Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible. It should be typed)

Number		3-3784591	Repor (Mari	TiFiled By	Candid	late	It should be	nittee		Lobbyist
Name of Filing Commi Lobbyist	ittee, Ca	indidate or		s of Jennifer	 Dennehv					
Street Address			PO Box							
Otty	Erie		1000	× 703 ————						
					State	PA	Zip Co	de 165	12	
Type of Peport (Place x	unaer r	eport type)								
1-6 th Tuesday 2-2 nd Pre-Primary Pre-Pr	Friday imary	3- 30 Day Posi Primary	Pre-Be		nd Friday - Bection	6-30 Day Election	Post 7- Ann		dal 2 nd Frida Bection	y Special 30 Day Post-Bection
] [X				=	
Date Of Election (MM/DD/YYYY)		11/05/2019	Year		<u> </u>	Amendme Report	ent	Tern	nination	
Summary of Receipts ar Expenditures	nd	From Date	T	o Date	1.00				<u> </u>	
		6/20/19		10/25/20	10			For Office	use Only	
Amount Brought For	vard Fro	om Last Report	\$ \$						un 7 kilaliyan <u>— 1866</u> ya	
Total Monetary Contr	ibution	sand Receipte	\$	469.00 ————)					
rom Schedule I) Total Funds Avallable	A Section		\ \	325.00					-#	
Dum of Lines A and B) Total Expenditures			\$	794.00					$\frac{\hat{S}}{\hat{S}}$	
rom Schedule III)			\$	416.49					50	
- 20 (4) (2) (2) (3) (4) (4) (4) (4) (5) (5) (5) (5) (6) (7)		and the first and the first terms of the first of	[110.73	-				4 11-4	
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Ending Cash Balance Libtract Line D from Lin Value of In-Kind Contri	e C) butions	Received		377.51				(\$7. #
Ending Cash Balance Libtract Line D from Lin Value of In-Kind Contri rom Schedule II)	butions		\$					Ç	y	\$10. # 15.
Ending Cash Balance Libtract Line D from Lin Value of In-Kind Contri- rom Schedule II) Unpaid Debts and Ohii	butions			377.51 2500.00				(
Ending Cash Balance tubtract Line D from Line Value of In-Kind Contri- rom Schedule II) Unpaid Debts and Obli- om Schedule IV)	butions gations		\$	377.51 2500.00 0.00		· · · · · · · · · · · · · · · · · · ·				
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SCHEDULEI Contributions and Receipts

Detailed Summary Page

83-3784591		
1.Unitemized Contributions and Receipts \$50.00 or Less per Contributor		
Total for the reporting period (1)	\$	25.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	1 23.55 23.51	
Contributions Received from Political Committees (Part A)	\$	0.00
All Other Contributions (Part B)	\$	0.00
Total for the reporting period (2)	\$	0.00
3. Contributions Over \$250.00 (From Part Cand Part D)	4.5	
Contributions Received from Political Committees (Part C)	\$	
All Other Contributions (Part D)	\$	300.00
Total for the reporting period (3)	\$	300.00
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 (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)	\$	325.00

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00 Use this Part to itemize only contributions received from Political Committees with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Her identification	83-37	'84591			
					Amount
Full Name of Co Committee	ntributing			Date [MM/DD/YYYY]	\$
Committee					
House #	Street Addres	\$	· · · · · · · · · · · · · · · · · · ·	Date [MM/DD/YYYY]	\$
		** **			
aty	<u> </u>	State	Zip Code	Date [MM/DD/YYYY]	
Full Name of Co	ntributing			Date [MM/DD/YYYY]	\$
Committee					
House #	Street Addres	<u>d</u>		Date [MM/DD/YYYY]	<u> </u>
]		Date [MM/ DDI TTTT]	∕Φ ∴:.
City	August 1	State	7m Ondo		7.7 P
		date	Zip Code	Date [MM/DD/YYYY]	(\$)
Full Name of Cor	tributing	EL SHOW		Data TARRES (DD) 10000	
Committee				Date [MM/DD/YYYY]	(\$ (
House#	Oter A A Value		<u> </u>		
nouse#	Street Address			Date [MM/DD/YYYY]	\$
City	4	State	Zip Code	Date [MM/DD/YYYY]	\$
MADE PAR				·	
Full Name of Cor Committee	tributing	1		Date [MM/DD/YYYY]	\$
House#	Street Address			Date [MM/DD/YYYY]	\$
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1 (1) 12 (1) 3 (1) (2) (1)					
Full Name of Con	tributing	<u> </u>		Date [MM/DD/YYYY]	· (h
Committee	경기 기계 경 (1) 경기 기계			Date IMIM DLF TTTT	\$
House #	Origina annual d		<u></u>	Part Preserve (a case)	4.4 19.4
* KOUSL #	Street Address			Date [MM/DD/YYYY]	\$
1000					
City		State	Zip Code	Date [MM/DD/YYYY]	\$.
	- AE	Service Control			(<u>)</u>
Full Name of Con Committee	ributing			Date [MM/DD/YYYY]	\$
House#	Street Address			Date [MM/DD/YYYY]	\$
City	tera entreja in a salverajena	State	Zip Code	Date [MM/DD/YYYY]	\$
1694 1.1 Fledika		100		 (a) (a) (a) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	
un der de Grande Bright Gerige					MA

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.)

Committee of the state of the s			
Filer (dentification Nilmber)			
Filer identification Number:			
83-3784591			
Filer Identification Number: 83-3784591			

Full Name of Contributor			Date [MM/De/Y/YY]	\$
House # Sireel Address			Pate (VIMADDAYAA)	\$
Constant				
Gty,	State	Zip Code	Date [MM/DD/YYYY]	\$ (
Full Name of Contributor			Date (MM/DD/YYYY)	.\$
#House # Street Address			Date IMM/DD/XY/YY), (*) (S)
Street Addies				
QIVI	State	Zp ©ode //::	Date MM/DD/YYYY	
Füll Name of Contributor			Pate [MIM/DD/YYYY)	\$
House # Street Address			Date MM/DD/Y/Y/	S
a		10		
GHy.	State	Zip Gode	Date [MM/DD/XYYY]	\$
Full Name of Contributor:			Date [MM/DD/YYYY]	\$
House# Street Address			Date MW/DB/YYYY	S
ne en e				
©iy, a	Sate	Zip Code	Pate MM/ DD/ YYYM	\$
Kull: Name: of: Contribution			Date:[MM/DD/YXXX]	\$
#Kouse# Street/Address			Date [MIM/DD/XYXXX]	\$
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Gly (State	Zip Code	Date MM/DD/YYYY	S
Rull:Name of Contributor:			Date [MM/DD/YXXX]	Si.
HOUSE# Street Address			.(Date∖iM:M/JDD/YYYY)	\$6 \$6
GTV, 3	State	Zp.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.

Fleridentifica	ation Number: 83-3784591				
Full Name of Contributing	g Committee			Date [MM/DD/YYYY] S	
House#	Street Address	romonica and		Date [MM/DD/YYYY] \$	
Gly,	HER INCLUSION SERVICES	Sate	Z p Coole	Date [MM/DD/YYYY] \$	
Full Name of Contributing	g:Committee			Date [MM/DD/YYYY] \$	
House#	Street Address	Sale	150mm (470mm) (47050)	Date [MM/DD/YYYY] \$	
City Full Name of		Sale 1997	Zp∕‱e.	Date [MM/DD/YYY] \$	
Contributing House#		<u> </u>		Date MM/DD/YYYY) \$	
Gity.		State	Zp Code	Date [MM//DD/YYYM] . S	
Full Name of Contributing				Pate [MM//DD/YYYY] \$	
.House#	Street Address			Date [MM/DD/YYYY] \$	
Gty,		Sale	Zip Code	Date [MM/DO/YYYM] S:	
Full Name of Contributing (Committee .	Deville mass.		Date MW/DD/YYYY/	_
#house#	Sireet Address	· · · · · · · · · · · · · · · · · · ·	Part compact of resources	Date [MM//DD/YYYY] \$	
Ohy Full Name of	23.02.02.02.02.0	Sale	Zip Code	Date [MM/DD/YYYY] \$	
Contributing (Committee: Sireet Address			Date (MW/DD/YYYY) - \$5	
Oly 24		Sate	Zip Coole	Date MM/DD/YYYY) \$	
		888 988 888 E		STATE OF THE PROPERTY OF THE P	F

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)

34591	-	

Full Name of Contributor	Frank Tursi		Date [MM/DD/YYYY] \$. 10/7/19	300.00
House # Sirce	ef: Address		Date [MW/DD/YYYY] \$	All the second s
Cty	Sale	Zip@ode	Date [MM/ DD/ YYYY] \$	
Employer Name	33.33.200		Occupation Doctor	
Employer Mailing Address/ Principal Place of Business				·
Full Name of Contributor			Date [MM/DD/YYYY] \$	
n n e en e	et Address		Date [MM/DD/YYYY] \$	
(G ty **	Safe	Zip Code	Date [MM/DD/YYYY] S	
Employer Name	9740544 (A)	<u> </u>	Occupation (
Employer/Malling/Address/ Principal Place of Eusiness			- 4	
Full Name of Contributors			Date [MIM/DD/YYYY] \$	
	A Address		Date [MM/DD/YYYY] \$	
Oty, 4.	Sate	Zip.Code	Date [MM//DD/ YYYY]	
Employer Name			Occupation	
Employer Mailing Address/ Principal Place of Business				
Full Name of Contributor			Date [MM/DD/YYYY] \$1	
	t:Address		Date [MM/ DD/ YYYY]	
GIV	Sate.	Zip Code	Date:[MM//DD/YYYY] S.	
Employer Name Employer Mailing Address/ Principal Place of Business			Occupation	

PARTE

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:	83-3784591			
Full Name House# Sire Gty Receipt Description	et Address	State	Zip Code	Date [MM/DD/YYYY]
Full Name	et Address	Sate	Zp Code:	Date [MM/DEVYYYY] /\$
Full Name: 4-4 1-3-3 (cylindar)	et Address	Sate	Zip Code	Date [MM/DD/YYYY] \$
Full Name	et Address	Sale	Z/p Code	Date MM/DD/YYYY] \$
Full Name House # Since GiV Peccipt Description	et Address	State	Zip) Code	Date [MM/DD/YYYY]
Full Name Street Street	et Actidress	Sate	Zip Code	Date [Min//DD/XYYY] \$

SCHEDULEII

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number 8	3-3784591			
BE ENTERPORTED TO THE PROPERTY OF THE PROPERTY			NAME OF THE PARTY	CHAPTER STATE OF THE STATE OF T
	ONTRIBUTIONS RECEIVED VALL	UE OF \$50 000 OF (IESS PER	KOSNIKABUTUR	
TOTAL for the reporting period	(1)	\$		
BECKER OF THE STATE OF THE STAT	· · · · · · · · · · · · · · · · · · ·			
2. IN-KIND CONTRIBUTIO	NS RECEIVED VALUE OF \$50:01.	II@\$250.00 (FFOM PART)		
TOTAL for the reporting period	(2)	\$		
KAPARITANI PARAMETER AND SELECTION OF THE SECOND SE			S. Jerres C.A. H. CZERJA, A. Varon, and in	
6.4 INAMINDICON RIBUTIO	NECEVED VALUE (VERS250)	JOHE OM PARILIG		Projection (Control of Control of
TOTAL for the reporting period	(3)	\$		
TOTAL VALUE OF IN-KIND CONTR PERIOD (Add and enter amount to				
on Page 1, Report Cover Page, Ite	m F)			

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Rier identification Number: 83-3784591		

Rill Name of Contrib	ution			Date [MM/DD/YYYY] \$	
House#	Street Address			Date [MM/DDX-YYYY] \$	
COLV	Production recognition to a description	S ate	Zp:Code	Date [MM/DD/YYYY]	
Description of Contril	pution				
Full Name of Contrib	Litor			Date MM/DD/YYYM] \$	
House#	Street Address			Date [MM/ DD/ YYYY] \$	25 April 1985
Giv	A Section Control of the Control of	State	Zip.Code	Date [MM/DD/YYYY] \$	
Description of Contrib	oution	25-25-25-25-21	The state of the s	Designer	<u> </u>
Hull Name of Contribu		ł-	·	Date:[IVIM//De/ YYYY] \$	
House#	Sircet Address			Date [MM/DD/YYYY] \$	
GtV/		Sale	Zip Coole,	Date [MM/DD/YYYY], \$	
Description of Combile					
Hull Name of Contribu				Date [MM/DB/YYYY]	
House #	Sireet Address			Date [MM/DD/YYYY] \$	
Oty/		State	Zip:Gode	Pate [MM//DD/YYYY] \$	
Full Name of Contribu				Date [MM/DD/YYYY] S	
	Street Address			Date [MM/DD/YYYY] \$	
GIV.		State	Zp.Code	Date [MM/DD/YYYY] \$	
Description of Contrib	חסותש				

SCHEDULE II Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number: 83-3784591				
00 0704504	i.			
83-3/84591				
 Starting and descriptions. A start of the district. 				
A CONTRACTOR OF STREET AND A ST				

Full Name of Contributor R Frank Media		Date [MM/DD/YYYY] \$ 10/21/2019 2500.00
46.0	Street	Date [MM/DD/YYYY] \$
Cly : Erie	State Zp Code	Date (MM/(DD/)YYYY) \$
Employer/Name	R Frank Media	Cocupation Photographer and Videographer
Briployer Mailing Address / Principal Place of Business	1940 West 8th Street, Erie, PA	Description of Contribution Donated the creation of a video
, Full Name of Contribution		Date IMM/DD/YYYYI \$
House # Street: Address		Date [MM/DD/YYYY] \$
Gly	State Zp Code	Date [MM/DD/YYYY] S
Employer Name Employer Mailing Address // Principal		Coupation Description
Frace of Business		of Contribution
Rulli Name of Contributor		Date [MM/DD/YYYY] \$
House # Street Address		Date [MM/DD/YYYY] \$
. Gity	State Zip Code	Date [MM/DD/YYYY]
Employer Name Employer Mailing Additess / Principal	,	Occupation:
Race of Business		Desgription Of: Combibution
Full Name of Contributor.		Date [MM/DD/YYYY] \$
House # Sireet Address		Date:[MM/DD/YYYY] S
(6) V	State Zip Code	Date:[M·M/DD/YYYYY] \$
Employer:Name Employer:Mailing/Address/:Pilingpal		Occupation.
Hippoyeriuming Address/: Frind pall Hippoyeriuming Address/: Frind pall		Description: of: Contribution:

SCHEDULEIII Statement of Expenditures

Filer Identification Number: 83-3784591

To Whom Paid County of Erie			Date [MM//Db/ YYYY] 5/13/19	35.00
##6use# Street Address			Description of Expenditu	e ·
<u>σιγ</u>	State	Zp		
		Code		
To Whom Paid County of Erie			Date [MM/ DD/ YYYY] S 5/13/19	20.00
House # Street Address			Description of Expenditur	ĕ [
Gity	State	Zp Cose		
To:Whom Paid County of Erie			Date MM/DD/YYYY	80.00
A Committee of the Comm			6/24/19	
			Description of Expenditur	
Œby.*	Sate	Z p Cocle		
To)Whomi Raid Leadhead Creative			Date [MM//DD//YYYY]	87.50
House# 2605 Street Address P	each street		Description of Expenditure)
City Erie	State PA	2 19 16508	Printing logo onto upcycled t	-shirts
ToWhom Paid	的复数表现		Date [MM//DD/YYY] : \$	
Post Net			9/20/19	28.62
	est 26th street, Suite 4		Description of Expenditure	ing all the graph of the second secon
City Erie	State PA	Z io 16506	Creation of stamp with logo	,
To Whom Paid Monkey Business			Pate [MIM//DDY/YYYY] \$ 9/20/19	23.29
House# 3256 Street Address W	est 26th		Description of Expenditure	
GIV Erie	Saile PA	Zip	Stamp ink Pads	
To/Whom Paid Erie County Democ	ratic Party		Date [MM//DD/YYYY] \$	40.00
House # Street Ackiness		****	Description of Expenditure	6. <u>.</u>
=GW	State	Zip Code	Attend the Democratic Dinne	r
Fo.Whom:Paid Value Home Center	s		Date (M.W./DD/YYYY) S 10/07/19	20.46
House # 2147 Street Address W	/est 12th		Description of Expenditure	
Civ Erie	State PA	Zip Code 16505	spray paint to upcycle old sig	ns

SCHEDULEIII Statement of Expenditures

			 	4
Filer Identification Number: 83-378	4591			

To:Whom Paid	Value Home Centers	Date [MM/ DD/ YYYY] S 70.97
House# 0147	Sireet Address West 19th Street	Description of Expenditure
2147	West 12th Olloot	
Gf y Erie	State PA Zp 16505	spray paint to upcycle old signs
To Whom Paid.	PPG Paints	Pate [MM//DD/\YYYY] \$ 10.65
House # 839	Street Address Pittsburgh Ave	Description of Expenditure
Gity Erie	State PA Zp 16505	spray paint to upcycle old signs
Tó Whom Paid		Date [MM/DD/YYYY] S
	Street Address	Description of Expenditure
Gity.	Sate Zp Code	
TóWhom Paid		#Date (MM/ADDVAYYYY) * SI
House#	Street Address	Description of Expenditure
City	State Zip.	
To Whom Paid		Date [MM/DD/YYYYY] \$
Нац е́ #	Street Address	Description of Expenditure
GiV	State Zip Code	
-To Whom Paid		· Date [MM//DD/YYYY] 🤝 \$
House #	Street Address	Description of Expenditure
(City)	Sate Zp Code	
To Whom Paid		Date [MM/:DD/YYYY] \$:
House #	Street Address	Description of Expenditure
G ty	Sate Zp Code	
To Whelm Paid		·Date [MM//DD/YYYY] ;
Hőüse#	Street Address	Description of Expenditure
Chys	State Zip. Code	

SCHEDULEIV

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 Ide	entification Number	83-3784591			e e e e e e e e e e e e e e e e e e e
Name	of:Oreditor.				Outstanding Balance of Debt
House /	Asia contract	reet Address		DATE DEST INCURRED	\$
aw			H. C.		
City Descrip	otion of Debt		Sale	Zip Code	No.
Name o	of Creditor # Sin	rect Address		Mario aeiginin e e e e e e e e e e e e e e e e e e	Outstanding Balance of Debt
				[MM/ÞD/YYYY]	
O ty		The state of the s	Sate	Zjp. Code	
Descrip	otion of Debt	\$2 	T. RECORDS operation .	Grand Affin Agency (March 1994)	
Name o	i Greditor .		-		Outstanding Balance of Debt
House#	S	eet Address		DATEDESTINGURBED [MM/DD/YYYY]	[S]
CH y				Access Supplied to System (Conference of Supplied Supplie	
499	tion of Debt		Sate	Øode Øode	
	Monsol Deor				Outstanding Balance of Debt
House #		eet Address		DATE DEBI INQUERED	SS.
Oty.			Sate	Zip Code	
	tion of Debt				
(Nameio)(Creditor				Quistanding Balance of Debt
House#		eet Address		DATE DEST INCURRED [MIV/DD/YYYY]	
aty			Sate	Zip	
Descript	lion of Debt			Gode	
Name o	f Greditor	8			Outstanding Balance of Debit
House#	She	eef Address		DATE DEST INCURRED	*** ***
	600		To community upper particular	4 C. (1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 - 1975 -	
Øly,			Sate	Zip i©ode	
Descript	tion of Debt				