

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer identification 2019c0 156	Report Filed By Car	ididate	Committee	Lobbyist				
Number 2019CO 159	(Mark X)							
Name of Filing Committee, Candidate or		+	1. 61. 1	CONTRACTOR SANDAR CONTRACTOR OF THE PROPERTY OF THE PROP				
Lobbyist Street Address	Sinnott	zseph Con	n to Elect					
	650 Wes7	- 40 × 5	<u>+ </u>					
city ERIP	5ta	te PA	Zip Code 1650	9				
Type of Report (Place x under report type)	- FURNISC	many (still)	Committee of the Commit					
	4. 6th Tuesday 5. 2 nd Fri	day 6-30 Day Post	7- Annual Special 2" Fr	lday Special 30 Day				
Pre-Primary Pre-Primary Primary	Pre-Election Pre-Elec		Pre-Election	Post-Election				
	The Address of the William Control of the Control o							
Date Of Election 5/21/19	Year 2019	Amendment Report	Termination Report					
	Englishman, T. Servi	Itepere						
Summary of Receipts and From Date Expenditures	To Date	a d de la calair	For Office Use Only					
5/7/19	6/10/19							
A. Amount Brought Forward From Last Report	\$ 48921.	/2						
B. Total Monetary Contributions and Receipts	\$ 3		,	ga yan				
(From Schedule I)	1.6	9		7				
C. Total Funds Available (Sum of Lines A and B)	\$ 48927 8	> 1						
D. Total Expenditures	\$ 10 1740	<u>' </u>						
(Fram Schedule III)	1620511	6	•	C.				
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 2727.0							
F. Value of in-Kind Contributions Received	\$	-		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
(From Schedule II)	0			λ				
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 3000.0	0		λ				
	apressed .	it Section						
Part 1- If this is a Committee report, treasurer sign h	ere. If this is a Candidate repo	rt, candidate sign here.						
I swear (or affirm) that this report, including the attac Sworn to and subscribed before me this	ched schedules on paper, is to	the best of my knowled	ige and belief true, correct and co	omplete.				
	MONWEALTH OF PE	NINSYLVANIA Z	ich I smual f	√				
Whi.	NOTARIAL SE		of Person Submitting report	<u> </u>				
Signature VOOLLET	N ZIMMERMAN BORZON.	NOTARY PURICE	Printed Name	<u> </u>				
	City of Erie, Erie C	ounty (Un 2 2/ 2	,				
My Commission expires // CO My	mmission Expires N	101.020, 2020	Daytime Telephone N	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								
13 dough Will = 19	• •							
Chen March	-	Sign	ature of Candidate					
Signature	- j '		ept E Sinnot	<u>- </u>				
Commonwealth of Dear	ania-Notany Soot	814	Printed Name	דמו נ				
- Stielle Delle Curti. No	arv Public	Area Code	874-3460	mher				
My Commission Expires Fe	bruary 25, 2022	Area Code	Daytime Telephone Nu	aniud!				
Commission No. 1	186974							

SCHEDULE 1 Contributions and Receipts

Detailed Summary Page

						•
Filer Identification Number	Sinnott	Joseph	Com	10	Elect	

1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	0
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		1,410	
Contributions Received from Political Committees (Part A)		\$	0
All Other Contributions (Part B)		\$	0
Total for the reporting period	(2)	\$	O
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)	espes Capital	
Total for the reporting period	(4)	\$	1.69
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, ReCover Page, Item B)	port	\$	1.69

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 Number:

Filer Identification Number	Sinnott Joseph Com to Elect
Full Name	First National Bank
House # Si	creet Address One North Shape Center
City and a proper second	Pittsburgh State PA code 15212 Bate [MM/DD/YYYY] \$ 1.69
Receipt Description	Bank Interest (May - \$ 1.58, June \$,11)
Full Name	THE TARREST CONTRACTOR OF STREET
La company of the com	reet Address
City	State Zip Date [MM/DD/YYYY] \$ Code
Receipt Description	The control of the co
Full Name	
House # St Citý	reet Address
	State Zip Date [MM/DD/YYYY] \$ Code
Receipt Description	
Full Name	
	reet Address
City and a promote and a comment of the comment of	State Zip Date MM/DD/YYYY] \$ Gode
Receipt Description	
Full Name	
House # Sti	-State Zip Date [MM/DD/YYYY] \$
	Code
Receipt Description	
Full Name	
	eet Address State Zip Date [MM/DD/YYYY] 5
E pais en el empellon en la califa La la catala de Asac de la cal	Code
Receipt Description	

Statement of Expenditures

Filer Identification Number:	_				_			
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	0 () (ושו	VVS CP/V		1000			
							The second secon	

Moree Advertising	Date [MM/DD/YYYY] \$ 30000.00
House # 5159 Street Address Meritee Dr	Description of Expenditure
City Eple State PA EDGE 16506	TV Advertising
Connoisceur Media	Date [MM/DD/YYYY] \$ /2-00.00
House # 1 Street Address Boston Store Place	Description of Expenditure
ERIC State PA Zip 16501	Digital Advertising
Tri County Letter	Date (MM/DD/YYY) \$ 285.04
2904 Street Address Shannon Rd	Description of Expenditure
City EALS State PA Code 16570	Fundraiser Mailing
Siskis of St Joes of NWPA	Date [MM/DD/YY(Y) \$ /00.00
House # 425 Street Address West 18th St	Description of Expenditure
City ERIC State PA Code 16502	Event tickets
	and the same in the same in the same and the same in the same in the same in the same <u>and</u> are the same <u>and the same in the same index in the same i</u>
Tames De Palma	Date [MM/DD/YYYY] 5 72-46
House # 537 Street Address Shenkley Dr.	ADERGA (MINITADE) ANAMA ANAMA ANAMA
House # 537 Street Address Shenkly Dr. City Eple State PA Code 16505	Date [MM/00/YYYY] \$ 72-46
James De Palma House # 537 Street Address Shenkly Dn City Eple State DA Code 16505 To Whom Paid	Date [MM/DD/YYYY] 5 72-46 Description of Expenditure
James De Palma House # 537 Street Address Shen bey Dn City Eple State PA Code 16505 To Whom Paid EAIR Elks Lodge House # 2409 Street Address Peninsula Pr	Date [MM/DD/YYYY] \$ 72-46 Description of Expenditure Supplies Date [MM/DD/YYYN] \$ 5
James De Palma House # 537 Street Address Shenkey Dn City Eple State PA Code 16505 To Whom Paid EAIR Elks Lodge House # 2409 Street Address Peninsula Pr City Eple State PA Code 16506	Date [MM/DD/YYYY] \$ 72-46 Description of Expenditure Supplies Date [MM/DD/YYYY] \$ 353.60 Description of Expenditure Fund raisen Refreshments
House # 537 Street Address Shenkey Dr. City Erle State PA Zip Eode 16505 Fo Whom Paid Elks Lodge House # 2409 Street Address Peninsula Pr City Erle State PA Zip Code 16506 Fo Whom Paid Moree Advertising	Date [MM/DD/YYYY] \$ 72-46 Description of Expenditure Supplies Date [MM/DD/YYYY] \$ 353.60 Description of Expenditure Fund raisen Refreshments Date [MM/DD/YYYY] \$ 3241.00
House # 537 Street Address Shenkey Dr. City Eple State DA Zip Code 16505 To Whom Paid EAIR Elks Lodge House # 2409 Street Address Peninsula Pr City Eple State DA Zip Code 16506 To Whom Paid Moree Advertising House # 5159 Street Address Merilee Dr	Date [MM/DD/YYYY] \$ 72-46 Description of Expenditure Supplies Date [MM/DD/YYYY] \$ 353.60 Description of Expenditure Fundraiser Refreshments Date [MM/DD/YYYY] \$
House # 537 Street Address Shenkly Dn City Erle State PA Zip Code 16505 To Whom Paid Elks Lodge House # 2409 Street Address Peninsula Pr City Erle State PA Zip Code 16506 To Whom Paid Morel Advertising House # 5159 Street Address Merilee Dr City Erle State PA Zip Code 16506 City Erle Street Address Merilee Dr City Erle State PA Zip Gode 16506	Date [MM/DD/YYYY] \$ 72-46 Description of Expenditure Supplies Date [MM/DD/YYYY] \$ 353.60 Description of Expenditure Fund raiser Retreshments Date [MM/DD/YYYY] \$ 3241.00 Description of Expenditure
House # 537 Street Address Shen bey Dr. City Eple State DA Code 16505 To Whom Paid EAIR Elks Lodge House # 2409 Street Address Peninsula Pr City Eple State DA Zip Code 16506 To Whom Paid Morel Advertising House # 5159 Street Address Merilee Dr City Eple State DA Zip Code 16506 To Whom Paid Printing Concepts	Date [MM/DD/YYYY] \$ 72-46 Description of Expenditure Supplies Date [MM/DD/YYYY] \$ 353.60 Description of Expenditure Fund Caiver Refreshments Date [MM/DD/YYYY] \$ 3241.00 Description of Expenditure Tund Caiver Refreshments Bate [MM/DD/YYYY] \$ 3241.00 Description of Expenditure
House # 537 Street Address Shenkly Dr. City Erle State PA Zip Code 16505 To Whom Paid Elks Lodge House # 2409 Street Address Peninsula Pr City Erle State PA Zip Code 16506 To Whom Paid Morel Advertising House # 5159 Street Address Merilee Dr City Erle State PA Zip Code 16506 To Whom Paid Morel Advertising House # 5159 Street Address Merilee Dr City Erle State PA Zip Gode 16506 To Whom Paid Only Code 16506	Date [MM/DD/YYYY] \$ 72-46 Description of Expenditure Supplies Date [MM/DD/YYYY] \$ 353.60 Description of Expenditure Fund Caiver Refreshments Date [MM/DD/YYYY] \$ 3241.00 Description of Expenditure

Statement of Expenditures

Filer Identification Number:	Sinnot	Joseph	Com to	Elect	

To Whom Paid O	Date [MM/DD/YYYY] \$
Room 33	5/20/19 775.84
House# 1033 Street Address State St	Description of Expenditure
City ER18 State PA Zip Code 16501	Fundraisen Food
To Whom Paid	Date [MM/DD/YYYY] \$
Moree Advertising House # Street Address NA 1/ D	5/3//9 2000.00 Description of Expenditure
5159 Merilee Dr	Description of expenditure
City ERIC State PA Zip Code 16506	TV Production
First National Bank	Date [MM/DD/YYYY] \$ 25-00
House # One Street Address North Shore Confin	Description of Expenditure
City Piterburgh State PA Zip. 15212	Bank Serv Charge
Towns Paid James De Palma	Date [MM/DD/YYYY] \$ 38-14
House# 527 Street Address Chamber Do	Description of Expenditure
City 5 State 04 Zip	
ERIE, STATE PA Gode 16505	
To Whom Paid	Date [MM/DD/YYYY] \$
House # Street Address	Description of Expenditure
City State Zip Code	nement in the control of the control
To Whom Paid	Date [MM/DD/YYYY] \$
House# Street Address	Description of Expenditure
City State Zip Gode	
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 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.

Filer Identification Number:	C. 11	7,	F ^	r		
	Dinnott	Jacenh 1	- / am	+	6 lect	
	0:11110 10	1703 (PA	$\subseteq \omega_{\mathcal{M}}$	10	C_1, C_1	_

Name of Creditor	Joseph	ESIMOH		Outstanding Balance of Debt
Hause # Str	Joseph reet Address Wes	+ 40th St	DATE DEBT INCURRED [MM/DD/YYYY] 5/4/19	\$ 3000. <u>00</u>
Gity Company of the second second Second second sec	ERIE	State	PA Code 16509)
Description of Debt	Loan to	Campaign	The second secon	\$3000A50
Name of Creditor				Outstanding Balance of Debt
House # Str	eet Address		DATE DEBT INCURRED [MM/DD/YYYY]	
City Control of the Control		State	Zip Code	
Description of Debt		Lager Lade Control Control	ri Principal sunta	· 自然处理公司
Name of Creditor				Outstanding Balance of Debt
House# Str.	eet Address		DATE DEBT INCURRED [MM/DD/YYYY]	- <u> </u>
City no the property of the control		State	Zip Code	
Description of Debt		- Expression such	Harrison Control of the Control of t	B13302005M
Name of Creditor				Outstanding Balance of Debt
11 (15 (15 (15 (15 (15 (15 (15 (15 (15 (eet Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	Marie Despera
Description of Debt				
Name of Creditor				Outstanding Balance of Debt
Parameter sizes.	eet Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City common the common services		State.	Zip Code	
Description of Debt				
Name of Greditor				Outstanding Balance of Debt
House# Stre	et Address		DATE DEBT INCURRED [MM/DD/YYYY]	•
City Joseph Company of the Company		State	Zíp Code	
Description of Debt				.