## Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	Report Filed B ( Mark X)	y Candidate	Committee	Lobbyist
Name of Filing Committee, Candidate o Lobbyist	Frice	ids to E	lect Brent	DAVIS
Street Address	609			
City En	15	State P	Zin Codo	14509
Type of Report (Place x under report typ	e)			***************************************
1-6 <sup>th</sup> Tuesday 2- 2 <sup>nd</sup> Friday 3-30 Da	y Post 4-6th Tuesday	5- 2 <sup>nd</sup> Friday 6- 30 Da	y Post 7- Annual Sp	ecial 2 <sup>nd</sup> Friday   Special 30 Day
Pre-Primary Pre-Primary Primary		Pre-Election Election	and the second of the second o	e-Election Post-Election
Date Of Election (MM/DD/YYYY)	Year	Amend Report		ermination port
Summary of Receipts and From Da	ate To Date		For Offi	ce Use Only
		12022		
A. Amount Brought Forward From Last	Report \$	498.25		70 <b>20</b>
B. Total Monetary Contributions and Re (From Schedule I)	eceipts \$ 9	955.67		
C. Total Funds Available	s			111.
(Sum of Lines A and B)		453.92		ف
D. Total Expenditures (From Schedule III)	\$ 7	55728		
E. Ending Cash Balance	\$ <b>\(\alpha\)</b>	957.28 596. 64		
(Subtract Line D from Line C)	<u> </u>	596.64		printer printers printers printers
F. Value of In-Kind Contributions Receiv (From Schedule II)	red \$			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ <b>U</b> U .	700.00		•
Attorn scriedule 141		Affidavit Section		
Part 1- If this is a <b>Committee</b> report, treasure		didate report, candidate si		
I swear (or affirm) that this report, including t	the attached schedules or	paper, is to the best of my	knowledge and belief true,	correct and complete.
Sworn to and subscribed before me this			Al 1	•
day of20	<u> </u>			g ropert
		$\underline{\hspace{1cm}}$	ignature of Person Submittin	eg report
Signature			Printed Name	<del></del>
My Commission expires	•	(814)	(814)	460-5806
MO. DAY	YR.	Area Code	Daytim	e Telephone Number
Part II- If this is a report of a Candidate's Auti	horized Committee, cand	idate shall sign here.		
I swear (or affirm) that to the best of my know		<del>-</del>	plated any provisions of the A	Act of June 3, 1937 (P.L. 1333, NO.320) as
amended.			/	า
Sworn to and subscribed before me this		///		<i>)</i> .
day of20				
	.	B	Signature of Candidate	DAVIS
Signature	. 1	,-	Printed Name	~
My Commission expires		814	969	- 1215
MO. DAY	YR.	Area Ćode	Daytime	Teiephone Number

### 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.

Full Name of Con	or " made and a first the substitution of the first				Amount
(2) 「砂砂川道」となる。のないは、ないからない。	ntributing			Date [MM/DD/YYYY] S	
Committee					
House #	Street Address			Date [MM/DD/YYYY] \$	
		Salph Desire in care	(Alleger of March and Alleger	6.73 (6.23 (6.23)	
City		State	Zip Code	Date [MM/DD/YYYY] S	
Full Name of Con	stributing	pare 無關係的語	- 20.86年17日本福祉的基本	Date [MM/DD/YYYY] \$	
Committee					
House #	Street Address			Date [MM/DD/YYYY] \$	
Property of the second		graphs and	Transcript Co.		
City		State	Zip Code	Date [MM/DD/YYYY] S	
Full Name of Con	itributing	1800年代最大國	1. 是我的的现在分词的第三人称单	Date [MM/DD/YYYY] \$	
Committee					
House #	Street Address			Date [MM/DD/YYYY] \$	· · · · · · · · · · · · · · · · · · ·
		July 200 to the co	Popular Control of the Control of th		
City .		State	Zip Code	Date [MM/DD/YYYY] S	
Full Name of Con	itributing		125年代第四次的	Date [MM/DD/YYYY] \$	
Committee					
House #	Street Address			Date [MM/DD/YYYY] \$	
City	4 46 2	State	Zip Code	Date [MM/DD/YYYY] \$	
			X		
Full Name of Con	itributing	ा संस्थानका निर्देशके विकास	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Date [MM/DD/YYYY] S.	
Committee					
House #	Street Address			Date [MM/DD/YYYY] 3 5	
Car sel		A PROPERTY OF THE	Spinger and the state of		
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Con	ntributing	page subsective	1947年,中央教授中国公路之上等等	Date [MM/DD/YYYY] S	
Committee	表 (17 19 19 19 19 19 19 19 19 19 19 19 19 19			1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
House #	Street Address			Date [MM/DD/YYYY] \$	1
City		State	Zip Code	Date [MM/DD/YYYY] \$	
		Julia	Sip Code	Sate (MINI) SD/11/11] S	

### 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 (dentification Number:				
Full Name of Contributor Pani	iel Ia	nifiak	*Date [MM//DD/YYYY)] *	200.00
House'# Street Address	oliver	Rd.	Date [MM/DD/YYYY]	
	State 10A	Zip Gode 145		
{Full-Name of Contributor			Date [MM/DD/XYYY]	
House# Street Address			Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/XYYY]	
Full:Name: of Contributor			Date[MM/DD/YYYY]	
House # Street Address			Date [MM/DD/YYYY]	
GIV	State	Zip Code	Date [MM/DD/XYXX]	
Full Name: of Gontributors	put promiser and products.	Proceeding National Solids of Management	Date [MM/DD/XXYX]	
House# Street Address			Date [MM/DD/YYYY]	
<b>XCITY</b>	State	Zip Gode	Date [MM/DD/YYYY]	
*FülliNäme:öf-Gontributor-			Date (MM//DD/YYYY)	
House # Street Address			Date [MM/DD/YYYY]	
City	State	Zip Gode	Date [MM/DD/YYYY]	
Full Name of Gontributor			Date [MM/DD/YYYY]	
House # Street Address			Date [MIM/DD/YYYY]	
Gify	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:			
Hiler Identification Number:			

Full Name of Contributor	<b>表现</b>	Date [MM/DD/YYYY] \$	M (1942), 185
#House## St	Jeffrey Bevacqua	01 13 2072 Date [MM/DD/YYYY] 35	100.00
528	Bachel Ct.	potertonov.cov.minia	
City EYIE	State PA Zip Code 14509	Date [MM/DD/YYYY] S	The Age of the Control of the Contro
Full Name of Contributor	584	Date [MM/DD/YYYY] \$	
Taxaring 1	Sheila Fitzgerald-Starrett		100.00
House# 5718 st	reet Address Country side Dr.	Date [MM/DD/YYYY] \$	
GIV! GIE	State PH Zip Gode 1 16-11	(Date [MM/DD/YYYYY])S	
Eull Name of Contributor		Date [MM/DD/YYYY] \$	
The second secon	Tab SWIFT	01/25/2072 Date:[MM/DD/YYYY] \$	100.00
House# 9	reet Address  Warket St.  State Zip: Gode		
city Union (		Date [MM/DD/YYYY] S	
Full Name of Contributor		Date [MM/DD/YYYY] > S	26
	Kathryn Thomas	01/25/2022	100.00
House #	Market St.	_Date[MM/DD/yyyyy] \$	
city Union (	City State PA LID Code 16438	Date   MM/DD/YYYYY   S	
Full Name of Contributor		Date [MM/DD/YYYY] = \$	N. T. V.
	Steven + Angela Rinn	01/25/2022	250.00
521	Seminale Dr.	Date [MM/DD/YYYY] S	
Giry Erie	State PA Zip Code 16505	Date [MM/DD/YYYY] S	
Full Name of Contributor		Date [MM/DD/YYYY] S	
the second	Harold Bender		100.00
House # SSI	reet Address Old Mill Rd	Date [MM/DD/YYYY] S	
GIEV GIE	State PA Zip Code U4SOS	Date [MM/DD/YYYY] \$	A STATE OF THE STA

## SCHEDULE I

## **Contributions and Receipts**

**Detailed Summary Page** 

Filer Identification Number		
[발문장 시청 전 문제가 100명 함		
<u> 18 14 - 19 14 15 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16 </u>	 	

1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	
Total for the reporting period (1)	\$
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)	\$ 950.00
Total for the reporting period (2)	\$ 950.00 950.00
3. Contributions Over \$250.00 (From Part C and Part D)	
Contributions Received from Political Committees (Part C)	\$ 2500.00
All Other Contributions (Part D)	\$ 2500.00 3000.00
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)	\$ 500.00
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)	\$

### 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;		
Full Name of Contributing Committee ERIE INS. PAC	Date [MM/DD/YYYY] S	2500.00
House# Street Address 100 Egie Insurance PL	Date [MM/DD/YYYY] &	
City State Zip Gode PA 16530	Date [MM/DD/YYYY] S	1. ((((((((((((((((((((((((((((((((((((
Full Name of Contributing Committee	Date [MM/DD/YYYY]   S.	This for the same of the same
House ## Street Address	;Date [MM/DD/YYYYY] \$5	MANAGEMENT OF THE PROPERTY OF
Gity State Zip Code	Date [MM/DD/YYYY] S	S Management states on
Full Name of Contributing Committee	Date [MM/DD/AYYY] - S	Since the same of
House## Street Address	Date [MIM/DD/YYYY] S	A CANADA
City State Zip Code	Date [MM/DD/YYYY] S	SETTING TO SET THE SET
Full Name of Contributing Committee :	Date [MM/DD/XYYY] \$	To the state of th
House# Street Address	Date [MM/DD/YYYY]	AND ALTERNATIVE AND ALTERNATIV
City, Zip Code	Date [MM/DD/YYYY] \$	SALES TO SAL
Full Name of . Contributing Committee	Date [MM/DD/YYYY] 3 PS	
House # Street Address	Date [MM/DD/YYYY] S	
City State Zip Code	Date [MM/DD/YYYY] 85	
Full Name of Contributing Committee	Date [MM/DD/XYYY] \$	A STATE OF THE STA
House'#/ Street Address	Date [MM/DD/YYYY] 5	
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:		,
Full Name of Contributor		Date [MM/DD/WYY]
	Debra Uht	01/25/2022 2000.00
House# Street Addre		Date[MM/DD/YYYY] \$
4510	Commodore Dr.	
Gify EriE	State PA Zip Code 16505	SDate [MM/DD/YYYY] \$
Employer Name	Professional Comm.	Occupation
Employer Mailing Address / Principal Place of Business		
FulliName of Contributor		Date [MM/DD/YYYY] \$
	Sumi James-Black	01/25/2022 500.00
Street Addre		Date:[MM/DD/YYYY] \$
23/46/00/46/10/2016 23/46/00/46/10/2016/2016/2016/2016/2016/2016/2016/	Niagara Pt	#Date  MM/DD/YYYY   \$
ENE	PA IUSOT	The state of the s
Employer Name	Gene Management Grp.	Occupation Se IF
Employer Mailing/Address// Principal Place of Business		
Full Name of Contributor		Date (MIM/DD/XYYY) \$
	John Persinger	01/04/2023 500.00
House # Street Addre	Frontier Dr.	Date [MM/DD/YYYY]
Giry. ERIE	State PA Zipicode 16501	Date [MM/DD/YYYY] 5:
Employer Name	EDDC	Occupation
Employer Mailing Address / Principal Place of Business	10 E. 5th St. EnE	PA 16507
Full Name of Contributor	000001	Date [MM/DD/YYYY] \$
House # Street Addre	SS	Date [MM/DD/YYYY] \$
City	State Zip Code	Date [MM/DD/YYYY] \$3.
Employer Name	NAME OF THE PROPERTY OF THE PR	が発展しています。 ・
EMPLOYER NAME		Occupation

Employer Mailing Address / Principal Place of Business

# 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:

Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Str	eet Address		Date [MM/DD/YYYY] \$	-
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name			Occupation	
Employer Mailing Addres Principal Place of Busines				
Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Str	eet Address	,	Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name			Occupation	
Employer Mailing Addres Principal Place of Busines				
Full Name of Contributor			Date [MM/DD/YYYY] \$	
	eet Address		Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name			Occupation	
Employer Mailing Addres Principal Place of Busines			<u> </u>	
Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Str	eet Address		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Daté [MM/DD/YYYY] \$	
Employer Name			Occupation	
Employer Mailing Addres Principal Place of Busines		·	<u> </u>	

### 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: ;	· · · · · · · · · · · · · · · · · · ·		
1. 'UNITEMIZED IN KIND CONTRIBUTIO	NS RECEIVED-VALUE OF \$50	0.00 O	RLESS PER CONTRIBUTOR 1
TOTAL for the reporting period	(1)	\$	6
27 JIN-KIND CONTRIBUTIONS RECEIVED		.00 (FR	(OM PARTIF)
TOTAL for the reporting period	(2)	\$	0
3) IN-KIND CONTRIBUTION:RECEIVED.		Л PAR	
TOTAL for the reporting period	(3)	\$	0
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DU PERIOD (Add and enter amount totals from bo on Page 1, Report Cover Page, Item F)		\$	0

### SCHEDULE II PART F

## **In-Kind Contributions Received**

	V	ALUE OF \$50.01 TO \$250		
Filer (dentification Number				
Full Name of Contributors			Date [MM/DD/YYYY] (\$)	
House # Street Address			Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Description of Contribution		VCSASBERRA		
Full Name of Contributor			Date [MM/DD/YYYY] \$	
	-			
Höuse # Street Address			Date [MM//DD/YYYY] 35	
Gity.	State	Zip Code	Date (MM/DD/MYY) \$	
Description of Contribution	A CONTRACTOR OF THE CONTRACTOR	自然は対から記載内が対象が必要が入び20年以	[1667:392]	
Full Name of Contributor	NO I		Date [MM/DD/YYYY].	
House # Street Address			Date [MIN//DD//YY/Y/] \$5	
City.	State	Zip Code	Date MM/DD/XXXVI \$5	
			*Date [MM/DD/YYYY]	
Description of Contribution				
Full Name of Contributor.			Date [MM/DD/AY/Y/] \$	
House # Street Address			Date (MM/DD/XYYYY)	
Gity	State	Zip Code	Date [MM/DD/YYYY]] \$5	
Description of Contribution	TOO CANADA CONTROL OF CO.	Towns Townshipmon at the Vind States Are (	Towns I	
Full Name of Contributor	#2]		Date [MW/DD/YYYY] \$	
House # Street Address			Date [MM/DD/YYYYI] \$	
City.	State	Zip Code	Date [MM/DD/YYYY]	
Description of Contribution			1,0000	

## SCHEDULE II Part G

## **In-Kind Contributions Received**

VALUE OVER \$250

File Identification Number:				

Full-Name of Contributor	2002	COLUMN CORPORADO SER, AMERICAN CONTRACTOR STATE	\$
House:# Street Address		The second position (recently in the second to the second	\$
	<u> </u>		\$ 1
Employer Name		Occupation	
Employer Mailing Address / Principal Place of Business		Description of Contribution	
Full Name of Contributor		Date [MM/DD/YYYY]	\$
#House:# Street:Address			\$
			S.
Employer Name		Occupation	
Employer Mailing Address / Principal Place of Business		Description of Contribution	
FUII Name of Contributor.	423	Date [MM//DD/YYYYY]	\$
House:#. Street Address		CONTROL OF THE PROPERTY OF T	\$
		The state of the s	\$
Employer Name		Occupation .	
Employer Mailing Address // Principal Rlace of Business		Description of Contribution	
Full Name of Contributor.			\$
House:# Street Address	750	ementals for executive and an emergence of the secular control of th	
			\$
Employer Name		Occupation	
Employer Mailing Address.//Principal Place of Business		Description  of  Contribution	

## SCHEDULE III

## **Statement of Expenditures**

Filer Identification Number:

Bay front Convention Center	Date [MM/DD/YYYY] \$ \$ 0/ /ω/2022 /00.00
Street Address Sassafras Pice	Description of Expenditure
Egie PA Code 16507	deposit
Bay Front Convention Center	Date [MM/DD/YYYY] \$ 1702./8
HOUSE # Street Midross	Description of Expenditure
Gity Egie State PA Code 16507	fundraiser expenses
To Whom Paid	Date [MM/DD/YYYY] \$ 550.60
Street Address West Helington Po	Description of Expenditure
Egie State PA Gode 16509	fundraiser band
Drew Deimel + Laura Uht	Date (MM/DD/YYYY) 5 01/13/2022 500.00
House:# 4334 Street Address Rrastwick Dr.	Description of Expenditure
Gity EVIE State PA Code /WOB	Return check - refund
TOWHOM Paid  Meter EZ	Date [MM/DD/MMY] S 5.10
Meter EZ	Date [MM/DD/YYYY] S 5. 10  Description of Expenditure
Meter EZ	Date [MM/DD/YYYY] S  O/ /27/202 5.10  Description of Expenditure  Staff Parking meters
Meter EZ  House# 25 Street Address East 10" ST 2" FL  Strate PA Code 16501  Townom Paid  Baldwin Brothers The.	Description of Expenditure  Staff Parking meters  Date [MM/DD/YYYY] \$ 141.28
Meter EZ  House# 25 Street Address East 10" ST 2" FL  Strate PA Code 16501  Townom Paid  Baldwin Brothers The.	OI /27/202 5.10 Description of Expenditure  Staff Parking meters
Meter EZ  House# 25 Street Address East 10# ST 240 FL  Gity Ease PA Gode 16501	Description of Expenditure  Staff Parking meters  Date [MM/DD/YYYY] \$ 141.28
House # 2546  Meter EZ  House # 25 Street Address East 10 5 7 2 40 FL  Strate PA Code 16501  Baldwin Brothers The.  Off ST 240 FL  Street Address PA Code 16501  Street Address Village Common De.	Description of Expenditure  Staff Parking Incturs  Date [MM]/DD/YYYY] \$  O2/10/2022 141.28  Description of Expenditure  Campaign Headquarts rent  Date [MM]/DD/YYYY] \$
Meter EZ  House# 25 Street Address East 10 5 2 20 Fl  Gity Ease PA Code 16501  Townord Baldwin Brothers The.  House# 2540 Street Address Village Common De.  Gity Ease PA Code 16506	Description of Expenditure  Staff Parking meters  Date [MINI/DD/YYYY] \$ 141.28  Description of Expenditure  Campaign Headqyarby rent
House# 2540 Street Address   East 10" ST 240 Fl  Gity   Ease   Street Address   PA   Coode   16501  House# 2540   Street Address   Village Common De.  Gity   Ease   PA   Coode   16506  To:Whom Paid	Description of Expenditure  Staff Parking meters  Date [MM/DD/YYYY] \$ 141.28  Description of Expenditure  Campaign Headquarts rent  Date [MM/DD/YYYY] \$ 5
Meter EZ  House # Street Address  Baldwin Brothers The.  House # Street Address  Village Common De.  City Faie  To Whom Paid  Street Address  Figure PA  Code 16506  To Whom Paid  Street Address  Street Address  Street Address  Street Address  Figure PA  Code 16506  To Whom Paid	Description of Expenditure  Staff Parking meters  Date [MM/DD/YYYY] \$ 141.28  Description of Expenditure  Campaign Headquarts rent  Date [MM/DD/YYYY] \$ 5
Meter EZ  Street Address  East 10 Strate  City  Ease  Baldwin Brothers The.  House's Street Address  Village Common De.  City  Ease  Street Address  State  PA  Code  ILOSOL  Street Address  State  City  Street Address  Street Address  State  City  Street Address  State  City  Street Address  State  City  Street Address  State  City  Street Address	Description of Expenditure  Staff Parking meters  Date (IMM/DD/WYYY) \$ 141.28  Description of Expenditure  Campaign Headquarbs rent  Date (IMM/DD/WYYY) \$ 25  Description of Expenditure

### 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 Number:

图 4 4 5 1 4 4 4	- 20-Versión (c.)	建筑等		***************************************		
Name of	E PER LES CONTROL	150 Jaki				Outstanding Balance of Penk
House #	7154114	150,000	Brenton Davis		DATE DESTINGURRED	S
use#	609	eure.	et Address East Gore Road		[MW/DD/WM]	
			Cast Gold Mode		03/02/2021	
City			Erie	State	PA Cords 16509	500.00
Déscripti	on of Debt		Loan		The state of the s	
Name of	Creditor					Ourstanding Balance of Debt
House #		<b>S</b>	Brenton Davis et Address		DATE DEBIGINGURRED	
	609		et: Address East Gore Road		[MM/DD/XXYY]	
	The second second second		r	%( <b>C)</b> == 025800	30/21/2021 7/p	-
City			Erie	State	Pa <b>Zip</b> 16509	5,500.00
Descripti	on of Debt		Loan			
Name of	Creditor		Brenton Davis		· · · · · · · · · · · · · · · · · · ·	Outstanding Balance of Debt
House#		Stra	et Address	<del> ' "</del>	DATE DEBT NEURRED	
	609		East Gore Road	Ĭ	IMM/CD/YYYY	
			1 0000 11000	S and the contraction of	05/10/2021	-
City			Erie	State	PA <b>Zin</b> 16509	700.00
Descript	ion of Debt		Loan	74.	· · · · · · · · · · · · · · · · · · ·	
	Creditor		Brenton Davis			Cinsunding Salance of Dan
House #	1	Stre	et Address		DATE DEBT NEURRED (MW/DD/AYYY)	
	609		East Gore Road	i	06/16/2021	
City			Erie	State	PA <b>Zip</b> 16509	10,000.00
Descript	ion of Debt		Loan	E-24-75-15 (ACC)	programme spirit (spirit Ma)	
Name of	Creditor		Brenton Davis	Normanaja orang mga asawa nja		vijsjanding islance of PRIV
House #		<b>5</b> 44	et Address		DATE DEBI NOURRED	<b>. . .</b>
	609		East Gore Road		[MM/DD/YYYY]	
City	Section of the Sectio		To the second se	State	09/29/2021 <b>Zip</b>	10 000 00
			Erie		PA <b>Code</b> 16509	18,000.00
Descript	ion of Debt		Loan			
Name of	Creditor		Brenton Davis			Outstanding Balance of Debi
House#	<b>:</b> I	Stre	et Alldress		DATE DEBT INCURRED	\$
original de la companya de la compan	609		East Gore Road		[MN/DD/Y0Y] 10/27/2021	
City			Erie	State	Zip 16500	10,600.00
Descript	ion of Debt		·		PA Code 16509	Regist 1
			Loan			÷

#### 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 filled to correct, add to, or in some way change a report that has already been filled.

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 Expenditures - 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.

### SCHEDULE I

### CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page - provides a summary of all monetary contributions and receipts during the reporting period.

Item 1: Unitemized Contributions and Receipts represents the total amount of contributions and receipts of \$50.00 or less in the aggregate *per contributor* received during the reporting period. Items 2, 3 and 4: Enter the total for each section from the corresponding schedules in the report (Part A, Part B, Part C, Part D and Part E).

Enter the total from Schedule I on the Report Cover Page, Item B.

Definition of Contribution: Any payment, gift, subscription, assessment, contract, payment for services, dues, loan, forbearance, advance or deposit of money or any valuable thing, to a candidate or political committee made for the purpose of influencing any election in this Commonwealth or for paying debts incurred by or for a candidate or committee before or after any election. "Contribution" shall also include the purchase of tickets for events such as dinners, luncheons, rallies and other fund-raising events; the granting of discounts or rebates by television and radio stations and newspapers not extended on an equal basis to all candidates for the same office; and any payments provided for the benefit of any candidate, including any payments for the services of any person serving as an agent of a candidate or committee by a person other than the candidate or committee or a person whose expenditures the candidate or committee must report under the act. The word "contribution" includes any receipt or use of anything of value received by a political committee from another political committee and also includes any return on investments by a political committee. (See 25 P.S. §3241)

### Instructions for Reporting Contributions

The aggregate total of contributions from an individual contributor within a reporting period determines which part of the report form should be used to disclose a contribution or receipt. The form is designed to list the dates and amounts of as many as three separate contributions from the same source in one line item.

Contributions and receipts of \$50 or less, per contributor, during the reporting period, need not be itemized on the report. The total amount of all unitemized contributions should appear on Schedule I, Contributions and Receipts Detailed Summary Page, Line 1. A record must be kept of the receipt dates of contributions and the names and addresses of each person from whom a contribution of over \$10 has been received.

Contributions and receipts over \$50 to \$250 - report the name of the contributor, mailing address, amount and date received on Schedule I, Part A, "Contributions Received from Political Committees," or Part B "All Other Contributions."

Contributions and receipts over \$250 - report the name of the contributor, mailing address, occupation, employer's name and address, amount and date received on Schedule I, Part C, "Contributions Received from Political Committees," or Part D, "All Other Contributions."

Receipts - Use Part E, "Other Receipts" to report all other monetary receipts or income; e.g. refunds received, interest income, returned checks and prior expenditures that were returned to the filer during the reporting period.

Address - In all Parts, a complete address, including zip code, must be provided. Space is provided for the Zip Code Plus Four. The State block should be completed with the U.S. Postal Service's standard two-letter abbreviation, such as PA for Pennsylvania.

Date - all date blocks in the report must be completed with eight digits. For instance, March 24, 2000 would appear as 03 24 2000.

**Total** - of each Part should be transferred to the appropriate section on the Schedule I, "Contributions and Receipts Detailed Summary Page" (Page 2 of the report form).

Occupation and Employer - Part D, which lists individuals who have contributed over \$250, also requires the occupation and name and address of the employer of the contributor. Report the principal place of business of any contributor who is self-employed.

#### 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 III

### EXPENDITURES

Definition of Expenditure: The payment, distribution, loan or advancement of money or any valuable thing by a candidate, political committee or other person for the purpose of influencing the outcome of an election; the payment, distribution, loan, advance or transfer of money or other valuable thing between or among political committees; the providing of a service or other valuable thing for the purpose of influencing the outcome of a nomination or election of any person to any public office to be voted for in this Commonwealth; or the payment or providing of money or other valuable thing by any person other than a candidate or political committee, to compensate any person for services rendered to a candidate or political committee. (See 25 P.S. §3241)

### Instructions for Reporting Expenditures

Pursuant to state law, the Statement of Expenditures requires the filer to report the purposes for which funds were expended, the name and address of the entity to whom the expenditure was made, and the amount and date of each expenditure.

Vouchers for all expenditures over \$25.00 must be retained by the candidate or committee treasurer and shall be available for public inspection or copying. Filers are not required to submit vouchers with reports; however, vouchers must be retained for a period of three years.

Transactions between a candidate and his/her committee should be recorded on both the candidate's and committee's reports. For example, if a candidate contributes to or loans the committee money, the amount should appear on the candidate's report as an expenditure and on the committee's report as a receipt. A loan must also be reported by the recipient on the Statement of Unpaid Debts (Schedule IV).

### **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.

#### REPORT FILING DEADLINES

Sixth Tuesday Pre-Election - Reporting period closes 50 days prior to election day. Filed only by candidates for Statewide office and political committees/lobbyists supporting such candidates.

**Second Friday Pre-Election** - Reporting period closes 15 days prior to election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Thirty Day Post-Election - Reporting period closes 20 days after election day. File 30 days after election day. Filed by all candidates for nomination or election and political committees/lobby/ists supporting such candidates.

Annual Report - Reporting period closes December 31. File by January 31 of the year following the reporting period. Filed by all candidates for nomination or election, political committees and contributing lobbyists.

Political committees required to file pre-election reports must also file post-election reports.

**Postmarks** - are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the U.S. Postal Service no later than the day prior to the filing deadline.

Late filing fee - A late filing fee of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the report is overdue, plus an additional fee of \$10.00 for the first six days that a report is overdue will be assessed.

### County Code Table:

### Party Code Table:

01	Adams	24	Elk	47	Montour	REP	Republican Party
02	Allegheny	25	Erie	48	Northampton	DEM	*
03	Armstrong	26		49	Northumberland		Democratic Party
04	Beaver		Fayette			CST	Constitutional Party
7 1		27	Franklin		Perry	LIB	Libertarian Party
05	Bedford	28	Forest	51	Philadelphia	REF	Reform Party
06	Berks	29	Fulton	52	Pike	OTH	Other
07	Blair	30	Greene		Potter		
08	Bradford	31	Huntingdon	54	Schuylkill	Office	Code Table:
09	Bucks	32	Indiana	55	Snyder		
10	Butler	33	Jefferson	56	Somerset	GOV	Governor
11	Cambria	34	Juniata	57	Sullivan	LTG	Lieutenant Governor
12	Cameron	35	Lackawanna	58	Susquehanna	ATT	Attorney General
13	Carbon	36	Lancaster	59	Tioga	AUD	Auditor General
14	Centre	37	Lawrence	60	Union	TRE	State Treasurer
15	Chester	38	Lebanon	61	Venango	SPM	Justice of the Supreme Court
16	Clarion	39	Lehigh	62	Warren	SPR	Judge of the Superior Court
17	Clearfield	40	Luzerne	63	Washington	CCJ	Judge of the Commonwealth Court
18	Clinton	41	Lycoming	64	Wayne	STS	Senator in the General Assembly
19	Columbia	42	McKean		Westmoreland	STH	Representative in the General
20	Crawford	43	Mercer	66	Wyoming		Assembly
21	Cumberland	44	Mifflin		York	CPJ	Judge of the Court of Common Pleas
22	Dauphin	45	Monroe			MCJ	Judge of the Municipal Court
23	Delaware	46	Montgomery			TCJ	Judge of the Traffic Court
_						OTH	Other (Candidates for local offices
							who file only with the County
							Board of Elections)
							postu di Electibitat