



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	86-1982577	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	COMMITTEE TO ELECT CHRIS CAMPANELLI								
Street Address	946 W 36TH STREET								
City	ERIE	State	PA	Zip Code	16508				

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)		Year	2021	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	10/19/2021	11/22/2021	
A. Amount Brought Forward From Last Report	\$	17,878.26	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	3,195.00	
C. Total Funds Available (Sum of Lines A and B)	\$	21,073.26	
D. Total Expenditures (From Schedule III)	\$	17,879.95	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	3,193.31	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	4,722.26	

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

_____ day of _____ 20____

SignatureMy Commission expires _____
MO. DAY YR.Signature of Person Submitting report
GORDON ROBERT IMBODEN

Printed Name

814

Area Code

453-7731

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

_____ day of _____ 20____

SignatureMy Commission expires _____
MO. DAY YR.Signature of Candidate
CHRIS D CAMPANELLI

Printed Name

814

Area Code

434-9573

Daytime Telephone Number

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	86-1982577		
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period		(1)	\$ 45.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	0.00
All Other Contributions (Part B)		\$	650.00
Total for the reporting period		(2)	\$ 650.00
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	1,500.00
All Other Contributions (Part D)		\$	1,000.00
Total for the reporting period		(3)	\$ 2,500.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
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>		\$	3,195.00

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:	86-1982577
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Full Name of Contributor		Timothy George		Date [MM/DD/YYYY]	11/01/2021	\$	250.00
House #	1489	Street Address	Elleway Ct.	Date [MM/DD/YYYY]		\$	
City	Fairview	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	
Full Name of Contributor		Richard Vicary		Date [MM/DD/YYYY]	10/22/2021	\$	200.00
House #	1652	Street Address	W. 8th Street	Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	
Full Name of Contributor		Gary Boldt		Date [MM/DD/YYYY]	10/20/2021	\$	100.00
House #	3600	Street Address	Tanager Drive	Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	
Full Name of Contributor		Bruce Sandmeyer		Date [MM/DD/YYYY]	10/19/2021	\$	100.00
House #	1001	Street Address	State Street	Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16501	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]	

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.

Filer Identification Number:	96-1982577
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Full Name of Contributing Committee		Date [MM/DD/YYYY]			
AFSCME Council #13		10/25/2021			1,580.00
House #	431	Street Address	Executive Park Dr.	Date [MM/DD/YYYY]	
City	Harrisburg	State	PA	Date [MM/DD/YYYY]	
		Zip Code	17111		
Full Name of Contributing Committee		Date [MM/DD/YYYY]			
House #		Street Address		Date [MM/DD/YYYY]	
City		State		Date [MM/DD/YYYY]	
		Zip Code			
Full Name of Contributing Committee		Date [MM/DD/YYYY]			
House #		Street Address		Date [MM/DD/YYYY]	
City		State		Date [MM/DD/YYYY]	
		Zip Code			
Full Name of Contributing Committee		Date [MM/DD/YYYY]			
House #		Street Address		Date [MM/DD/YYYY]	
City		State		Date [MM/DD/YYYY]	
		Zip Code			
Full Name of Contributing Committee		Date [MM/DD/YYYY]			
House #		Street Address		Date [MM/DD/YYYY]	
City		State		Date [MM/DD/YYYY]	
		Zip Code			
Full Name of Contributing Committee		Date [MM/DD/YYYY]			
House #		Street Address		Date [MM/DD/YYYY]	
City		State		Date [MM/DD/YYYY]	
		Zip Code			
Full Name of Contributing Committee		Date [MM/DD/YYYY]			
House #		Street Address		Date [MM/DD/YYYY]	
City		State		Date [MM/DD/YYYY]	
		Zip Code			

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 Identification Number:	86-1982577
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Full Name of Contributor					Date [MM/DD/YYYY]		\$	
Chris Campanelli					10/22/2021		\$	1,000.00
House #	Street Address				Date [MM/DD/YYYY]		\$	
946	W. 36 th ST.						\$	
City	State		Zip Code		Date [MM/DD/YYYY]		\$	
ERIE	PA		16508				\$	
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
							\$	
House #	Street Address				Date [MM/DD/YYYY]		\$	
							\$	
City	State		Zip Code		Date [MM/DD/YYYY]		\$	
							\$	
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
							\$	
House #	Street Address				Date [MM/DD/YYYY]		\$	
							\$	
City	State		Zip Code		Date [MM/DD/YYYY]		\$	
							\$	
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
							\$	
House #	Street Address				Date [MM/DD/YYYY]		\$	
							\$	
City	State		Zip Code		Date [MM/DD/YYYY]		\$	
							\$	
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business								

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	86-1982577
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To Whom Paid	GIANT EAGLE				Date [MM/DD/YYYY]	11/22/2021	\$	57.84
House #	2501	Street Address	W. 1212 ST.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16505	Paper supplies		
To Whom Paid	BIRDSACK Printing				Date [MM/DD/YYYY]	10/22/2021	\$	1,422.40
House #	1919	Street Address	PEACH ST.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16502	Post cards		
To Whom Paid	CALAMARIS				Date [MM/DD/YYYY]	11/02/2021	\$	653.79
House #	1313	Street Address	HARPER DR.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16505	Election night PARTY		
To Whom Paid	WJET				Date [MM/DD/YYYY]	10/24/2021	\$	5,474.00
House #	8455	Street Address	PEACH ST.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16509	Advertising		
To Whom Paid	WICW				Date [MM/DD/YYYY]	10/27/2021	\$	6566.25
House #	3415	Street Address	STATE ST.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16508	Advertising		
To Whom Paid	BIRDSACK Printing				Date [MM/DD/YYYY]	10/19/2021	\$	190.80
House #	1919	Street Address	PEACH ST.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16502	Thank you notes		
To Whom Paid	WFXP				Date [MM/DD/YYYY]	10/27/2021	\$	629.10
House #	8455	Street Address	PEACH ST.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16505	Advertising		
To Whom Paid	WSEE				Date [MM/DD/YYYY]	10/20/2021	\$	1,508.75
House #	3514	Street Address	STATE ST.		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16505	Advertising		

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	86-1982577
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To Whom Paid		CRIME VICTIM CENTER			Date [MM/DD/YYYY]	11/02/2021	\$	250.00
House #	125	Street Address	W. 18th ST		Description of Expenditure			
City	ERIE	State	PA	Zip Code	16507	Charity Event		
To Whom Paid		SPECTRUM HEALTH			Date [MM/DD/YYYY]	11/01/2021	\$	1,015.95
House #	1001	Street Address	MORRIS HEAD SQUARE		Description of Expenditure			
City	CHARLOTTE	State	NC	Zip Code	28203	Advertising		
To Whom Paid		miscellaneous fees			Date [MM/DD/YYYY]	VARIOUS	\$	111.17
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				
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:	86-1982577
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Name of Creditor		CHRIS CAMPANELLI					Outstanding Balance of Debt	
House #	946	Street Address	W 36TH STREET		DATE DEBT INCURRED [MM/DD/YYYY]		\$	2,500.00
				05/10/2021				
City	ERIE	State	PA	Zip Code	16508			
Description of Debt		LOAN						
Name of Creditor		CHRIS CAMPANELLI					Outstanding Balance of Debt	
House #	946	Street Address	W 36TH STREET		DATE DEBT INCURRED [MM/DD/YYYY]		\$	250.00
				05/19/2021				
City	ERIE	State	PA	Zip Code	16508			
Description of Debt		LOAN						
Name of Creditor		MICHELE FARRELL					Outstanding Balance of Debt	
House #	608	Street Address	BEVERLY DRIVE		DATE DEBT INCURRED [MM/DD/YYYY]		\$	150.00
				05/17/2021				
City	ERIE	State	PA	Zip Code	16505			
Description of Debt		LOAN						
Name of Creditor		RODELL ASHBY					Outstanding Balance of Debt	
House #	527	Street Address	VERMONT AVENUE		DATE DEBT INCURRED [MM/DD/YYYY]		\$	150.00
				05/17/2021				
City	ERIE	State	PA	Zip Code	16505			
Description of Debt		LOAN						
Name of Creditor		DAVID ASHBY					Outstanding Balance of Debt	
House #	527	Street Address	VERMONT AVENUE		DATE DEBT INCURRED [MM/DD/YYYY]		\$	150.00
				05/17/2021				
City	ERIE	State	PA	Zip Code	16505			
Description of Debt		LOAN						
Name of Creditor		MICHELE FARRELL					Outstanding Balance of Debt	
House #	608	Street Address	BEVERLY DRIVE		DATE DEBT INCURRED [MM/DD/YYYY]		\$	522.26
				05/18/2021				
City	ERIE	State	PA	Zip Code	16505			
Description of Debt		CALAMARIS INVOICE FOR ELECTION NIGHT						

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:	86-1982577
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Name of Creditor		CHRIS CAMPANELLI				Outstanding Balance of Debt	
House #	946	Street Address	W 36TH STREET		DATE DEBT INCURRED [MM/DD/YYYY]		\$ 1,000.00
				10/22/2021			
City	ERIE	State	PA	Zip Code	16508		
Description of Debt		LOAN					

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

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

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

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

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



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement

210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

DECL-2 01/24/21

Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports. This form must be signed by hand where a signature is required.**

Name of Filing Committee, Candidate, or Lobbyist				
COMMITTEE TO ELECT CHRIS CAMPANELLI				
Reporting Cycle Name				
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 4 6 th Tuesday Pre-Election	<input type="checkbox"/> Cycle 5 2 nd Friday Pre-Election
<input checked="" type="checkbox"/> Cycle 6 30 Day Post-Election	<input type="checkbox"/> Cycle 7 Annual Report	<input type="checkbox"/> Cycle 8 2 nd Friday Pre-Special Election		<input type="checkbox"/> Cycle 9 30 Day Post-Special Election

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Gordon Robert Imboden
Signature of Treasurer/Candidate, or Lobbyist

11/30/2021
Date (DD/MM/YYYY)

Gordon Robert Imboden
Printed Name

Erie, PA USA
Location (City/State/Country)



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement

210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

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Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

Signature of Treasurer, Candidate, or Lobbyist

12/2/21

Date (DD/MM/YYYY)

CHRIS D. CAMPANELLI

Printed Name

ERIE, PA.

Location (City/State/Country)