

# Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number		Report Filed E	By Candid	ate	Committee		Lobbyist
Name of Filing Comm Lobbyist	nittee, Candidate or	Friends of Rock	Copeland			20 00 00 00 00 00 00 00 00 00 00 00 00 0	Partial Marie Control of Anna Control
Street Address		1336 Patterson	Ave				
City	Erie		State	PA	Zip Code	16508	
	x under report type)	,					-
	<sup>nd</sup> Friday 3-30 Day Pos Primary Primary	t 4-6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre- Election		7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
					X		
Date Of Election (MM/DD/YYYY)	11/7/23	Year	2024	Amendment Report		Termination Report	
Summary of Receipts Expenditures	s and From Date 01/01/2024	To Date	31/2024		For	Office Use Only	
A. Amount Brought I	orward From Last Repo	l l	554.93		20.10stb./6.40s6		
B. Total Monetary Co (From Schedule I)	ontributions and Receipt	\$ \$	120				70 Di
C. Total Funds Availa (Sum of Lines A and I	3)	(Rais)	674.93				1025 JAN 30
D. Total Expenditure (From Schedule III)		10.50	562.10				高 [ ] [ ] [ ] [ ] [ ] [ ] [ ]
E. Ending Cash Balan (Subtract Line D from	i Line C)	N5 45	112.83				The second
(From Schedule II)	ontributions Received	\$	0				
G. Unpaid Debts and (From Schedule IV)	Obligations Lists upplied well a least	\$	0				₽ 5
Part 1- If this is a <b>Comm</b>	ittee report, treasurer sign l	nere. If this is a <b>Ca</b> r	Affidavir Se				
I swear (or affirm) that t	his report, including the att		papër, is is is		ge and belief tr	ue, correct and comp	ete.
Sworn to and sub <u>scribe</u> c	nuary 20 25	, and	nwealth auren E amission	MUR			
day of \\ J\\	9 10	– lytyer	nwealth of Foundation E. Thayer. Erie Counties on expires	Signature	of Person Subm	itting report	
Signat	ture (	– ania >	Thayer. Erte Coun expires	lary Fischer	Printed Name		<del></del> .
My Commission expires	12-20-28		₹ <b>- E</b>	39	313-	9468	
	MO. DAY YR	scolution	2 · * · * · ·	Area Code	Day	time Telephone Numl	per
Part II- If this is a report	of a Candidate's Authorized	Committee, cand		ere.	provisions of th	o Act of June 2, 1023	(B   1222 NO 220) as
amended.	of a Candidate's Authorized of the best of my knowledge of the best of	and beller this paries	2028	nas not violated any	provisions of the	ie Act of Julie 5, 1957	(F.L. 1333, NO.320) as
Sworn to and subscribed	l before me this	r, Per	nwea		//	. /	
30 day of <u>Ja</u>	- Assau	on mile	1 ley	0	tell_		
Lauren		Penn Ro	: Sign ock Copeland	ature of Candid	ate 		
Signat	Associated in the second	S Dec	14	Printed Name	280		
My Commission expires_	MO. DAY YR.	hanja Association of No.	tary!	rea Code	Dayti	me Telephone Numb	 er
		Association of Notaries	blic 20,			· 	
		taries	Seal 2028				

### 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 Number

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<u> </u>				Amo	ount
Full Name of C Committee	ontributing	•		Date [MM/DD/YYYY] \$	
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House#	Street Address			Date [MM/DD/YYYY] \$	
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City		State	Zip Code	Date [MM/DD/YYYY] \$	
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Committee	ounioung of			Date [MM/DD/YYYY] \$	
English and the second					
House#	Street Address			Date [MM/DD/YYYY] \$	
a all de seu		In the control of	PALEST SEPTEMBER W.J. S.J.		
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of C	antributing	Alexander (		Date [MM/DD/YYYY] \$	
Committee	ili ou ili ili opi il				
House #	Street Address				
Flouse #				Date [MM/DD/YYYYY] S	
City		State	recommendate the recommendate of the recommend		
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Co	ontributing	SASCIDITATE.		Date [MM/DD/YYYY] \$	
Committee				Section 2.4 (1) 1	
House#	Street Address			Date [MM/DD/YYYY] \$	
City	Per Ser 1866 in A Opposit har Hada	State	Zip Code	Date [MM/DD/YYYY] S	
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Full Name of Co	ontributing			Date [MM/DD/YYYY] \$	
Committee	i de la composition della comp				
House #	Street Address			Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Co	ontributing			Date [MM/DD/YYYY] \$	
Committee	Constant are set of the				
House #	Street Address			Date [MM/DD/YYYY] \$	
MISTER SELECTION	W. S.			対容線 経線	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
ANTANA NA		19.006.102			

### 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.

Fleribentification Van sewel

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FüllNameo			Date IMM/DD/MYYY	A61
Contributing Committee			Date [MM/DD/YYYY]	
House# Street Address			Date [MM/DD/YYYY]	S.
CHA	State	Zip Code)	Date (MM/DD/MAM).	
Full Name of Contributing Committee			Date [MM/Db/mm]	
House# Street Address			Date [MM/DD/YYYY]	
Gity.	State	Zip Code	Date [MM/DD/W/W]	
Full Name of Contributing Committee			Date [MM/DD/AYYY]	
House # Street Address			Date [MM/DD/YYYY]	
Get y 1 th had been proposed to the proposed t	State	. ∠ip.€ode.	Date (MM/DD/YYYY) : \$	
Full Name of Contributing Committee			Date [MM/DB/YYYY] 5	
House # Street Address			Date [MM/DD/YYYY]   \$	**************************************
(Gity)	State	:Zip Code :	Date [MM/DD/YYYY] \$	
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Full Name of Contributing Committee			Date (MM/DB//YYYY) : 1\$	
House # Street Address			Date [MM/JDD/YYYY)	
(Givy	State	Zip Code	Date [MM/DD/Y/Y/Y]	

### PART E

# **Other Receipts**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Full Name				
House#: Stre	eti Address			
Giva di	<u> </u>	State	Zī	Date [MM/DD/YYYY] \$
			Zip Code	
Receipt Description 13.1		There is a real property of the second secon	A season commencement of the season of the s	
Adil Name				
	et Address			
Giv 11 1 1 1 1 1 1 1 1		State	Zip Code	Date (MM/DD)/YYYYI \$ \$.
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Full Name "NAME AND THE				
House # Stre	et Address			
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Receipt Description				
Full Name				
House# Stre	et Address			
Giv.		State	ZIPL	Date [MM/DD/YYYY] \$
Receipt Description			Code	1.41

# SCHEDULE II PART F

# **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

Filer Identification Number:

AND CARLES AND SAFE					
Full Name of Contribu	itor				\$
House#	Street-Address			Date [MM/DD/YYYY]	\$
Gty		State -	Zip Cocle	Date [MM/DD/YYYY]	S.
Description of Contrib	oution				
Full Name of Contribu	tor:			Date [MIM/DID/MYM];	<b>S</b>
	Street Address			Date;[MM/DD/YYXY]	
Gity Fa. 27 a		State	Zip Code:	Date [MM/DD/YYYY]	
Description of Contrib	UITON.				
Full Name of Contribu	i or			Date [MM/DD/YYYY)	
	Street Address			Date MM/DD/YYYY],	
City: District Description of Contrib		State.	Zip Code	Date [MM/DD/XYYY]	
	<b>建设</b> 的印度。				7090
Full Name of Contribu				Date [MM/DD/YYYY]	
	Street Address			Date [MM/DD/AAAA]	
Gity Description of Control		State   	Zip Code!	Date (MM/DD/AAAA)	5) (1)
Description of Contrib					
Full Name of Contribu				Date [MIM/JDD/MMM/]] - 9	
	Street Address			Pate (MIM/DD/W/W)	
(Gtv.)	294 (1947)	State	Zip Gode 11	Date [MM/DD/YYYY]	
Description of Contrib	unon a substitution of the				

# Statement of Expenditures

Fileridentification Number:	

Tie Whom Paid			Date [MM/DD/WWW] 5
Marquette Saving	s Bank		1/5/24
House # Street Address	3404 Liberty St		Description of Expenditure
Gicy Erie	State PA	Zip 16508	Check printing charges
To Whom Paid Millcreek Dems			Date [MM/DD/YYYY] \$ 500.00
House # Street Address	1526 High St		Description of Expenditure
City: L. Erie	<b>State</b> PA	<b>Zip</b> 16509	Donation
TO!Whom!Paid: Committee to Elec	t Chuck Nelson		Date [MM/DD/YYYY] \$ 50.00
House# Street Address	646 W 9th St		Description of Expenditure
(Gity). Erie	i <b>State</b> PA	Zip." Code / 16502	Donation
To Whom Paid. Stripe			Date [MM/DD/XYYY] \$ 6.30
House#. Street Address			Description of Expenditure
Giv.	State	Zip Code	Merchant fees actibue donations
To Whom Paid! Actblue			pare MM/DB/YYYY) \$ mult 1.80
House # Street Address			Description of Expenditure
City	State*	Zip <sup>1</sup> Code <sup>4</sup> :5:	Merchant fees actblue donations
To Whom(Paid)			Pate IMM/DD/AWAYL S
House # Street Address			Description of Expenditure
EILY III	State	Zip Code	
To Whom Paid.			Date [MM/DD/AYYY)] \$
House## Street Address			Description of Expenditure
(CITY)	State	Zip Code	
lio Whom:Paid			Date [MM/DD/YYYY] \$7
House# Street Address		<del>-</del>	Description of Expenditure
(Giv)	State	Zip Code	

### PENNSYLVANIA CAMPAIGN FINANCE REPORT

This Report must be typed or printed legibly in blue or black ink.

### INSTRUCTIONS

This form is intended for the use of candidates, political committees and contributing lobbyists who are required to disclose contributions and expenditures. Candidates must file separate reports when they make expenditures or receive contributions on their own behalf and separate from their campaign committee. A candidate's report discloses contributions received and expenditures made individually by the candidate. A contributing lobbyist's report discloses only expenditures the lobbyist personally made to influence the outcome of a candidate's election.

Candidates and their authorized political committees file reports in the office where their nomination documents are filed. If the candidate's reports are filed with the Secretary of the Commonwealth, a copy of the reports filed by the candidate and the authorized committee must be filed with the County Board of Elections in the county in which the candidate resides.

#### REPORT COVER PAGE

The Report Cover Page identifies the filer, the type of report and what reporting period is covered. It also summarizes the detailed contribution and expenditure sections from the body of the report.

Filer Identification Number - This number is assigned by the Bureau of Commissions, Elections and Legislation to candidates and committees who register and file with the Secretary of the Commonwealth. A candidate's filer identification number is assigned by the Bureau when the candidate files nomination petitions. A political committee or lobbyist filer identification number is assigned when the committee or lobbyist files registration documents in the Bureau.

Report Filed By - Please indicate which type of filer you are by checking the appropriate box on the cover page.

Name of Filing Committee, Candidate or Lobbyist, Street Address, City, State, Zip Code - Please enter appropriate name and address.

Type of Report - Please place an "X" by the applicable report type.

Amendment Report - Check "Yes" only if the report is being filed to correct, add to, or in some way change a report that has already been filed.

**Termination Report** - Check "Yes" only if the filer has no cash balance, no unpaid debts or obligations, and wishes to cease operation. Contributing lobbyists may file a termination report if they do not anticipate making further contributions to influence the outcome of a candidate's election.

Filing Method - Indicate whether the complete report is filed on paper, or if the report is filed by diskette accompanied by the signed and notarized cover sheet.

Name of Office Sought - If filed by a candidate or candidate's committee, indicate office sought.

Date of Election - If this is a pre- or post-primary/election report, indicate the date of the primary or election.

District Number - If filed by a candidate or candidate's committee, indicate district in which candidate is seeking office.

Office Code, Party Code and County Code - If filed by candidate or candidate's committee, refer to code charts at the back of this report form. Enter the corresponding code letters for the office sought and the political party of the candidate; enter the corresponding code number for the county of residence of the candidate. Candidates for local offices who file only with the County Board of Elections should enter Office Code OTH for Other Offices.

Summary of Receipts and Expanditures - Enter the appropriate dates of the reporting period covered.

Amount Brought Forward From Last Report (Item A) - The balance, if any, as of the first day of the reporting period. For committees, it is the amount reported as the ending cash balance on the previous report filed, if any.

Items B through G - See detailed instructions on each corresponding schedule.

Affidavit Section - Must be sworn to by the filer acknowledging the accuracy of the report (Part I). On reports filed by a candidate's authorized committee, the candidate must sign an additional affidavit (Part II).

Page Number - Calculate the total number of pages in the completed report and indicate on top of cover page. Subsequent pages should be numbered consecutively.

Reports Filed on Diskette: The cover page must accompany all filings, including diskette filings. Diskette filings must also meet the technical specifications of the Department. These specifications are available at www.dos.state.pa.us or by contacting the Bureau.

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### SCHEDULE II

### IN-KIND CONTRIBUTIONS RECEIVED

Detailed Summary Page - provides a summary of all in-kind contributions and valuable things received during the reporting period.

Item 1: Unitemized In-Kind Contributions Received represents the total value of in-kind contributions of \$50.00 or less, in the aggregate per contributor, received during the reporting period.

Items 2 and 3: Enter the total for each section from the corresponding schedules in the report (Part F and Part G).

Enter the page total on Page 1, Report Cover Page, Item F.

Part F and Part G - Use these Parts to itemize in-kind contributions from individuals or political committees according to the dollar value of the contribution. The form is designed to list the dates and amounts of as many as three separate in-kind contributions from the same source in one line item. The amount is equal to the current market value of the item or service contributed.

Totals of Parts F and G should be transferred to the appropriate section on the Schedule II Detailed Summary Page.

### SCHEDULE IV

### STATEMENT OF UNPAID DEBTS

All unpaid debts and obligations which are outstanding at the end of the reporting period must be reported. If a debt is incurred in one reporting period and not repaid, every report filed must continue to show the outstanding debt, even though there was no activity during the current reporting period.

A debt owed to an individual may be forgiven. A copy of the letter of forgiveness from the individual to the committee must accompany the report filed by the committee in the reporting period in which the debt was forgiven. A debt that is forgiven is considered a contribution to the committee. Such contributions from corporations or unincorporated associations are prohibited by the Election Code.