
City States Zipedote : Description of Contribution	Dette [M/M//DJD//NANNA] \$
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SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Eull!Name of Contributor			THE STATE OF THE S
			(Date [MM/DD/XYYY] \$5
House # Street Addre	SS		Date [MM/DD/YYYY] \$
GitV.	State	Zip Code	Date [MM/DD/YYY) \$ (\$)
Employer Name			Occupation
Employer/Mailling/Additesss/AP thoig Ribaeron Bustiness	al .		(Description of Contribution
HullMarteroitContributor			(Date (MIN/DD/YYYY))
House## Street-Addre			// Date (MIV)/DD/AAAAA) \$.
(Glty)	State	-Zip:Gode	Date [MM/DD/AYYY] \$
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EmployaeMelling/Address/Filmelip Dece-6/Dustness	al)		Description of Contribution
Hullführme of Contributor			(DateliMiM/DD/W/Y/) #5
House# Street/Addre		(classic long) and the state of	Deite (MM//DD/AAAAA)
बिक्	State	Zip(Code)	(Date [MIM/DD/AAAA)]
lamployer(Name			Oddypation
Employer Nell ling/Addicess // Palidjo Place of Busliness	al .	,	િક્સનોડોઇન જો ઉગામિત્રાઇન
Full Name of Contributor			Date i Mivi/DD/XXXXVI
House,;;; Street Ardice			Date (MIV//DD//AAAM)
(dlay	State	¹ Zip(Gode)	(Date(MM)(DB)/WWW) \$
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timplograddeiling/Address//Paineig Placeof(Bushiess	<u>a</u>		Pesdificion Tof Grandalifon

Statement of Expenditures

1916-10-nitite-tionNumbar 83 - 3969891

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Houself 1305 Street Address Do R 1101 State St	03/05/2019 200.00 Description disexpenditure
	4 1 0 1.
ToWhom Paid PA Code 16501	Access to VoteBuller
Desantis Signs	03/25/2019 497, 14
House 540 Street Address W 18th St	Description of Expanditure
Eric State PA God 16502	Yard Signs
Community Access Media	04/17/2019 50.00
(House # 142 Street Address W 12th St	Desailption of Expenditure
Eric State PA Goden 16501	Access to Condidates
iio Whow Palid	04/24/2019 52.64
House 1162 Sticer Address W 8th St	Description/of/laxpenditure
Giv Erie State PA Gods 16502	Print Material
To Whom Paid USPS	04/24/2019 176.00
HOUSEN 1401 Street Additions State St	Description of Expenditure
Eric Siene PA Gode 1650L	Postage
Biroscak Printing	04/29/2019 1096.00
1919 Streen Address Peach St	Description of Expenditure
Giv Erie PA Gods 16502	Print Material
10 Whom Paid Act Blue	05/06/2019 9.02
Street/Address PO Box 441146	Description of Expenditure
Somerville State MA Gode 02144	Donation Fee Online
Tio William Paid!	Date (MM/DD/MMM)
Flourse # Streen Addiness	Description of Expanditure
Glay Stelle Zip Gode	

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.

Heladentification Number	·			
Rame of Creditor House # Stree Gity Description of Debt	et Address		E DEBT INCURRED B MM/DD/33333 Zip Code s	Outstanding Balance of Debt
(Vame of Credito) House## Stree dity Description of Debts	et Address		E DEBT (NCURRED MM/JDD/VVYY) Zip Gode	Outstanding Balance of Debt
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Name of Gaditor House::: Giv Description of Deby	St Address		E(DEBIFINGURRED) MM/JDD//AAAA] Z(D) Code	(Outstanding(Balance.of)Debit
Name of Greditor Nouse iii Street Givy Desemption of Dabit	Address		EDEBRINGURRED MINI/DD//WAWA] Zip gode	. Outstanding Balance of Debt.
Maine of Caroliton House (f) Since City Destadiption of Debix	t ∕Address	278	AIDABITINGURRAD VIVI/DE/(AYAA) ZID GOGE	Outstandling Balance of ADabi