

Commonwealth of Pennsylvania - Campaign Finance Report

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Filer Identification Number	on 83	-4364563			Report Filed By Candida (Mark X)			ite			C	omn	nittee		•	X		Lobi	yist			
Name of Filing Co Lobbyist	ommittee, Ca	ndidate o	r	Frie	riends to Elect Lori Pickens																	
Street Address				133:	31 W 25th Street																	
City	Erie							Sta	ate	PA			Zi	р Со	de	1650	02					
Type of Report (F	lace x under r	eport typ	e)				·						•									
1-6 th Tuesday	2- 2 nd Friday	3- 30 Da	v Post	4-6	th Tue	sday	5- 2	nd Fr	iday	6-3	0 Da	y Post	7-	Anr	nual	Spec	cial 2	nd Fric	lay	Special 30 Day		
	Pre-Primary	Primary	- 1		Elec				- 1 - 1 - 1 - 1 - 1 - 1				Pre-Election Post-Election			ion						
	X																					
Date Of Election (MM/DD/YYYY)		05/21/2	019	Yea	ar					Rep	endn ort	nent				Rep	ninal ort	tion				
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Summary of Reco	eipts and	From Da	ite		Ľ	o Date	<u> A</u>	m							FOF	Office	use	Only				
		4/2	4/19				5 /6 /1	9														
A. Amount Broug	ght Forward F	rom Last I	Report		\$		0				-					······						
B. Total Monetar	•	ns and Re	ceipts	\neg	\$		1,572	,														
(From Schedule I	•			_	_ _																	
C. Total Funds Av (Sum of Lines A a					\$ 1,572														gn-	ر.		
D. Total Expendit				+	\$												٠	≪ C⊃	C.	# >		
(From Schedule I				İ		881.99						s pope Strain										
E. Ending Cash Ba					\$		690.0)1										70 1		(** * 		
(Subtract Line D	•	na Basaiu	· nd	\dashv	\$													(۱۳۱۱) سپر ۱۳۱۱				
(From Schedule I		ns Receiv	ea		٦		0												}		1	
G. Unpaid Debts		ns		+	\$					•								دوريا او کيا سام پرانسو پرانسو		11" i 98	(7)	
(From Schedule I	V)						0											1:-		<u> </u>		
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Part 1- If this is a Co I swear (or affirm) t	mmittee repor	t, treasurer including th	sign ne ne attac	re. II	2015 2016	uias on	G GENT	e rep r. is t	ort, ca	naida best o	te sigi f mv l	n nere. knowler	lge a	nd b	elief tr	ue. cor	rect a	and cor	nplet	<u>ငာ</u> e.		
Sworn to and subscribed day of		e this 20(7	<u> </u>	, Pennsylvania As	. mm.	ealth of Pe		_	$\underline{\mathscr{K}}$	W	nature	of Pe	erson	$\underline{\mathbb{U}}$	itting r	ب_					
My Commission expires 4-3-13 MO. DAY YR.						m(y 86 April 3. 3	ivania - Nou lotary Publi		Δ	u 53 irea Co		_		-	& I	<u> </u>		- 19 ione Nu	 1	r	-	
Part II- If this is a re I swear (or affirm) to amended.											t viol	ated an	y pro	visio	ns of t	he Act	of Ju	ne 3, 19	937 (F	P.L. 133	3, NO	.320) as
day of Si	May ignature	20	19 de 3 YR.	- う -		My commission expires April	Tonia F	Š.		S/Lirea Co	14 ode		11		lame 8	81.	- 4	// 7 Z				

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number 83-4364563		
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period (1)	\$	857
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)	\$	815
Total for the reporting period (2)	\$	815
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)		
Total for the reporting period (4)	\$	0
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)	\$	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 Ident	ification Numb	er	83-436456	3				
	***************************************	·	·	,				Amount
Full Name	e of Contribut	ting				Date IV	IM/DD/YYYY]	\$
Committe		o	Friends to I	Elect Lori Pic	kens			
House #		Street /	Address			Date [N	IM/DD/YYYY]	\$
City				State	Zip Code	Date [M	M/DD/YYYY]	\$
Full Name	e of Contribut	ing		-1		Date M	IM/DD/YYYY]	\$
Committe								
House #	T	Street /	Address			Date (M	M/DD/YYYY]	\$
City			· · · · · · · · · · · · · · · · · · ·	State	Zìp Code	Date [M	M/DD/YYYY]	\$
								•
	e of Contribut	ing				Date [M	M/DD/YYYY]	\$
Committe	ee							
House #]	Street A	Address		· · · · · · · · · · · · · · · · · · ·	Date [M	M/DD/YYYY]	\$
City	J			State	Zip Code	Date (M	M/DD/YYYY]	\$
Full Name	of Contribut	ing				Date [M	M/DD/YYYY]	\$
Committe	e							
House #		Street A	Address			Date [M	M/DD/YYYY]	\$
City	1			State	Zip Code	Date IM	M/DD/YYYY]	\$
,					-,		,,	
Full Name	of Contribut	ing i		1 1	<u> </u>	Date IM	M/DD/YYYY]	\$
Committe		····o				Date In	,,	
11						Pa_3 Tea	M/DD bosses	
House #		Street A	ddress			Date IM	M/DD/YYYY]	\$
City				State	Zip Code	Date [M	M/DD/YYYY]	\$
	of Contribut	ing				Date [M	M/DD/YYYY]	\$
Committe	e .					,		
House #		Street A	ddress			Date [M	M/DD/YYYY]	\$
City	J			State	Zip Code	Date fM	M/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 Ide	ntification Numb	er:	83-4364563					,			
			,								
Full Na	me of Contribu	tor							Date [MM/DD/YYYY]	\$	
			Isaiah Pickei	ns					04/22/2019		115
House a	#	Stre	et Address						Date [MM/DD/YYYY]	\$	
		ĺ		2422	east 26t	h street					İ
City		·			State	L	Zip Code	15740	Date [MM/DD/YYYY]	\$	
	Erie					PA		16510		<u>.</u>	
Full Na	me of Contribu	tor							Date [MM/DD/YYYY]	\$	
			Sonia K Rios	i					04/25/2019		100
House i	#	Stre	et Address						Date [MM/DD/YYYY]	\$	
	24				E 6th St	reet					
City		l			State		Zip Code	T	Date [MM/DD/YYYY]	\$	
	Waterford					PA		16441		1	
Full Na	me of Contribut	tor				1	'		Date [MM/DD/YYYY]	\$	
		i	Vanessa Wa	iker					04/27/2019		100
House #	#	Stre	eet Address	ļ					Date [MM/DD/YYYY]	\$	
		1109 Courtleigh Dr						· · · · · · · · · · · · · · · · · · ·			
City					State		Zip Code		Date [MM/DD/YYYY]	\$	
· -	Akron			ŀ		OH		44313			
Full Na	me of Contribut	tor							Date [MM/DD/YYYY]	\$	
House #	 	Stre	eet Address						Date [MM/DD/YYYY]	\$	
City		<u> </u>		\Box	State		Zip Code	1	Date [MM/DD/YYYY]	\$	
•											
Full Na	me of Contribut	tor		•				•	Date [MM/DD/YYYY]	\$	
House #	#	Stre	et Address						Date [MM/DD/YYYY]	\$	
City					State		Zip Code	1	Date [MM/DD/YYYY]	\$	
-											
Full Na	me of Contribut	or					'	•	Date [MM/DD/YYYY]	\$	
House #	¥ [Stre	et Address	<u> </u>					Date [MM/DD/YYYY]	\$	
City				L	State		Zip Code	Τ	Date [MM/DD/YYYY]	\$	
,										1	

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.

THE IDENTIFICATION TO THE	83-4364563				
Full Name of Contributing Committee	1			Date [MM/DD/YYYY]	\$
House #	treet Address	44.********	, and any sold and a second se	Date [MM/DD/YYYY]	\$
City	·	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee		l	-	Date [MM/DD/YYYY]	\$
House # S	treet Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee		1 1	who to the same of	Date [MM/DD/YYYY]	\$
House #	treet Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$
House # S	treet Address	,		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$
House # S	treet Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee			. •	Date [MM/DD/YYYY]	\$
House # S	treet Address			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 Iden	tification Numb	er: 83-436456	3							
					<u> </u>			•		
Full Nam	ne of Contribut	tor					Date [MM/I	DD/YYYY]	\$	
		Kevin Nels	on				04/22			500
House #	T	Street Address	s				Date [MM/I	DD/YYYY]	Ş	
			4218 Roxann	a dr					1	
City	. l		State	PA	Zip Code	16510	Date [MM/E	D/YYYY]	\$	
lL				FA		10310			<u> </u>	
Employe	er Name		Erie Insurano	e			Occupation	Property and	Casua	alty
	er Mailing Add I Place of Busin		100 Erie Insu	rance place,	Erie PA 16530			-1		
	e of Contribut						Date [MM/I	D/YYYYI	\$	
(10)						•				
House #	1	Street Addres	-			 -	Date [MM/I	D/YYYY)	\$	
110000		Street Muui es.	1						1	
City			State	1	Zip Code	1	Date [MM/I	D/YYYY1	\$	
"									1	
Employe	r Name			ı			Occupation		J	
	r Mailing Add		<u> </u>					,L,	•	
	Place of Busin							n hoond	Ι Δ	
Full Nam	e of Contribut	or					Date [MM/D	D/YYYYJ	\$	
							Date [MM/E	TANANA A	\$	
House #		Street Address					Date [MM/E	וַזיזיןטי		
0.0			1 62-4-		T =:- c3-	 	Date [MM/D	no (www)	\$	
City			State		Zip Code		Date [www/L	10/1111	•	
Employe	r Name		<u> </u>	_l	1		Occupation		.1 .	
Employe	r Mailing Add	ress /	<u> </u>					I		
	Place of Busin									
Full Nam	e of Contribut	or				,	Date [MM/D	D/YYYY]	\$	
House #		Street Address					Date [MM/D	D/YYYY]	\$	
City	<u>, </u>		State	· · · · ·	Zip Code	1	Date [MM/D	D/YYYY]	\$	
Employe	r Name				<u> </u>	·	Occupation		•	
Employe	r Mailing Addı	ess /						J		

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 Numb	83-4364563			
			· · · · · · · · · · · · · · · · · · ·	
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	### <u> </u>		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			<u> </u>	
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				•
	Street Address	Cana	7: :	Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [WINN/DD/1111] \$
Receipt Description	·.			
Full Name				
House #	Street Address	angdan an or than all all code.		
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

Filer Identification Number:	83-4364563		
1. UNITEMIZED IN-KINI	O CONTRIBUTIONS RECEIVED-VALUE OF \$5	0.00 (DR LESS PER CONTRIBUTOR
TOTAL for the reporting period	(1)	\$	0
2. IN-KIND CONTRIBUT	IONS RECEIVED-VALUE OF \$50.01 TO \$250	.00 (Fi	ROM PART F)
TOTAL for the reporting period	(2)	\$	0
3. IN-KIND CONTRIBUT	ION RECEIVED-VALUE OVER \$250.00 (FROI	VI PAR	TG)
TOTAL for the reporting period	(3)	\$	0
	TRIBUTIONS DURING THIS REPORTING at totals from boxes 1, 2, and 3; also enter ltem F)	\$	0

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Number:	83-4364563	
·		

Full Name of Contributor			Date [MM/DD/YYYY]	\$
House # Street Address			Date [MM/DD/YYYY]	\$
House # Street Address			Date (miny DD) 11113	*
City	State	Zip Code	Date [MM/DD/YYYY]	\$
to a contract of				·
Description of Contribution		<u> </u>	<u> </u>	L
Full Name of Contributor			Date [MM/DD/YYYY]	\$
House # Street Address		- Control of the Cont	Date [MM/DD/YYYY]	\$
House # Street Address			Date (MAYOO) 1111)	
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution				<u> </u>
Description of Contribution				
Full Name of Contributor	, , , , , , , , , , , , , , , , , , , ,		Date [MM/DD/YYYY]	\$
	· · · · · · · · ·		Date [MM/DD/YYYY]	\$
House # Street Address			Date [www/DD/1111]	
City	State	Zip Code	Date [MM/DD/YYYY]	\$
	l ser e			
Description of Contribution		<u> </u>	<u> </u>	
Full Name of Contributor			Date [MM/DD/YYYY]	\$
House # Street Address			Date [MM/DD/YYYY]	\$
Street Address				
City	State	Zip Code	Date [MM/DD/YYYY]	\$
		: .		
Description of Contribution				
Full Name of Contributor			Date [MM/DD/YYYY]	\$
Full Name of Contributor			Sacc (Miny DD) 1111)	
House # Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	\$
City	Jeace	Zip Coue	Pate [initial pol (1)]	*
Description of Contribution	I			

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:	83-4364563	

Full Name of Contrib	utor				Date [MM/DD/	YYYY]	\$
House #	Street Address				Date [MM/DD/	YYYY]	\$
						·	
City		State	Zip Code		Date [MM/DD/	YYYY]	\$
		1.					·
					0		
Employer Name					Occupation		
Employer Mailing Ad	dress / Princinal				Description		
Place of Business	oress / trincipal				of		
Tidde or business					Contribution		
P. II N					Date [MM/DD/	vvvv1	\$
Full Name of Contrib	utor				Date [WINTDD]	11113	7
House #	<u> </u>				Date [MM/DD/	VVVVI	\$
nouse#	Street Address			ļ	POLE [MIM!] DD]	* 1 1 6 1	*
an da hiji							
City		State	Zip Code		Date [MM/DD/	vvvv1	\$
City		Jiare	Zip Code	1	Date [mm, out	*****	*
Employer Name		ļ	<u>l</u>	· · · · · · · · · · · · · · · · · · ·	Occupation		· / · · · · · · · · · · · · · · · · · ·
Employer name							
Employer Mailing Ad	dress / Principal		<u>,</u>		Description	,	
Place of Business					of		
					Contribution		
Full Name of Contrib	utor		<u> </u>		Date [MM/DD/	YYYY]	\$
Tan Nume of Contino				ŀ		· · · · ·	
				·			
House #	Street Address				Date [MM/DD/	YYYY]	\$
	Street Address			1			
							•
City		State	Zip Code		Date [MM/DD/	YYYY]	\$
3.48°							·
		.]					
Employer Name			1		Occupation		
		<u></u>				<u> </u>	
Employer Mailing Ad	dress / Principal				Description		
Place of Business					of		
					Contribution		
Full Name of Contrib	utor				Date [MM/DD/	YYYY]	\$
e egiter, mir en i Mir en en en en en en en en en en en en en	·				:		:
*	·						
House#	Street Address				Date [MM/DD/	YYYY]	\$
				†			
	-						
City		State	Zip Code		Date [MM/DD/	YYYY]	\$
Sila Jawa Jawa		1		j			
1 1 1							<u>l_,</u>
Employer Name				j	Occupation		
Employer Mailing Ad	dress / Principal	1			Description		
Place of Business	aress i commina			ļ	of		
ししゅんた ひに ひがりにだるり		1					
	the state of the s				Contribution		

SCHEDULE III Statement of Expenditures

Filer Identification Number:	83-4364563		
	05 700 1000		I

To W	hom Paid				·		Date [MM/DD/YYYY]	\$	
		Desantis Signs & Graph					04/24/2019		302.08
House	e#	Street Address 540	W 18th S	treet			Description of Expend	iture	
City	Erie		State	PA	Zip Code	16502	Yard Signs		
To W	hom Paid	Sam's Club				, ,	Date [MM/DD/YYYY]	\$	62.66
		Sam S Club					04/25/2019		02.00
House	e#	Street Address 720	0 Peach S	treet			Description of Expendit	ture	
City	Erie		State	PA	Zip Code	16502	water, cookie tray, breakfas	t tray	
To W	hom Paid	Malman					Date [MM/DD/YYYY]	\$	18.55
		Walmart					04/25/2019		16.33
House	e#	Street Address 271	1 Elm Stre	et			Description of Expendit	ture	
City	Erie		State	РА	Zip Code	16504	7up, Hawailan Punch		
To Wi	hom Paid	l .					Date [MM/DD/YYYY]	\$	
		Nunzi's					04/25/2019		42.4
House	e#	Street Address 233	D East 38t	h Street			Description of Expendit	ture	
City	Erie		State	PA	Zip Code	16510	party sub		
				1	1	1			
To W	hom Paid			1	1	l	Date [MM/DD/YYYY]	\$	200
To Wi	hom Paid	Desantis Signs & Graph	ics	1	1	·	Date [MM/DD/YYYY] 04/30/2019	\$	300
To Wi		Street Address	ics W 18th Si	reet					300
House		Street Address	W 18th St	reet PA	Zip Code	16502	04/30/2019		300
House	2#	Street Address 530	W 18th St		Zip	16502	04/30/2019 Description of Expendit		
House	e# Erie	Street Address	W 18th St		Zip	16502	04/30/2019 Description of Expendit yard signs	ture	300 80
House	Erie	Street Address Avalon Street Address	W 18th St	РА	Zip	16502	04/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY]	ture \$	
House City To Wi	Erie	Street Address Avalon Street Address	W 18th State Vest 10th	РА	Zip	16502	04/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] 05/01/2019	ture \$	
City To Wh House	Erie hom Paid	Avalon Street Address 16 V	W 18th State Vest 10th	PA Street	Zip Code		04/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] 05/01/2019 Description of Expendit	ture \$	80
City To Wh House	Erie Erie Erie	Street Address Avalon Street Address	W 18th State Vest 10th	PA Street	Zip Code		04/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] 05/01/2019 Description of Expendit venue for "mix & mingle" Date [MM/DD/YYYY] 05/03/2019	ture \$	
City To Wh House	Erie # Erie # Erie hom Paid	Avalon Street Address Oriental Trading	W 18th State Vest 10th	PA Street	Zip Code		04/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] 05/01/2019 Description of Expendit venue for "mix & mingle" Date [MM/DD/YYYY]	ture \$	80
House City To Wh House City To Wh	Erie # Erie # Erie hom Paid	Avalon Street Address Oriental Trading	W 18th Si State Vest 10th State	PA Street	Zip Code		04/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] 05/01/2019 Description of Expendit venue for "mix & mingle" Date [MM/DD/YYYY] 05/03/2019	ture \$	80
House City House City To Wh	Erie Erie Erie Erie	Avalon Street Address Oriental Trading	W 18th Si State Vest 10th State	PA Street PA Street	Zip Code Zip Code	16501	04/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] 05/01/2019 Description of Expendit venue for "mix & mingle" Date [MM/DD/YYYY] 05/03/2019 Description of Expendit	ture \$	80
House City House City To Wh	Erie hom Paid Erie hom Paid Omaha	Avalon Street Address Oriental Trading	W 18th Si State Vest 10th State	PA Street PA Street	Zip Code Zip Code	16501	O4/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] 05/01/2019 Description of Expendit venue for "mix & mingle" Date [MM/DD/YYYY] 05/03/2019 Description of Expendit	\$ ture	76.3
House City House City House City To Wh	Erie hom Paid Erie hom Paid Omaha	Avalon Street Address 16 V Oriental Trading Street Address 420	W 18th Si State Vest 10th State	PA Street PA Street	Zip Code Zip Code	16501	O4/30/2019 Description of Expendit yard signs Date [MM/DD/YYYY] O5/01/2019 Description of Expendit venue for "mix & mingle" Date [MM/DD/YYYY] O5/03/2019 Description of Expendit personalized pencils Date [MM/DD/YYYY]	\$ ture	76.3

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.

				<u> </u>	
Filer Identification Number:	83-4364563				
		· · · · · · · · · · · · · · · · · · ·	 		

Name of Creditor	Outstanding Balance of Debt
House # Street Address	DATE DEBT INCURRED \$ [MM/DD/YYYY]
City	tate Zip Code
Description of Debt	
Name of Creditor	Outstanding Balance of Debt
House # Street Address	DATE DEBT INCURRED \$ [MM/DD/YYYY]
City	tate Zip Code
Description of Debt	
Name of Creditor	Outstanding Balance of Debt
House # Street Address	DATE DEBT INCURRED \$ [MM/DD/YYYY]
City	tate Zip Code
Description of Debt	
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House # Street Address	DATE DEBT INCURRED \$ [MM/DD/YYYY]
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