

## 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)	Candidate	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		FRIENDS OF JOHN GROH				
Street Address		603 MONTPELIER AVE				
City	ERIE	State	PA	Zip Code	16505	
Type of Report (Place x under report type)						
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		Year	Amendment Report		<input type="checkbox"/>	Termination Report
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Summary of Receipts and Expenditures		From Date	To Date	For Office Use Only		
		05/10/2019	06/10/2019			
A. Amount Brought Forward From Last Report		\$	6625.50			
B. Total Monetary Contributions and Receipts (From Schedule I)		\$	200.00			
C. Total Funds Available (Sum of Lines A and B)		\$	6825.50			
D. Total Expenditures (From Schedule III)		\$	285.00			
E. Ending Cash Balance (Subtract Line D from Line C)		\$	6540.50			
F. Value of In-Kind Contributions Received (From Schedule II)		\$				
G. Unpaid Debts and Obligations (From Schedule IV)		\$				
Affidavit Section						
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 on paper, is to the best of my knowledge and belief true, correct and complete.						
Sworn to and subscribed before me this		COMMONWEALTH OF PENNSYLVANIA				
17 day of JUNE 2019		NOTARIAL SEAL				
Judith Zelina		Judith Zelina, Notary Public				
Signature		Millcreek Twp., Erie County				
		My Commission Expires Jan. 11, 2021				
		MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES				
My Commission expires		1 11 2021		Area Code		814-450-5175
MO. DAY YR.						Daytime Telephone Number
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		COMMONWEALTH OF PENNSYLVANIA				
17 day of JUNE 2019		NOTARIAL SEAL				
Judith Zelina		Judith Zelina, Notary Public				
Signature		Millcreek Twp., Erie County				
		My Commission Expires Jan. 11, 2021				
		MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES				
My Commission expires		1 11 2021		Area Code		449-7264
MO. DAY YR.						Daytime Telephone Number

2019 JUN 17 PM 3:09  
 ERIE COUNTY  
 VOTER REGISTRATION

SCHEDULE I  
**Contributions and Receipts**  
Detailed Summary Page

Filer Identification Number	FRIENDS OF JOHN GROH
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<b>1. Unitemized Contributions and Receipts—\$50.00 or Less per Contributor</b>		
Total for the reporting period	(1)	\$ 0.00
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>		
Contributions Received from Political Committees (Part A)	\$	
All Other Contributions (Part B)	\$	200.00
Total for the reporting period	(2)	\$ 200.00
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>		
Contributions Received from Political Committees (Part C)	\$	
All Other Contributions (Part D)	\$	
Total for the reporting period	(3)	\$ 0.00
<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>		
Total for the reporting period	(4)	\$ 0.00
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>		\$ 200.00

SCHEDULE III  
Statement of Expenditures

Filer Identification Number:	FRIENDS OF JOHN GROH
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To Whom Paid		MCDOWELL FOOTBALL BOOSTER			Date (MM/DD/YYYY)	\$ 100.00
House #	Street Address		3580 W. 38TH ST.		Description of Expenditure	
City	ERIE	State	PA	Zip Code	ADVERTISEMENT	
To Whom Paid		ASBURY WOODS			Date (MM/DD/YYYY)	\$ 150.00
House #	Street Address		4105 ASBURY RD.		Description of Expenditure	
City	ERIE	State	PA	Zip Code	EVENT TICKETS	
To Whom Paid		COUNTY OF ERIE			Date (MM/DD/YYYY)	\$ 35.00
House #	Street Address		140 W. 6TH ST.		Description of Expenditure	
City	ERIE	State	PA	Zip Code	VOTER LIST	
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		

## 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:	
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Full Name of Contributor				Date [MM/DD/YYYY]		\$
LAURA A SAVELLI				05/20/2019		100.00
House #	Street Address		Date [MM/DD/YYYY]		\$	
	1315 E. 37TH ST.					
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
ERIE	PA	16504				
Full Name of Contributor				Date [MM/DD/YYYY]		\$
VINCENT A SAVELLI				05/20/2019		100.00
House #	Street Address		Date [MM/DD/YYYY]		\$	
	2320 NINA DR.					
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
ERIE	PA	16506				
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Date [MM/DD/YYYY]		\$	