

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		ort Filed B rk X)	γ 🔛 С	andida	ite .	8	Committee		X	Lob	Description of the control of the co
Name of Filing Comm Lobbyist	Filing Committee, Candidate or		COMMITTEE TO ELECT CHRIS CAN			MPANELLI							
Street Address			946 W	36TH STRE	ET					•			
City	ERIE	The second of th			S	tate	PA		Zip Code	16508			
Type of Report (Place	x under r	eport type)			,								
1-6 th Tuesday 2-2 Pre-Primary Pre-	nd Friday Primary	3-30 Day Post Primary		Tuesday lection	5- 2 nd F Pre- Ele	a. ! in the collection of the	6-30 Day Election	A. C.	7- Annual	Special 2 Pre-Elec	2 nd Friday tion		cial 30 Day 🚉 t-Election 💮
Total Inc.		70 Y . S	rie-E	lection	11011	7					7		or the second se
Date Of Election			Year	like was all	<u> </u>		Amendm	ont		Termina			
(MM/DD/YYYY)		11/02/2024	ICAL		202	:4	Report	ient.		Report			
Summary of Receipts Expenditures	and	From Date		To Date	The second secon		The second secon		For	Office Use	Only		
	1	01/01/2024		12/	31/2024			71.15	13.700 13.700		\$	123	•
A. Amount Brought F	orward F	rom Last Repor	t \$	1	,862.35							: -	
B. Total Monetary Co (From Schedule I)	ntributio	ns and Receipts	\$	6,	,069.51							11	
C. Total Funds Availa (Sum of Lines A and E		1.4 300 30	\$	7,	,931.86								
D. Total Expenditures (From Schedule III)			\$	2	2,142.8						errory from	The state of the s	
E. Ending Cash Balanc			\$	5	,789.06						S	ij J	
(Subtract Line D from F. Value of In-Kind Co		ns Received	\$								en en gra en seusa	(A)	
(From Schedule II) G. Unpaid Debts and	Obligatio	ns t	\$		0								
(From Schedule IV)					3,750								
Part 1- If this is a Commi					didate re		ındidate sign						
I swear (or affirm) that t			ched scl	hedules on	paper, is	to the	best of my k	nowledg	e and belief t	rue, correct	and comp	lete.	-
Sworn to and subscribed day of:	before me	e this 20		• •			Sor	don l	Robert	mbul	L_		
day oi		20	_			GC	Sign ORDON ROBE	nature o	f Person Subr	nitting repor	t		
Signat	ure	•							Printed Nan	ne			
My Commission expires_				•		81	4	_	453	-7731			
	MO.	DAY YR.				ŀ	rea Code		Da	ytime Telepl	hone Num	ber	
Part II- If this is a report													
I swear (or affirm) that to amended.	o the best o	of my knowledge	and beli	\S.	T. 1	=	has not viola	ted any	provisions of	the Act of Ju	ine 3, 1937	7 (P.L. 13	33, NO.320) as
Correspondence and authorities of	l hafau	_ 16.1_		Notary Public	120 865	<u> </u>			Λ				
Sworn to and subscribed	Derore me	e this		. –	455		ر کر		A .'				
1 T day of U	<u>u (</u>	20 (X)	-	of <u>Pennsylvania</u> Thayer, Notary Eria County	Dece ber 1	- social		Signa	ture of Cand	idate			·
Signat	<u> </u>	<u>mayir</u>	_	of Pennsylva Thayer, Not Frie County	ires num	SY EH	RIS D CAMPA		rinted Name				
My Commission expires	12 -	20-208	28		sion	81	4	•	434-9				
inty commission expires_	мо.	DAY YR.	- -	nonwealth Lauren E	mmission expires December 20, Commission number 1455865	Fernisylvania Association of Notation	rea Code	-	Day	time Teleph	one Numb	er	
				nonwea	E O								
				Com	Myc	Ď				-			

SCHEDULE !

Contributions and Receipts Detailed Summary Page

Filer Identification Number 86-1982577		

1. Unitemized Contributions and Receipts-\$50.00 c	or Less per Contributor			
		(4)	<u> </u>	
'	Total for the reporting period	(1)	\$	
2. Contributions of \$50.01 to \$250.00 (From				
Part A and Part B)		. 7		
Contributions Received from Political Committees ((Part A)		\$	
All Other Contributions (Part B)			\$	
To	otal for the reporting period	(2)	\$	
		,_,	•	
3. Contributions Over \$250.00 (From Part C and Part	art D)			
The state of the s				
Contributions Received from Political Committees ((Part C)		\$	
All Other Contributions (Part D)			\$	
			•	
То	otal for the reporting period	(3)	\$	
4. Other Receipts-Refunds, Interest Earned, Retur	ned Checks, ETC. (From Part E)	A CAMP OF S		
	otal for the reporting period	(4)	211/29	
10	ital for the reporting period	(4)	Þ	6,069.51
Total Monetary Contributions and Receipts during t	this reporting period (Add and		\$	
enter amount totals from Boxes 1, 2, 3 and 4; also e		port		6,069.51
Cover Page, Item B)				0,003.51

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 Number 86-1982577

		,		
Full Name	FUNDRAISER	"		
House #	Street Address	•		
City 12		State	Zip Code	Date [MM/DD/YYYY] \$ 6,069.51
Receipt Description *	FUNDRAISER - CASH RECEI	VED		
Full Name				
(3) (3) (3) (4)	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
李智 五十二年				
House #	Street Address			
City (1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address			
City		State	Zip	Date [MM/DD/YYYY] \$
Receipt Description				PORTO:
Full Name	· ·	· · · · · · · · · · · · · · · · · · ·		
	Street Address			
City 5		State	Zip Code	Date [MM/DD/YYYY]. \$
Receipt Description				MAX
Full Name				
House #	Street Address			
City :		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				

Statement of Expenditures

Eiler Identification Number		· · · · · · · · · · · · · · · · · · ·	
The contraction of the contracti			
単 点 - 表 - 35 186-1982577			
五			

To Whom Paid	LEAGUE OF CIVIC ORGANIZATION OF ERIE	Date [MM/DD/YYYY] \$
1 2 1		08/06/2024 500
House # 3417	Street Address REGIS DR	Description of Expenditure
City ERIE	State PA Zip 16510	FUNDRAISER
To Whom Paid	MARQUETTE SAVINGS BANK	Date [MM/DD/YYYY] \$
		05/06/2024 22.57
House # 920	Street Address PEACH ST	Description of Expenditure
City. ERIE	State PA Zip 16501	CHECKS
To Whom Paid	BIROSCAK PRINTING CO	Date [MM/DD/YYYY] \$ 148.4
House #		07/15/2024 Description of Expenditure
1919	Street Address PEACH ST	Description of experiment
City. ERIE	State PA Zip 16502	FUNDRAISER
To Whom Paid	SMITH PROVISION CO	-Date [MM/DD/YYYY] \$
		07/29/2024
House # 1300	Street Address CRANBERRY ST	Description of Expenditure
City ERIE	State PA Zip 16501	FUNDRAISER
To Whom Paid	SAM'S CLUB	Date [MM/DD/YYYY] \$
	SAM'S CLUB	07/26/2024 352.51
House # 7200	Street Address PEACH ST	352 51
House #	Strong Addisoc	07/26/2024 352.51
House # 7200	Street Address PEACH ST State PA Zip Code 16509	07/26/2024 352.51 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183
House # 7200 City ERIE To Whom Paid	Street Address PEACH ST State PA CALAMARI'S PA Zip Code 16509	07/26/2024 352.51 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183
House # 7200 City ERIE To Whom Paid House # 1313	Street Address PEACH ST State PA Code 16509 CALAMARI'S Street Address HARPER DR	07/26/2024 352.51 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183
House # 7200 City ERIE To Whom Paid	Street Address PEACH ST State PA CALAMARI'S Street Address	07/26/2024 352.51 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183
House # 7200 City ERIE To Whom Paid House # 1313	Street Address PEACH ST State PA Code 16509 CALAMARI'S Street Address HARPER DR State DA 2ip 16505	Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183 Description of Expenditure FUNDRAISER
House # 7200 City ERIE To Whom Paid House # 1313 City ERIE To Whom Paid House # 1341	Street Address PEACH ST State PA	Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183 Description of Expenditure 5 5 5 5 5 5 5 5 5
House # 7200 City ERIE To Whom Paid House # 1313 City ERIE To Whom Paid	Street Address PEACH ST State	Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183 Description of Expenditure FUNDRAISER FUNDRAISER Date [MM/DD/YYYY] \$ 335.32
House # 7200 City ERIE To Whom Paid House # 1313 City ERIE To Whom Paid House # 1341 City ERIE	Street Address PEACH ST State PA	Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183 D7/28/2024 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 335.32 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 335.32 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 35.32 Description of Expenditure
House # 7200 City ERIE To Whom Paid House # 1313 City ERIE To Whom Paid House # 1341 City ERIE To Whom Paid	Street Address PEACH ST State PA	Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183 07/28/2024 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 335.32 FUNDRAISER Date [MM/DD/YYYY] \$ 335.32 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 355.00 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 510
House # 7200 City ERIE To Whom Paid House # 1313 City ERIE To Whom Paid House # 1341 City ERIE	Street Address PEACH ST State PA	Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 183 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 335.32 FUNDRAISER Date [MM/DD/YYYY] \$ 335.32 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 35.32 Description of Expenditure FUNDRAISER Date [MM/DD/YYYY] \$ 35.32 FUNDRAISER

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 ider	ntification Number:			end of the reporting period.
	Lineary in	86-1982577		
Nameo	facreditor	SI	and the second	
House#	Carata de C	CHRIS CAMPANELLI eet Address	ATT DEDTANCHORED	Outstanding Balance of Debt
	946	W 36TH STREET	DATE DEBT INGURRED [MM/DD/YYYY]	\$
Gity			05/10/2021	
		ERIE State	PA Gode 16508	2,500.00
Descripti	tion of Debt	LOAN	100226070MANAGE	[靈經》
	(Greditor	CHRIS CAMPANELLI		Outstanding Balance of Debt
House#	Stre 946	et Address	DATE DEBT INGURRED	
	540	W 36TH STREET	[MM/ĐĐ/XYYY]	
City		ERIE State	PA	250.00
Descripti	ion of Debt	LOAN	Euge-	
Name of			. excensional language and a supposed of a successive graph of the supposed for a supposed for a supposed for a	
House#		CHRIS CAMPANELLI		Outstanding Balance of Debt.
	946 Stre	et:Address	DATE DEBT INCURRED :: [MM/DD/YYYY]	\$
		W 36TH STREET	10/22/2021	
City		ERIE	PA Zip 16508	1,000.00
Descripti	ion of Debt	LOAN	[648] (1995) [1995]	
Name of	Creditor -			Outstanding Balance of Debt
House#	Stre	et Address	DATE DEBT INCURRED	\$
			[MM/DD/YYYY]	
City		State	. Zip	
Descripti	ion of Debt		(Code)	
Name of	CARNE			
House #		et Address -		Outstanding Balance of Debt
		2t/Address	DATE DEBT INGURRED [MM/DB/XYYY]	(\$
City				
		State:	Zip Code	
Description	ion of Debt		A STATE OF THE STA	18580vi
Name of	Creditor			Outstanding Balance of Debt
House #	Stre	et Address	DATE DEBT INGURRED	(\$)
			. [MM/BD/YYYY]	
City		State	Zip	
Descripti	on of Debt		Code	
		1		



Pennsylvania Department of State

Name of Filing Committee, Candidate, or Lobbyist

Printed Name

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

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.

lawin ni lihatata	ly, Server Beautic	eta da esta de la composición de la co			
Reporting Cycle	Name				7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
☐ Cycle 1	☐ Cycle 2	☐ Cycle 3		Cycle 4	☐ Cycle 5
6 th Tuesday	2 nd Friday	30 Day	1		2 nd Friday
Pre-Primary	Pre-Primary	Post Primary			Pre-Election
☐ Cycle 6	Cycle 7	☐ Cycle 8		☐ Cyc	ile 9
30 Day Post-Election	Annual Report	2 nd Friday Pre-Spec	al Election	30 Day Pos	st-Special Election
s submitted with a declare under per hat the accompar	nalty of perjury	under the law of	the Comr	nonwealth	
Dordin 1	Edult In bia	m		01/0	8/2025
Signature of Trea	surer, Čandidate	e, or Lobbyist	C	ate (DD/M	M/YYYY)
Gordon Rob	ert Imboden	۸.		Erie, PA	us

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

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

Printed Name

Date (DD/MM/YYYY)

Location (City/State/Country)