

# Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/> Committee	Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Committee to Elect Carl Anderson			
Street Address	403830 PARADE BLVD			
City	State	Zip Code		
Gre	PA	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 checked="" type="checkbox"/>	<input 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)	7/10		Year	2005		Amendment Report	Termination Report	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only 2005 JUN 20 PM 3:53 ERIE COUNTY VOTER REGISTRATION
A. Amount Brought Forward From Last Report	\$	0	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	15,200.00	
C. Total Funds Available (Sum of Lines A and B)	\$	15,200.00	
D. Total Expenditures (From Schedule III)	\$	14,054.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	1,146.00	
F. Value of In-Kind Contributions Received (From Schedule II)	\$		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	6,200.00	

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

Sworn to and subscribed before me this

20 day of June 20 25

Sue Sheffield

Signature

My Commission expires 12-02-2026

MO. DAY YR.

Signature of Person Submitting report

John Steiner

Printed Name

814

Area Code

520-7072

Daytime Telephone Number

Part II- If this is a report of a Candidate's Authorized Committee, candidate 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

20 day of June 20 25

Sue Sheffield

Signature

My Commission expires 12-02-2026

MO. DAY YR.

Signature of Candidate

CARL ANDERSON

Printed Name

814

Area Code

490-4785

Daytime Telephone Number

Commonwealth of Pennsylvania - Notary Public  
Sue Sheffield, Notary Public  
Erie County  
My commission expires December 2, 2026  
Commission number 1424443  
Member, Pennsylvania Association of Notaries

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

Filer Identification Number	
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<b>1. Unitemized Contributions and Receipts—\$50.00 or Less per Contributor</b>
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Total for the reporting period	(1)	\$	0
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<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>
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Contributions Received from Political Committees (Part A)	\$	\$ 5,006.00
All Other Contributions (Part B)	\$	\$ 200.00
Total for the reporting period	(2)	\$ 5,200.00

<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>
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Contributions Received from Political Committees (Part C)	\$	\$
All Other Contributions (Part D)	\$	\$ 16,000.00
Total for the reporting period	(3)	\$ 16,000.00

<b>4. Other Receipts—Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>
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Total for the reporting period	(4)	\$	\$ 15,200.00
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)		\$	\$ 15,200.00

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:	
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Full Name of Contributing Committee	NORTH WEST GOVERNMENT PAC				Date [MM/DD/YYYY]	5/11/2025	\$	5,000.00
House #	100	Street Address	SUITE 5 SUITE 440		Date [MM/DD/YYYY]		\$	
City	ERTÉ	State	PA	Zip Code	16507	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip 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:	
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Full Name of Contributor	Anthony Lopez				Date [MM/DD/YYYY]	4/21/2025	\$	200.00
House #	2618	Street Address	PARADE ST		Date [MM/DD/YYYY]		\$	
City	Edinburg	State	TX	Zip Code	78504	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]	\$	
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]	\$	
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 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:	
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Full Name of Contributor					Date [MM/DD/YYYY]		\$
Tom Hagen					4/18/2025		10,000.00
House #	Street Address		Date [MM/DD/YYYY]		\$		
5727	Grubb Road						
City	State	Zip Code	Date [MM/DD/YYYY]		\$		
CRFE	PA	16506					
Employer Name					Occupation		
RESIDED					RESIDED EXECUTIVE		
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**

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b> Scott Serrano					<b>Date [MM/DD/YYYY]</b> 5/1/2025	<b>\$</b> 700.00
<b>House #</b> 5014	<b>Street Address</b> Zuck Road		<b>Description of Expenditure</b>			
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code</b> 16506	YARD sign work/Campaign			
<b>To Whom Paid</b> Pol for City Council					<b>Date [MM/DD/YYYY]</b> 5/2/2025	<b>\$</b> 150.00
<b>House #</b> 1620	<b>Street Address</b> 1620 Walnut (Club)		<b>Description of Expenditure</b>			
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code</b> 16503	Event			
<b>To Whom Paid</b> R Brilliant Media					<b>Date [MM/DD/YYYY]</b> 5/5/2025	<b>\$</b> 3,000.00
<b>House #</b> 6300	<b>Street Address</b> Echo Hill Road		<b>Description of Expenditure</b>			
<b>City</b> Parkersburg	<b>State</b> PA	<b>Zip Code</b> 16512	Media/Printing/Mailing			
<b>To Whom Paid</b> Scott Serrano					<b>Date [MM/DD/YYYY]</b> 5/6/2025	<b>\$</b> 700.00
<b>House #</b> 5014	<b>Street Address</b> Zuck Road		<b>Description of Expenditure</b>			
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code</b> 16506	YARD sign work			
<b>To Whom Paid</b> M. J. S Fundraiser					<b>Date [MM/DD/YYYY]</b> 5/7/2025	<b>\$</b> 100.00
<b>House #</b>	<b>Street Address</b> Perry Highway Hox Co		<b>Description of Expenditure</b>			
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code</b> 16508	Event			
<b>To Whom Paid</b> Gohr's Printing Services					<b>Date [MM/DD/YYYY]</b> 5/7/2025	<b>\$</b> 3,666.00
<b>House #</b> 10575	<b>Street Address</b> West Main St		<b>Description of Expenditure</b>			
<b>City</b>	<b>State</b> PA	<b>Zip Code</b> 16428	Printing			
<b>To Whom Paid</b> Ann Lutz					<b>Date [MM/DD/YYYY]</b> 5/8/2025	<b>\$</b> 200.00
<b>House #</b> 1307	<b>Street Address</b> PARADE ST		<b>Description of Expenditure</b>			
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code</b> 16503	Campaigning Event			
<b>To Whom Paid</b> Haines Printing					<b>Date [MM/DD/YYYY]</b> 5/18/2025	<b>\$</b> 3,500.00
<b>House #</b> 10575	<b>Street Address</b> West Main St		<b>Description of Expenditure</b>			
<b>City</b> 11057603	<b>State</b> PA	<b>Zip Code</b> 16428	Haines Printing work			

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

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		MERCK FOR JUDGE		<b>Date [MM/DD/YYYY]</b>		\$		150.00	
<b>House #</b>	0818		<b>Street Address</b>	LIBERTY ST		<b>Description of Expenditure</b>			
<b>City</b>	LARE		<b>State</b>	AA		<b>Zip Code</b>	16508		

<b>To Whom Paid</b>		Goh's Printing		<b>Date [MM/DD/YYYY]</b>		\$		1937.91	
<b>House #</b>	10575		<b>Street Address</b>	West Main ST		<b>Description of Expenditure</b>			
<b>City</b>	NORTHEAST		<b>State</b>	PA		<b>Zip Code</b>	16428		

<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>		\$			
<b>House #</b>			<b>Street Address</b>			<b>Description of Expenditure</b>			
<b>City</b>			<b>State</b>			<b>Zip Code</b>			

<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>		\$			
<b>House #</b>			<b>Street Address</b>			<b>Description of Expenditure</b>			
<b>City</b>			<b>State</b>			<b>Zip Code</b>			

<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>		\$			
<b>House #</b>			<b>Street Address</b>			<b>Description of Expenditure</b>			
<b>City</b>			<b>State</b>			<b>Zip Code</b>			

<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>		\$			
<b>House #</b>			<b>Street Address</b>			<b>Description of Expenditure</b>			
<b>City</b>			<b>State</b>			<b>Zip Code</b>			

<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>		\$			
<b>House #</b>			<b>Street Address</b>			<b>Description of Expenditure</b>			
<b>City</b>			<b>State</b>			<b>Zip Code</b>			

<b>To Whom Paid</b>				<b>Date [MM/DD/YYYY]</b>		\$			
<b>House #</b>			<b>Street Address</b>			<b>Description of Expenditure</b>			
<b>City</b>			<b>State</b>			<b>Zip Code</b>			

**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.

<b>Filer Identification Number:</b>	
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<b>Name of Creditor</b>					<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED</b> [MM/DD/YYYY]				\$ 6,200.00
8830	PARADE	4/1/2025				
<b>City</b>	<b>State</b>	<b>Zip Code</b>				
ERIE	PA	16504				
<b>Description of Debt</b>						
loan to Campaign						

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

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

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

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

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