



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		Report Filed By (Mark X)	<input checked="" type="checkbox"/> Candidate	<input type="checkbox"/> Committee	<input checked="" type="checkbox"/> Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Committee to Elect Joseph R Cancilla for County Council				
Street Address	542 Orchard Beach Rd				
City	North East	State	Pa	Zip Code	16428

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd 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)	05/21	Year	2019	Amendment Report	<input type="checkbox"/>	Termination Report	<input checked="" type="checkbox"/>	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	05/21/2019	06/21/2019	
A. Amount Brought Forward From Last Report	\$	0	<div>NOT RECORDED 2019 JUN 25 PM 12:36 K4</div>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	1,000	
C. Total Funds Available (Sum of Lines A and B)	\$	1,000	
D. Total Expenditures (From Schedule III)	\$	1,000	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	0	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0	

Part I- If this is a **Committee** report, treasurer sign here. If this is a **Candidate** report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, is true, correct and complete.

Sworn to and subscribed before me this 24th day of June 2019

Signature: Jonica Hernandez

My Commission expires 4-3-23 MO. DAY YR.

Signature of Person Submitting report: [Signature]

Printed Name: ELIZABETH A. CANCELLA

Area Code: 814 Daytime Telephone Number: 490-5812

Part II- If this is a report of a **Candidate's Authorized Committee**, candidate shall sign here.

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 25th day of June 2019

Signature: Kimberly Alexander

My Commission expires 10 31 2019 MO. DAY YR.

Signature of Candidate: [Signature]

Printed Name: Joseph R Cancilla

Area Code: 717 Daytime Telephone Number: 490 5813

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Kimberly S. Alexander, Notary Public
City of Erie, Erie County
My Commission Expires Oct 31, 2019
PENNSYLVANIA ASSOCIATION OF NOTARIES

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	Committee to Elect Joseph R Cancilla
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1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period (1)	\$	
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)	\$	
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)	\$	1,000
Total for the reporting period (3)	\$	1,000
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
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>	\$	

SCHEDULE III
Statement of Expenditures

File Identification Number:	Committee to Elect Joseph R Cancilla
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To Whom Paid		Tri County Letter		Date [MM/DD/YYYY]		\$ 409.17	
House #	2904	Street Address		Shannon Rd		Description of Expenditure	
City	Erie	State	Pa	Zip Code	16510	Postage	
To Whom Paid		C&C Printing		Date [MM/DD/YYYY]		\$ 222.6	
House #	22	Street Address		South Lake St		Description of Expenditure	
City	North east	State	Pa	Zip Code	17428	Postcards	
To Whom Paid		Desantis Signs		Date [MM/DD/YYYY]		\$ 368.23	
House #	540	Street Address		West 18th St		Description of Expenditure	
City	Erie	State	Pa	Zip Code	16502	Yard Signs	
To Whom Paid				Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure	
City		State		Zip Code			
To Whom Paid				Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure	
City		State		Zip Code			
To Whom Paid				Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure	
City		State		Zip Code			
To Whom Paid				Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure	
City		State		Zip Code			
To Whom Paid				Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure	
City		State		Zip Code			