

# Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	83-4110 386	Report Filed By (Mark X)	Candidate	Committee	Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Committee To Elect Shawn Lyons				
Street Address	3917 DAVISON AVE				
City	ERIE	State	PA	Zip Code	16504 -

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	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	11/05/2019	Year	2019	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
A-Amount Brought Forward From Last Report	05-06-19	06-10-19	<p>11/11/19 6:45 PM</p> <p>7</p>
B-Total Monetary Contributions and Receipts (From Schedule I)		\$ 9610	
C-Total Funds Available (Sum of Lines A and B)		\$ 422.74	
D-Total Expenditures (From Schedule III)		\$ 518.84	
E-Ending Cash Balance (Subtract Line D from Line C)		\$ 50394	
F-Value of In-Kind Contributions Received (From Schedule II)		\$ 14.90	
G-Unpaid Debts and Obligations (From Schedule IV)		\$ 8	

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 page 2, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

11<sup>th</sup> day of June 20 19  
 Tonia Fernandez  
 Signature

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

Gerald T. NAMEY  
 Signature of Person Submitting Report  
 Printed Name

814 881-1800  
 Area Code 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

11<sup>th</sup> day of June 20 19  
 Tonia Fernandez  
 Signature

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

Shawn Lyons  
 Signature of Candidate  
 SHAWN LYONS  
 Printed Name

(814) 392-0138  
 Area Code Daytime Telephone Number

Commonwealth of Pennsylvania - Notary Seal  
 Tonia Fernandez, Notary Public  
 Erie County  
 My commission expires April 3, 2023  
 Commission number 1288912  
 Member, Pennsylvania Association of Notaries

**SCHEDULE III**  
**Statement of Expenditures**

Filer Identification Number	83-4110-386
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To Whom Paid		HARLAND CLARK checks		Date (MM/DD/YYYY)	5/6/2019	\$	18.09
House #	Street Address			Description of Expenditure			
City	State			Zip Code	CHECKS for Account		
To Whom Paid		Vista Print		Date (MM/DD/YYYY)	5/18/2019	\$	255.96
House #	Street Address			Description of Expenditure			
City	State			Zip Code	DOOR HANGERS		
To Whom Paid		Vista Print		Date (MM/DD/YYYY)	5/23/2019	\$	210.02
House #	Street Address			Description of Expenditure			
City	State			Zip Code	Button Stickers		
To Whom Paid		Vista Print		Date (MM/DD/YYYY)	5/23/2019	\$	19.87
House #	Street Address			Description of Expenditure			
City	State			Zip Code	Button Stickers		
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			

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

Filer Identification Number <b>83-4110 386</b>		
<b>1. Unitemized Contributions and Receipts—\$50.00 or Less per Contributor</b>		
Total for the reporting period	(1)	\$ <b>25.94</b>
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>		
Contributions Received from Political Committees (Part A)	\$	<b>396.80</b>
All Other Contributions (Part B)	\$	<del>Ø</del>
Total for the reporting period	(2)	\$ <b>396.80</b>
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>		
Contributions Received from Political Committees (Part C)	\$	<del>Ø</del>
All Other Contributions (Part D)	\$	<del>Ø</del>
Total for the reporting period	(3)	\$ <del>Ø</del>
<b>4. Other Receipts—Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>		
Total for the reporting period	(4)	\$ <b>422.74</b>
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)		\$ <b>422.74</b>