## Commonwealth of Pennsylvania - Campaign Finance Report

		(Note: T	his report mu	st be clear an	d legible. It sho	uld be typed	l)	
Filer Identificat Number	ion		Report Filed ( Mark X)	By Candid	ate	Committee	$ \nabla$	Lobbyist
Name of Filing Lobbyist		indidate or	Friends of Dec	onte for Erie	· ,			
Street Address			1158 East 29t	h Street				
City	Erie	***************************************	· 4	State	PA	Zip Code	16504	
Type of Report	(Place x under	report type)						<del></del>
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6th Tuesday	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
	X							
Date Of Election (MM/DD/YYYY		05/20/2025	Year	2025	Amendment Report		Termination Report	
Summary of Re Expenditures	ceipts and	From Date 2/19/2025	To Dat	e 5/5/2025		For	Office Use Only	3
A. Amount Bro	ught Forward F			0			THE STATE OF THE S	
B. Total Monet: (From Schedule	1.1.1.17 P. 1.1.1.1 P. 1.1.1.1.1.1.1	ons and Receipts	\$ \$	4933			A.	9
C. Total Funds A (Sum of Lines A	and B)		\$	4933				PM 12: 44
D. Total Expend (From Schedule	HI)			3522.72			A-	
E. Ending Cash (Subtract Line D F. Value of In-K	) from Line C) ind Contribution	ons Received	\$   \$	1410.28 0			antinos .	A A
(From Schedule G. Unpaid Debt (From Schedule	s and Obligatio	)ns	\$	0				
(From Schedule	(V)	시시 > 1번 취임하는 )		Affidavit Se	ction			
Part 1- If this is a	Committee repor	t, treasurer sign h	ere. If this is a Ca	ndidate report, ca	andidate sign here.	lge and helief to	ue, correct and comple	ato.
Sworn to and sub-	scribed before m		My comm Comm mber, Pen	nmonwealth c	Kai Tin	of Person Subm	itting report	
My Commission e	MO.	-3-27 DAY YR.	r 12 ciati	/vania Notary	814 Area Code	Printed Nam 74 ( Day		<u>er</u>
Part II- If this is a r I swear (or affirm) amended.	eport of a Candio that to the best	date's Authorized of my knowledge	and belied his po	litical sommittee	ere. has not violated any	y provisions of t	he Act of June 3, 1937	(P.L. <b>1333, NO.320)</b> as
Sworn to and subs			otaries	Seal	Jet!	eture of Candid	-	_
My Commission ex	Signature xpiresMO.	3-27 DAY YR.	<b>ブ .</b>	8	IL	Printed Name	32 - 4487 Ime Telephone Number	
	of Pennsylvania			-				

Erie County

My commission expires April 3, 2027

Commission number 1288912

Member, Pennsylvania Association of Notaries

#### **SCHEDULE I**

## **Contributions and Receipts**

**Detailed Summary Page** 

Filer Identification Number	
engen gantaning	 
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	
Total for the reporting period (1)	\$ 1613
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
Contributions Received from Political Committees (Part A)	\$ 0
All Other Contributions (Part B)	\$ 1875
Total for the reporting period (2)	\$ 1875
3. Contributions Over \$250.00 (From Part C and Part D)	
Contributions Received from Political Committees (Part C)	\$ 500
All Other Contributions (Part D)	\$ 945
Total for the reporting period (3)	\$ 1445
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	
Total for the reporting period (4)	\$ 0

4933

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)

#### 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.

					Amount
Full Name of Co	ntributing			Date [MM/DD/YYYY]	\$
Committee					
House #	Street Address			Date [MM/DD/YYYY]	\$
I IVUSE #	Jueet Address				
November 1			/		5 144 5 145
City		State	Zip Code	Date [MM/DD/YYYY]	\$
NATA A Kabupatèn					
Full Name of Co	ntributing	<u></u>		Date [MM/DD/YYYY]	S:
Committee					
House #	Street Address		<del></del>	Date [MM/DD/YYYY]	\$
			/		
		- Line at 1	/ / / / / / / / / / / / / / / / / / /	Table Brandston Warner	i e
City		State	Zip/Code	Date [MM/DD/YYYY]	\$   
		<b>\$3.5</b>			
Full Name of Co	ntributing		/ \	Date [MM/DD/YYYY]	\$
Committee					
House #	Street Address		/	Date [MM/DD/YYYY]	\$
			/		
7444			/ New Address of the Company of the	man Is and Imm horner	(3/A)
City		State /	Zip Code	Date [MM/DD/YYYY]	<b>\$</b>
					A.D.
Full Name of Co	ntributing	/		Date [MM/DD/YYYY]	\$
Committee					2.54 2.52
House #	Street Address	/		Date [MM/DD/YYYY]	\$
		/		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
City	Prove the Syle (1975)	State	Zip Code	Date [MM/DD/YYYY]	\$
				Help of the Charles Country of Teath	
reliant		200 May 17 M	w <sub>1</sub> (4 0 ft g 4 ft)	"Data Inska Inn brand"	<u>ं</u>
Full Name of Co Committee	urunaduk			Date [MM/DD/YYYY]	\$
,					19.44 33.13
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	<u> </u>
**************************************		Julie	zih cons	nare figured nnV 1.1111	
				in the Paris of the Annual	
ull Name of Cor committee	ntributing			Date [MM/DD/YYYY]	\$
				NEW 22 22 22 22 22 22 22 22 22 22 22 22 22	
louse #	Street Address			Date [MM/DD/YYYY]	\$
ity		State	Zip Code	Date [MM/DD/YYYY]	\$
생활성 등 기계					
<b>4.4</b>				100 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

## 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:		

Full Name of Contri	hitae			Date [MM/DD/YYYY]	\$	
	Debra Thom	) SON		and the second s		100.00
tiones at				3/06/2023	d- a.≱a	\$ \$
House # 614	Street Address	/edgewood Dr		Date [MM/DD/YYYY]	\$	
			[0.2_2.00_00_00_000000000000000000000000	NAMES OF PERSONS ASSESSED FOR A STATE OF THE		
City Erie		State     PA	<b>Zip Code</b> 16505	Date [MM/DD/YYYY]	\$	
Full Name of Contril	nutor			Date [MM/DD/YYYY]	\$	
guess and Closery of	Heather Switz	ala		03/21/2025		200.00
House #	Street Address			Date [MM/DD/YYYY]	\$	
2939	\$450,000,000 March 10,000 March 1	uttle Ave.				
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie		PA	16504			
Full Name of Contril	outor	[26, 3796 MT (C)]	production and engineery	Date [MM/DD/YYYY]	\$	
	Marquelle Kn	ight		04/21/2025		200.00
House #	Street Address			Date [MM/DD/YYYY]	\$	
2621	44 (4-4-4-7) F V 2 (2-4-24) 3-7 (19) 60 (19) 2 (1	erman Street		to construence as a man or party a compound in the code Art 2011 30		
Gity		State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie		PA	16504	The same of the sa		
Full Name of Contrib	utor	Print & 100 27	[14.6 #07.000 #169 #10]	Date [MM/DD/YYYY]	\$	
	Markel Hali			04/11/2025		250.00
House #	Street Address			Date [MM/DD/YYYY]	\$	
1137	E	ast 25th Street		4/11/2025	12	250.00
City _		State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie		PA	16503		i zana	
Full Name of Contrib				Date [MM/DD/YYYY]	\$	400.00
na mengani pengenah di Salah Kabupatan Salah Salah	Daria Devlin			04/11/2025		100.00
House #	Street Address			Date [MM/DD/YYYY]	\$	
3848	S	tate Street			300	
City	1 10 July 10 J	State PA	<b>Zip Code</b> 16508	Date [MM/DD/YYYY]	\$	
Erie		FA	10306			
Full Name of Contrib	986 P (CR)			Date [MM/DD/YYYY]	\$	150.00
	Megan Honha	ırt		05/01/2025		100.00
House #	Street Address			Date [MM/DD/YYYY]	\$	
2328	E	astern Ave				
City	The making promoting a street of	State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie		PA	16510			

#### 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.)

lentification Number:		 		

	<del></del>				
Full Name of Contributor			Date [MM/DD/YYYY]	S	
Filipi Partner	snip		04/30/2025		100
House # Street Address		<del>*************************************</del>	Date [MM/DD/YYYY]	\$	
519	West 9th Street				
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie	PA	16502			
Full Name of Contributor			Date [MM/DD/YYYY]	\$	
Susana Faul	ker		04/30/2025		100
House # Street Address			Date [MM/DD/YYYY]	\$	
[68:51280.08952.45] [0.46:52552.55.55.55.55.55.55.55.55.55.55.55.5	State Street		N 100764 380 7 10 100 9 2 V 55/0073/7000/100 370 100 100 100 100 100 100 100 100 100 1		
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie	PA PA	16501			
Full Name of Contributor	\$45650555485	wateren (17.4064047 June 1886)	Date [MM/DD/YYYY]	\$	
Pearl Jeffries	s-Steele	·	0/03/2025		75
House #			Date [MM/DD/YYYY]	\$	
Diser Audress	Davison Ave			ere di Asia di	
		for a contact of			
City Erie	State PA	Zip Code 16504	Date [MM/DD/YYYY]	\$	
Full Name of Contributor			Date [MM/DD/YYYY]	\$	
Drew Whiting	}		2/26/2025		250
House # Street Address			Date [MM/DD/YYYY]	\$	
417 s	State Street				
City _	State	Zip Code	Date [MM/DD/YYYY]	\$	-
Erie	Pa	16501			
Full Name of Contributor			Date [MM/DD/YYYY]	\$	
Marcus Pack	∍y		4/26/2025		100
House # Street Address			Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie	PA	16502			
Full Name of Contributor	FT (2008) - 1-20 MT	P waster to the control of the	Date [MM/DD/YYYY]	\$	
			The plane of the term production and the plane of the pla		
House # Street Address			Date [MM/DD/YYYY]	\$	
oriouse n Street Address			odre fixial polititis		
	In the Research				
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
4884 A C C C C C C C C C C C C C C C C C C					

#### 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	ń Number:					
	Stone Let type 1,7 = 10 minute.			Be-1800100 or a part was a re-	Mac <b>a</b> F	AT
Full Name of Contributing Co	ommittee Erie Fire Figl	jhters PAC		Date [MM/DD/YYYY] 4/21/2025	\$	500.00
House#	Street Address			4/21/2025  Date [MM/DD/YYYY]	\$	<u>-</u>
	自己使用的 医大性切迹的动脉	PO BOX 3576		(2015年7月2日 - 新子がからないのであっている。P ± 1122		
City Erie		State PA	<b>Zip Code</b> 16506	Date [MM/DD/YYYY]	\$	
Full Name of				Date [MM/DD/YYYY]		
Full Name of Contributing Co	ımmittee			Date [wivi/ DD/17.1]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	7in Codo	Date [MM/DD/YYYY]	\$	
		State	Zip Code	Date linin/PD/11111	,	
Full Name of Contributing Co	mmittee	1 pm mg .u.	Paragraphic	Date [MM/DD/YYYY]	\$*	
House#	Street Address			Date [MM/DD/YYYY]	\$	
City	<u> </u>	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of				Date [MM/DD/YYYY]	\$	
Contributing Co	mmittee			Date Initia Dollary		
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Co	mmittee		[303:454:666:2000]	Date [MM/DD/YYYY]	\$	
House#	Street Address			Date [MM/DD/YYYY]	\$	
City	<u>                                   </u>	State	Zip Code	Date [MM/DD/YYYY]	\$	<del></del>
Full Name of		166 / 167 (17 mm)	[4] 高兴的 特别和 (4) (4)	Date [MM/DD/YYYY]	\$	
Contributing Cor	galleria, est				1 2 8	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City	[0000000000000000000000000000000000000	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 Num	ber:		-		
Full Name of Contribu	ator Marquelle	I/-i-bt		Date [MM/DD/YYYY]	300
	warquelle	Knight		03/24/2025	300 3
House #	Street Address			Date [MM/DD/YYYY] \$	
2621		German Street			
City	<u>                                      </u>	State	Zip Code	Date [MM/DD/YYYY] \$	
Erie		PA	16504		
Employer Name		Erie Insurance		Occupation IT Supervisor	
Employer Mailing Add Principal Place of Busi		100 Erie Insurance F	Pl. Erie PA 16503		
Full Name of Contribu	itor			Date [MM/DD/YYYY] \$	
	Drew Whit	ing		04/23/2025	645
House #	Street Address			Date [MM/DD/YYYY] \$	
417		State St			
City		State	Zip Code	Date [MM/DD/YYYY] \$	73 147 143
Erie		PA	16501		
Employer Name		Erie Downtown Deve	elopment Corporation	Occupation CEO	2::i
Employer Mailing Add Principal Place of Busi		417 State St. Erie PA	A 16501		
Full Name of Contribu	tor	•		Date [MM/DD/YYYY] \$	(数 (数)
House #	Street Address			Date [MM/DD/YYYY] \$	
City	888 F 688 Q 280	State	Zip Code	Date [MM/DD/YYYY] \$	
		Julie	Zip code	Date [Mini/DD/]-111]	
Employer Name				Occupation	<u> </u>
Employer Mailing Add Principal Place of Busi				м.	
Full Name of Contribu	Contraction of the contract of the			Date [MM/DD/YYYY] \$	À
ege an er dan er er er er er er. Zan ege er					
House #	Street Address			Date [MM/DD/YYYY] \$	<u> </u>
	- I - S - G - G - G - G - G - G - G - G - G				
Gity		State	Zip Code	Date [MM/DD/YYYY] \$	함 -
				And the control of th	/ 2
Employer Name		Line sweet NO.	[8,47(3)] 17 39 30 464 43	Occupation	
Employer Mailing Add	ress /				

**Principal Place of Business** 

#### **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.

Filer Identification Nun	ber
Full Name	
House A	Street Address
City	State Zip Date [MM/DD/YYYY] \$ Code
Receipt Description	
Full Name	
House #	Street Address
City	State Zip Date [MM/DD/YYYY] \$
Receipt Description	
Full Name	
House #	Street Address
City	State Zip Date [MM/DD/YYYY] \$ Code
Receipt Description	
Full Name	
House #	Street Address
City	State Zip Date [MM/DD/YYYY] \$
Receipt Description	
Full Name	
House #	Street Address
City	State Zip Date [MM/DD)YYYY] \$ Code
Receipt Description	
Full Name	
House #	Street Address
City	State Zip Date [MM/DD/YYYY] \$ Code
Receipt Description	

#### SCHEDULE II

#### IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

Filer Identification Number:	
UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$5	Ø00 OR LESS PER CONTRIBUTOR
TOTAL for the reporting period (1)	\$
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.	(00 (FROM PART F)
TOTAL for the reporting period (2)	\$
3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM	VI PART G)
TOTAL for the reporting period (3)	\$
	<u> </u>
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report over Page; Item F)	\$

### SCHEDULE II

#### PART F

### **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

Filer Identification Numbe	ar:				
Full Name of Contribut	or	· · · · · · · · · · · · · · · · · · ·		Date [MM/DD/YYYY]	\$
House #	Street Address	-	Andrew 1971 - 19	Date [MM/DD/YYYY]	\$
		Long.co.pg	The company of the second of t	V V V V V V V V V V V V V V V V V V V	
City	`	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribu	ution			<u>K</u>	
Fuli Name of Contribute	Commission of the			Date [MM/DD/YYYY]	
PUII Nations of Community				Date Inim/MM	
House #   S	Street Address			Date [MM/DD/YYYY]	
	Trees August				
City		State	Zip Code	Date [MM/DD/YYYY]	
	7			TOTAL A SECURITY OF THE SECURI	
Description of Contribu	ition	AND SACRON FRANCE	Basella contractor and		22231
Full Name of Contribute	or	<u></u>	/	Date [MM/DD/YYYY]	<b>S</b>
		/	\ '		
House # S	Street Address			Date [MM/DD/YYYY]	<b>S</b>
			·		
City		State	Zip Code	Data [MM/DD/YYYY]	<b>.</b>
Description of Contribu	ition	<del>                                     </del>			
Full Name of Contributo		/		Date [MM/DD/YYYY]	Poolster(
FUII Name or condition.	<b>"</b> /		ļ	Date Issue/CD/1919.13	\$
House# s	Street Address			Date [MM/DD/YYYY]	<b>\$</b>
	Treet Aduress		ļ		
City	The Following was	State	Zip Code	Date [MM/DD/YYYY]	<b>\$</b>
Description of Contribu	ujezak ir dyelen ( 32°				
Full Name of Contributo	or .			Date [MM/DD/YYYY]	\$
House # S	Street Address			Date [MM/DD/YYYY]	
		<u> </u>	Traine to the second of		
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribut	tion			E	

## SCHEDULE II

#### Part G

## **In-Kind Contributions Received**

**VALUE OVER \$250** 

Filer Identification Number:		
FREE NUCHERABRION (MAINTEL		
ESSENCE ASSESSED AND AND ASSESSED ASSES		
Full Name of Contributor		Date [MM/DD/YYYY] \$
House # Street Ad	[제품: [18]	Date [MM/DD/YYYY] \$
City	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address / Prin	cipal	Description
Place of Business		of Contribution
Full Name of Contributor		Date [MM/DD/YYYY] \$
House # Street Add	Iress	Date [MM/DD/YYYY] \$
	X	
City	State Zip Sode	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address / Prin Place of Business	cipal	Description of Contribution
Full Name of Contributor	an and a marks	Date [MM/DD/YYYY] \$
	/	
House # Street Add	iress	Date [MM/DD/YYYY] \$
City	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address / Prin Place of Business	cipal	Description of
		Contribution
Full Name of Contributor		Date [MM/DD/YYYY] \$
House # Street Add	ress	Date [MM/DD/YYYY] \$
	State Zip Code	Date [MM/DD/YYYY] \$
City	State 24 Cute	Date (WW)/DD/(TTT)
Employer Name		Occupation
Employer Mailing Address / Prin- Place of Business	cipal	Description of

# Statement of Expenditures

Filer Identification Number:			·	•	

To Whom Paid		10 11		Date [MM/DD/YYYY		
AMERICAN STREET	Desantis Signs and	d Graphics		4/18/2025	365.17	
House # 540	Street Address West 18th St			Description of Expenditure		
City Erie		State PA	Campaign Yard Signs			
To Whom Paid	Desantis Signs and	d Graphics		Date [MM/DD/YYYY] 4/28/2025	<b>\$</b> 158.51	
House # 540	Street Address	West 18th Street	<del>,</del>	Description of Expen	diture	
City Erie		State PA	Zip Code 16502	Campaign Badges		
To Whom Paid		MO0454. (MASS)	[(Page 248)   Page 249   Page 249	Date [MM/DD/YYYY]		
	Desantis Sign and	Graphics		4/14/2025	77.14	
House # 540	Street Address	Vest 18th Street		Description of Expend	diture	
<b>City</b> Erie		State PA	Zip Code 16502	Campaign Handouts		
To Whom Paid	Desantis Signs and	d Graphics		Date [MM/DD/YYYY] 5/22/2025	<b>\$</b> 591.52	
House # 540	Street Address V	Vest 18th Street		Description of Expend	diture	
City Erie		State PA	Campaign Yard Signs and Buttons			
To Whom Paid	Who's Hungry? By	Jahuan Jones		Date [MM/DD/YYYY] 04/11/2025	\$ 155.00	
House # 716	Street Address	Vest 26th		Description of Expend	liture	
City Erie		State PA	Zip Code 16508			
To Whom Paid	Dotigan Clothing C	:0		Date [MM/DD/YYYY] 4/12/2025	<b>\$</b> 225.00	
House # 1150	Street Address V	Vest 26th		Description of Expenditure		
City Erie	Lauren   2 maneter de metate 27	State PA	Zip Code 16508	T shirt Deposit		
To Whom Paid	Sams Club			Date [MM/DD/YYYY] 4/19/2025	<b>5</b> 76.23	
House # 7200	Street Address	Peach Street	<del></del>	Description of Expend	liture	
City Erie	rie State PA Zip Code 16509			Food for Volunteer Mee	ting	
To Whom Paid	Giant Eagle	to desirance of	Law mark the Co.	Date [MM/DD/YYYY] 4/19/2025	\$ 39.21	
House # 2067	Street Address Interchange Rd			Description of Expenditure		
City Erie	[14] [15] [15] [15] [15] [15] [15] [15] [15	State PA	Zip Code 16509	Food for Volunteer Mee	ting	

# Statement of Expenditures

Filer Identification Number:	 	 
i her idelicitedtion rannider.		
sale of all the extreme bullets and a first see a beginning		 

To Whom Paid					Date [MM/DD/YYYY] \$	
	Dotigan Clothing (	30			4/24/2025	645
House # 1150	Street Address	West 26th			Description of Expenditure	and the second s
City Erie		State	PA	Zip Code 16508	Campaign T shirts	
To Whom Paid		1 1104 00 1000	:21.,	Commission of the Commission o	Date [MM/DD/YYYY] \$	
	Dotigan Clothing C	0			4/30/2024	230
<b>House #</b> 1150	Street Address \	Nest 26th			Description of Expenditure	
City Erie		State	PA	Zip Code 16508	Campaign T Shirts	
To Whom Paid	Northwest Savings	Rank			Date [MM/DD/YYYY] \$	······································
A Property Comments					3/3/2025	
House # 850	Street Address	ittsburgh A	ve		Description of Expenditure	
City Erie	(Assets as a self-constant)	State	PA	Zip Code 16505	Campaign Checks	<u> </u>
To Whom Paid	***	In the control and		hage on a Managerer	Date [MM/DD/YYYY] \$	
	Northwest Savings	Bank			3/31/2025	5
House # 850	Street Address	ittsburgh A	ve		Description of Expenditure	
City Erie		State	PA	Zip Code 16505	Paper Statement Fee	
To Whom Paid	Northwest Savings	Bank			Date [MM/DD/YYYY] \$ 5 4/30/2025	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
House # 850	Street Address	ittsburgh	<u>.</u>	,	Description of Expenditure	
City Erie	The second of th	State	PA	Zip Code 16505	Paper Statement Fee	(1999)
To Whom Paid	Sacred Heart Ushe	r's Society			Date [MM/DD/YYYY] \$ 4/16/2025	<del>24</del> 404.00
House # 716	Street Address W	est 26th St	t		Description of Expenditure	
City Erie		State	PA	Zip Code 16508	Campiagn Fundraiser Venue +	Ŋ
To Whom Paid	Desantis Signs and	Graphics			Date [MM/DD/YYYY] \$	0-4-
jung a syr a sa		Grapinos			3/17/2025	65.17
House # 540	Street Address V	Vest 18th			Description of Expenditure	
City Erie		State	PA .	Zip Code 16502	Campaign Yard Signs	
To Whom Paid	Desantis Signs and	Graphics	-		Date [MM/DD/YYYY] \$ 64 4/14/2025	8.90
House # 540	Street Address	/est 18th			Description of Expenditure	
City Erie		State	PA	Zip Code 16502	Campaign Handouts	<u> Parani Pril Tee ten maay Sistem (1918-19</u> 2

# Statement of Expenditures

Filer	Identification Number:		
200	Street and the second of the s		

To Whom Paid				Date [MM/DD/YYYY] \$		
Desantis Signs and Graphics				4/12/2025		
<b>House #</b> 540	se # 540 Street Address West 18th Street			Description of Expenditure		
City Erie		State PA	Zip Code 16502	Deposit for Campaign Item Order		
To Whom Paid				Date [MM/DD/YYYY] \$		
House #	Annual Control	<del>~~</del>		Description of Expenditure		
nouse #	Street Address			Description of Expenditure		
City	Jan Anna Landan	State	Zip Code			
To Whom Paid				Date [MM/DD/YYYY] \$		
House#	Street Address			Description of Expenditure		
City		State	Zip Code			
To Whom Paid			Sign decompositions	Date [MM/DD/YYYY] \$		
House #	Street Address		the growth and approximate the test of the	Description of Expenditure		
City		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		
City		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		
City	and the second s	State	Zip Code			

#### 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 Identification	n Number:		
Name of Credito	or		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
City		State Zip Code	
Description of D	Jebt	[100000 Magnet]   1000000000 4	18994
Name of Credito	or		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State Zip Code	
Description of D	)ebt:		
Name of Credito	or /		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	<b>. . . . . . . . . .</b>
City		State Zip Code	
Description of D	sebt		
Name of Credito	or		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	5
City		State Zip Code	
Description of D	/ebt	<del></del>	
Name of Credito	or		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$
City	I constant	State Zip Code	
Description of D	iebt	TO the account and the property of the second	and the state of t
Name of Credito	or		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	•
City		State Zip Code	
Description of D	/ebt		