

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	Report Filed By Candidate Committee Lobbyist (Mark X)	
Name of Filing Committee, Candidate or Lobbyist	FRIENDS OF JOHN GROH	
Street Address	603 MONTPELIER AVE	
ERIE	State PA Zip Code 16505	
Type of Report (Place x under report type)		Nation 1
1-6 th Tuesday 2-2 nd Friday 3-30 Day Post Pre-Primary Pre-Primary Primary	t 4-6 th Tuesday 5-2 nd Friday 6-30 Day Post 7- Annual Special 2 nd Friday Special 30 Pre-Election Pre-Election Election Pre-Election Pre-Election Post-Election	10.00
Date Of Election // 5	Year Amendment Termination Report	
Summary of Receipts and From Date	To Date For Office Use Only	
Expenditures OLIIO 120	019 10/21/2019	
A. Amount Brought Forward From Last Repor		
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 5 10 2 90 m	
C. Total Funds Available	\$ 1/ 620 50	
(Sum of Lines A and B) D. Total Expenditures	* 16830,50 * 3750 all	
(From Schedule III) E. Ending Cash Balance	\$ 12 00011	
(Subtract Line D from Line C)	17070,46	
F. Value of In-Kind Contributions Received (From Schedule II)		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	
Part 1. If this is a Committee report treasurer sign h	Affidavit Section here. If this is a Candidate report, candidate sign here.	
I swear (or affirm) that this report, including the atta	ached schedules on paper, is to the best of my knowledge and belief true, correct and complete.	
Sworn to and subscribed before me this 24_day of October 20 /9	Robert Umpleby	
CON SILVER TON	MMONWEALTH OF PENNSYLVANIA Signature of Rerson Submitting report	
Signature	Judith Zelina Notani Bushin	
My Commission expires / - //	Commission Expires Ion 43 000	
		····
Part II- If this is a report of a Candidate's Authorized I swear (or affirm) that to the best of my knowledge amended.	d Committee, candidate shall sign here. e and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.	.320) as
Sworn to and subscribed before me this		
l l	Off Grad	
Jesth Genber 20 19	Signature of Capdidate TOHN H GROH	
Signature	Printed Name	
My Commission expires / -//- 2/	Area Code Daytime Telephone Number	
MO. DAY YR.	COMMONWEALTH OF PENNSYLVANIA	
	Judith Zelina, Notary Bushi	
	My Commission Funt	
, s s s s s	MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES	

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number	FRIENDS	OF JOHN (GROH

1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		dhi.	
Total for the reporting period	(1)	\$	2305.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	200,00
All Other Contributions (Part B)		\$	2185,00
Total for the reporting period	(2)	\$	2385.00
3. Contributions Over \$250.00 (From Part Cand Part D)	i indirectivi		
Contributions Received from Political Committees (Part C)		\$	1500.00
All Other Contributions (Part D)		\$	4000.00
Total for the reporting period	(3)	\$	5500,00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E			
Total for the reporting period	(4)	\$	100.00
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, Re Cover Page, Item B)	port	\$	10,290.00

Statement of Expenditures

Filer Identification Number:	FR 18	ENDS OF	JOHN GRO	H

To Whom Paid	ERIE COUNTY DEMS	Date [MM/DB/YYYY] 6 100 00
House#	Street Address	Description of Expenditure
ERI	State P A Zip Code	
To Wnom Paid	AIRPORT BEER	06/26/2019 52.30
House #	Street Address 4850 WEST LAKE ROAD	Description of Expenditure
ERI ERI	E State PA Zip 16505	FUND RAISER
To Whom Paid	SAM'S CLUB	07/03/2019 85,16
House #	Street Address 7200 PEACH ST.	Description of Expenditure
~ \	E State PA Zip 16509	
To Whom Paid	CREATIVE IMPRINT	07/03/2019 236.10
House #	Street Address 2670 W. 11TH ST.	Description of Expenditure
ERIE	State PA Code 16505	
	_	
To Whom Paid	SAM'S CLUB	07/05/2019 \$ \$5#6
House #	Street Address 7200 PEACH ST.	
House#	Street Address 7200 PEACH ST,	07/05/2019 3555 Description of Expenditure 47, 40
House # City ER 1	Street Address 7200 PEACH ST, State PA Code 1650 9 GEMCITY DINOR	07/05/2019
House# City ERIS To Whom Paid House#	Street Address 7200 PEACH ST. State PA Zip Code 1650 9 GEM CITY DINOR Street Address 3545 WILZTH ST.	07/05/2019 3555 Description of Expenditure 47, 40
House # City E R 10 To Whom Paid House # City E R E	Street Address 7200 PEACH ST. State PA ZIP Code 1650 9 GEMCITY DINOR Street Address 3545 WILZTH ST. State PA ZIP Code 1650 5	Description of Expenditure 47, 40. Date [MM/DD/YYYY] \$ 530,00 Description of Expenditure
House# City ERIS To Whom Paid House# City ERIS To Whom Paid	Street Address 7200 PEACH ST. State PA Zip Code 1650 9 GEMCITY DINOR Street Address 3545 WILZTH ST. State PA Zip Code 1650 5 NOVA AURORA CLUB	Description of Expenditure 47, 40 Date [MM/DD/YYYY] \$ 530,00 Description of Expenditure Date [MM/DD/YYYY] \$ 530,00
House # City ER To Whom Paid House # City ER To Whom Paid	Street Address 7200 PEACH ST. State PA Zip Code 1650 9 GEM CITY DINOR Street Address 3545 WILLTH ST. State PA Zip Code 16505 NOVA AURORA CLUB Street Address 1518 WALNUT ST.	Description of Expenditure 47, 40. Date [MM/DD/YYYY] \$ 530,00 Description of Expenditure
House # City ERI To Whom Paid House # City ERI To Whom Paid House # City ERI City ERI	Street Address 7200 PEACH ST. State PA Zip Code 1650 9 GEMCITY DINOR Street Address 3545 WILZTH ST. State PA Zip Code 1650 5 NOVA AURORA CLUB	Description of Expenditure 47, 40 Date [MM/DD/YYYY] \$ 530,00 Description of Expenditure Date [MM/DD/YYYY] \$ 65,00 Description of Expenditure
House# City ERIS To Whom Paid House# City ERIS To Whom Paid House# City ERIS To Whom Paid	Street Address 7200 PEACH ST. State PA Zip Code 1650 9 GEM CITY DINOR Street Address 3545 WILZTHST. State PA Zip Code 1650 5 NOVA AURORA CLUB Street Address 1518 WALNUT ST. E State PA Zip Code 16502 MYAA	Date [MM/DD/YYYY] \$ 530,00 Date [MM/DD/YYYY] \$ 530,00 Description of Expenditure Date [MM/DD/YYYY] \$ 65.00 Description of Expenditure Date [MM/DD/YYYY] \$ 100.00
House # City ERI To Whom Paid House # City ERI To Whom Paid House # City ERI City ERI	Street Address 7200 PEACH ST. State PA Zip Code 1650 9 GEM CITY DINOR Street Address 3545 WILZTH ST. State PA Code 16505 NOVA AURORA CLUB Street Address 1518 WALNUT ST. E State PA Code 16502 MYAA Street Address 2614 COLONIAL AVE.	Date [MM/DD/YYYY] \$ 530,00 Date [MM/DD/YYYY] \$ 530,00 Description of Expenditure Date [MM/DD/YYYY] \$ 65.00 Description of Expenditure

Statement of Expenditures

Filer identification Numbers 4	
ETIZA TANNING AND	
Ellar Hantification three areas :	

TO Whom Paid THE	COMMUNITY CUP		Date [MM/DD/YYYY] \$ 07/29/2019	125,00
House # Street Addre	\$\$. 2		Description of Expenditure	endre de de la como de La como de la como de
	State Zip Code		DONATION	
To Whom Paid McD	OWELL BOOSTE	RS	Date [MM/DD/YYYY] \$	125,00
	3580 W.38THS	T	Description of Expenditure	
ER1E	State PA Zip. Code	16506	DONATION	
	TMA STER		Date [MM/DD/YYYY] \$ 08/13/2019 Description of Expenditure	55,00
	\$ 2711 LEGION KE),		
I LKIE	PA code	16506	STAMPS	
To-Whom Paid VAU	ERIO'S REST.		08/15/2019	50.00
House# Street Addre			Description of Expenditure	
	State Zip Code			
To Whom Paid MILL House # Street Addre	CREEK DEMS		Date [MM/DD/YYYY] \$ \[\frac{\fir}\f{\frac{\frac{\fracc}\f{\frac{\frac{\frac{\frac{\frac	120,00
GIV ERIE	State PA Zip Code	4450 3415		
To Whom Paid M	REEK TWP. SUPR.	320321	Date [MM/DD/YYYY] \$	270,00
House # Street Addre	3608 W, 26TH ST	.	Description of Expenditure	
ERIE	Code	16506	STREET/CULMIN/OUD/AWAAAIIIIIIIIKS	
House # Street Addre	RAWFORD CENTRAL L	ABOR r. #A	Date [MM/DD/YYYY] \$ O8/12/12/19 Description of Expenditure]00.00
and ERIE	State PA Code	16501		
To Whom Pale FRIEN	DS OF KIM CLEA		08/17/2019	100,00
House# Street Addre			Description of Expenditure	
ERIE	State PA Zip Code	riji Par	CAMPAIGNA	NATION

SCHEDULE III

Statement of Expenditu	res
FRIENDS OF JOHN GROH	
To Whom Paid Ken Sturm	Date [IMM/DB/YYYY] \$ 50,00
House # Street Address	Description of Expenditure
City State Zip Code	
DE SANTIS SIGNS	09/15/20/19 500,00
House # Street Address 540 W. 1874 ST.	Description of Expenditure
City ERIE State PA Code 16502	
TO Whom Paid DE SANTIS SIGNS	09/20/2019 443,40
House # Street Address 540 W, 18 TH ST.	Description of Expenditure
City ERIE State PA Code 16502	
	The state of the control of the state of the

City State Zip Code	
DE SANTIS SIGNS	09/15/20/19 500,00
House # Street Address 540 W, 18TH ST.	Description of Expenditure
City ERIE State PA Code 16502	
DE SANTIS SIGNS	09/20/20/9 5 443,40
House # Street Address 540 W, 18 TH ST.	Description of Expenditure
ERIE State PA Zip 16502	· ·
SAM'S CLUB	09/25/2019 54.90
House # Street Address 7200 PEACH ST.	Description of Expenditure
ERIE State PA Code 16509	
To Whom Paid WALMART	09/30/2019 47,20
House # Street Address 5350 WEST RIDGE RD.	Description of Expenditure
City ERIE State PA Code 16506	
TO Whom Paid THE CAB	Date [MM/DD/YYYY] \$ 260.00
House # Street Address 5442 WEST RIDGE RD,	Description of Expenditure
ERIE State PA Gode 16506	FUNDRAISER CATERING
To Whom Paid CAM	10/04/2019 \$ 50,00
House # Street Address	Description of Expenditure
City State Zip Gode Code	
MILLCREEK DEMS	10/16/2019 60 00
House # Street Address	Description of Expenditure
City State Code	

Statement of Expenditures

Filer Identification Number:	FRI	END5	OF V	JOHN	GROH	

To Whom Paid FRIEND	S OF MAR	Y RENNIE	Date [MM/DD/YYYY] \$ 10 08 20 9	25,00
House # Street Address	<u> </u>	1 / 1/1/1/12	Description of Expenditure	
Gity Garage	State	Zip Cade	DONATION	ansamuse veltaisettessaanusen ja (
To Whom Paid OFFICE	DEPOTM	A乂 .	Date [MM/DD/YYYY] 5 10/13/2019	72,98
House # Street Address	105 MILLER	EEK MALL	Description of Expenditure	Periodical de de la company de la company Esta de la company de la c
ERIE ERIE	State PA	Zip Code 16565		
To Whom Paid UPS	STORE		Date [MM/DD/YYYY] 5	25.60
House # Street Address	2501 W. 12	TH ST,	Description of Expenditure	
ERIE	State PA	Zip Code 16505		
To Whom Paid			Date [MM/DD/YYYY] \$	
House # Street Address	1444401444014401		Description of Expenditure	
	State:	Zip Code		
To Whom Paid			Date [MM/DD/YYYY] S	
House # Street Address			Description of Expenditure	
ENY	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	
Gty	State	Zip Code		
To Whom Paid			Date [MM/DD/YYYY] \$	
House # Street Address			Description of Expenditure	
	State	Kip Code		

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.

Filer Identification Numl	FRIENDS C	OF JOHN GROH		
				Amount
Full Name of Contribu Committee	COMMITTER TO	ELECT KATHY FATICA	09/26/2019	100.00
House #	Street Address 46 23 Sol	UTHERN DR	Date [MM/DD/YYYY]	
ERIE		16506		\$1
Full Name of Contribu Committee	I.B.E.W.L	OCAL 56	09/24/2019	100.00
House #	Street Address 962 W.	20 TH ST.	200 - 200 -	
ERI ERI	E State PA	Zip Code 16502		
Full Name of Contribu Committee			A palety way or fleet, yand 3 bey 4 had 4 had 5 had 5 had 6	
House #	Street Address		22 22 24 24 25 25 25 25 25 25 25 25 25 25 25 25 25	
GIV 11	State:	Zip Code	The state of the s	5 121 - 221 -
Full Name of Contribu Committee			() () () () () () () () () ()	
House #	Street Address			
	State	ZIP Code		
Full Name of Contribu Committee	ting .		Date [MM/OD/YMY)	
House #	Street Address		Date [MM/DD/YYYY]	
City	State:	Zip Code	7 7 3 5 4 4 5 5 5 6 7 5 6 7 5 7 5 7 5 7 5 7 5 7 5 7	
Full Name of Contribu Committee				
House #	Street Address		A STATE OF THE STA	
City	State	Zipi Code	Date [MM/DD/YYYY]	

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	FRIENDS OF JOHN GROH		
Full Name of Contributors		Pate MM/DD/AAAA	<u> </u>
	LAURA SCHAAF	08/29/2019	100,00
House # Stre	et Address	Date [MM/DD/YYYY] \$	1-0,00
IGIV	1632 W. 40TH ST.	Date [MM/DD/YYYY] \$	
ERIE	PA 2100 16509		
Full Name of Contributor	Para + Talas	Date [MM/DD/YYYY] \$	
House# Stre	KONALD J. JONES	08/29/2019 Date [MM/DD/YYYY] \$	100,00
	3505 OAKWOOD ST.		
ERIE	State PA Zip Code 16508	Date [MM/DD/YYYY] S	
Full Name of Contributor	<i>C</i> 12	Date [MM/DD/YYYY] - \$	2 v
House #	CAROLYN KONTIS	08/29/20/9 Date [MM/DD/YYYY) \$	100,00
	3112 PINE TREE TER		
ERIE	State PA Zip Code 16506	Date [MM/DD/YYYY] \$	
Full Name of Contributor		Date (MM/DD/YYYY)	
	JUSEPH TRIES	08/29/2019	200,00
House# Stre	6131 RED PINE LN	Date [MM/DD/YYYY] \$	
		Date [MM/DD/YYYY] \$	
「これ」 Full Name of Contributor	PA 16506	Date (MM/DD/YYYY) 5	
run Maine of Compilation	MARK SHAW	Date [MM/DD/YYYY] \$ 08/29/2019	150.00
House # Stree	et Address	Date [MM/DD/YYYY] \$	100,00
City	4345 COLT LN State D.A. Zip Code 117	Date [MM/DD/YYYY] \$	
LRIE	PA 16506		
Full Name of Contributor	ERIE FIREFIGHTERS	07/25/2019	250.00
House # Stree	et Addressi	Date [MM/DD/YYYY] \$	700 × 00
Andrews (Constitution of the Constitution of t	P.O. Box 3576	180 181	
ERIE	State PA 21p Code 16508	Date [MM/DD/YYYY] \$	

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.)

	FRIENDS OF JOHN GROH		
acultivamesol (contributo)	m. ~ ~ ~	Date (MM/OD/VYYY)	
	MICHAEL P. MARTIN De	09/11/2019	250.00
House # Str	5216 WOLFRUN DR.	Date [MM/DD/YYYY]	\$
CIV ERIE	State PA Zip Code 16505	Date [MM/DD/YYYY]	3 (1) (1) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Full Name of Contributor	ROBERT J. WILL	08 21/2019	100.00
House # Str	eet Address 5518 STONE RUNDR.	Date [MM/DD/YYYY]	reserve .
GIV FAIRVIE	State Zin Code	Date [MM/DD/YYYY)	\$
Full Name of Contributor	THOMAS A. WITTMAN M.D.	Date [MM/DD/YYYY] : 08/29/2019	200.00
House # Str	eet Address 43 82 WINNERS CIRCLE	Date [MM/DD/YYYY] \$	
ON ERIE	State PA Zip Code 16506	Date [MM/DD/YYYY] :	
Full Name of Contributor	RONALD DIEHL	Date [MM/DD/YYYY] 5	60,00
House # Str	ect Address 214 ROSLYN AVE.	Date [MM/DD/YYYY] \$	
CH ERIE	State PA Zip Code 16506	Date [MM/DD/\\Y\\]	
Full Name of Contributor	DUANE CHURCHILL	09/26/2019	75.00
House # Stre	1305 MORRISON DR.	Date [MM/DD/YYYY] S	
ERIE	State PA Zip Code 16505	Date (MM/DD/YYYY) \$	
Full Name of Contributor	SCOTT BRIDGER	Date [MM/DD/YYYY] \$	100,00
House # Stre	3040 W. 25TH ST.	Date [MM/DD/YYYY] \$	
ColE	State PA Zip Code 16506	Date [MM/DD/YYYY] \$	

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.)

			· · · · · · · · · · · · · · · · · · ·	
the identification radifices.	FRIENDS	OF JOHN	GROH	

Full Name of Contributor RICHARD P. FISCHER House # Street Address Contributor RICHARD P. FISCHER	Date [MM/DD/YYYY] \$	150.00
424 CONNECTIONT DR.		
ERIE State PA 210 Code 16505	Date [MM/DD/YYYY] \$	
Full Name of Contributor CHERYL BRAVER	Date [MM/DD/YYYY] \$	250.00
House # Street Address 67 EDINBURGH DR.	Date [MM/DD/YYYY] 5	
PALM BEACH GARDENS State FL ZIP Code 33418	Date [MM/DD/YYYY] 5	
Full Name of Contributor JAMES W. GLOEKLER	Date [MM/DD/YYYY] S	100.00
Street Address 2562 PANDORA DR.	Date [MM/DD/YYYY] \$	
ERIE State PA Zip Code 16505	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date (MM/DD/XYYY) = 25	
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] S	
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:

FRIENDS OF JOHN GROH									
Full Na	me of	_					Date [MM/DD/YYYY]	\$	
	outing Committ	ee PAR	EAL	TOR	s PA	C	08/19/2019	1	1,000.00
House	#	Caucas Addings					Date [MM/DD/YYYY]	\$	- W
		7	00	N. 1.	2TH 57	Γ,	08/19/2019		
City	LE MO	YN E	State	PA	Zip Code	17043	Date [MM/DD/YYYY]	\$	
Full Na	me of	_					Date [MM/DD/YYYY]	\$	
	uting Committ	ee PLUM	BERS	Loca	RL UNIO	N No. 27	10/02/2019		500.00
House a	#	Street Address				<u></u>	Date [MM/DD/YYYY]	\$	
		11040 11	PONT	MALLAN	EST N	NI HOL			
City		1.0101	State	100/51V	Zip Code	PUINK	Date [MM/DD/YYYY]	\$	
	Coor	200110	""	PA	Lip couc	15108	Sate (MANACO) 1111)	┤ "	
	CORAC	POLIS		11 /~1	<u> </u>	10108			
Full Nat	me of uting Committe	ee					Date [MM/DD/YYYY]	\$	
	8 40								
House #	#	Street Address					Date [MM/DD/YYYY]	\$	
								1	
City		·	State		Zip Code		Date [MM/DD/YYYY]	\$	
]				1	
Full Nar	me of			<u> </u>	<u> </u>	<u> </u>	Date [MM/DD/YYYY]	\$	
	uting Committe	ee					Date [WWW/DD/1111]	,	
House #	! [.	Street Address					Date [MM/DD/YYYY]	\$	THE STREET
City		l	State		Zip Code]	Date [MM/DD/YYYY]	\$	
]	
Full Nar	ne of			•			Date [MM/DD/YYYY]	\$	
Contrib	uting Committe	ee							
House #	<u> </u>	Street Address					Date [MM/DD/YYYY]	\$	
		oti ces ruai ess					Sate [ivility 55] TTT		
City		l	State	·	Zip Code		Date [MM/DD/YYYY]	\$	
					-				
Full Name of						Date [MM/DD/YYYY]	\$		
Contributing Committee									
House #		Street Address					Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$	

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:

Employer Name

Employer Mailing Address / Principal Place of Business

	FRIE	NP5 0	ON HOT A	PROH		
Full Name of Contribut	JOHA	V & B R1	DGET B,	AR BER	08/05/2019	\$ 1,000.00
CIV ~	Street Address		THOROUGHE		Date [MM/DD/YYYY] Date [MM/DD/YYYY]	
Employer Name Employer Mailing Addr	ress/	<u> </u>		16206	Occupation	
Principal Place of Busin Full Name of Contribut		10		+	Date [MM/DD/YYYY]	S
House #	WILL Street Address	JAM TAT	TERSON U	lr.	08/08/2019	2,500.00
HOUSE #	1572 (3670) (7770) (7770)	250 To	WER LANI	F.	Date [MM/DD/YYYY]	. \$
ERIE.		State P	A Zip Code	16506	Date [MM/DD/YYYY]	\$
Employer Name Employer Mailing Addr	an de Compa				Occupation	
Principal Place of Busin Full Name of Contribute	1685					
	1 SHE	RRY	BAUER		09/26/2019	500.00
	Street Addréss	_			Date [MM/DD/YYYY]	.
257.008(00000000000	E	State P/	A Zip Code	16505	Date IMM/DD/YYYY	S
Employer Name Employer Mailing Addre					Occupation	
Principal Place of Busin	ess					
Full Name of Contribute	J E				Date [MM/DD/YYYY]	
House #	Street Address				Date [MM/DD/YYYY]	•
City	<u>ADBERGURIPE SHIFTE</u>	State	Zip Code		Date [MM/DD/YYYY]	8588 858

Occupation

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 Num	FRIENDS	OF JOH	NGROH		
Full Name	MILICOET	v trus	Supportion	n c	
House #	MILLCREE Street Address 3608		SUPERVISOF	ζ.Σ	
City		State D/	Zip Code 6501	0ate [MM/00/YYYY] \$ 08 22 2019	100 00
Receipt Description	CRIE	III	16506	M8177761	100.00
Full Name	REFUND				
House #	Street Address				
City consequences		State	Zip Code	Date [MM/DD/YYYY] \$	
Receipt Description					
Full Name	10 10 10 10 10 10 10 10 10 10 10 10 10 1				
House#	Street Address				
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Receipt Description					
Full Name					
House#	Street Address				
City	18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	State	Zip Code	Date [MM/DD/YYYY] \$	
Receipt Description		(INTERNATIONAL		\$1000 per 1	
Full Name					
House #	Street Address	State	Zp.	Date [MM/DD/YYYY] \$	
Ang on the top of the Angle of the Angle of the Angle of the Angle of the Angle of the Angle of the Angle of the Angle of the Angle of Angle of			Code	Date [MM/DD/YYYY] \$	
Receipt Description			ATALON MARKET MA	**************************************	
Full Name					
House # City	Street Address	State	Zp : 200	Date [MM/DD/YYYY] \$	
	11 11 11 11 11 11 11 11 11 11 11 11 11		Gode Code		
Receipt Description					