

Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible, it should be typed)

CALCANDA CONTRACTOR CO				riegible. It sho			
(antime)	1-5189653 (M	oort Filed By Jark XI	Candida	te	Committee	X	Lobbyist
Name of Filing Committee, Ca Lobbyist	ndidate or FRII	ENDS OF LIS	SA FERRICK		· · · · · · · · · · · · · · · · · · ·		umakastukin jali
Street Address	303	0 CLARK RO	AD			•	
City ERIE			State	PA	Zip Code .	16510	
Type of Report (Place x under					WALLES AND ANALYSIS STREET, WITH THE PARTY OF THE PARTY O	•	
i-6 th Tuesday 2-2 nd Friday Pre-Primary Pre-Primary			i- 2 nd Friday Pre- Election	6-30 Day Post Election		Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
Date Of Election (MM/Dib/YYYYY)	11/07/2023 Yea	r	2023	Amendment	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Termination	
Summary of Receipts and			2.02.0	Report:		Report	
Expenditures	From Date.	To Date	synthetial) Alleria		For Of	fice Use Only	e district side in The September 1
A. Amount Brought Forward I	11/28/2023	\$ 12/3	1/2023				
国事场的不可可靠的		350	00.15			<	2
B. Total Monetary Contribution (From Schedule I)			99.85				
C. Total Funds Available (Sum of Lines A and B)		600	00.00			2007 (2007) 2007 (2007) 2007	
D. Total Expenditures (From Schedule III)		\$ 600	00.00			472	음
E. Ending Cash Balance (Subtract Line D from Line C)	Shirth Court of the Court of th	\$	0			7 (1) mend	TO BES est oppu- ent oppu- ent oppu-
F. Value of In-Kind Contribution (From Schedule II)	ons Received	\$	0			and the second s	\ \\foats
G. Unpaid Debts and Obligation (From Schedule IV)	ons - de la trada de la como de l La como de la como de l	\$	0			مِدُ الْمُ	**************************************
		ie y	Affidavit Sec	tion			
Part 1- If this is a Committee report.	t, treasurer sign here. If including the attached s	this is accanding	page report, ca	ndidate sign here.	go and holiof true	spercet and comple	
I swear (or affirm) that this report, Sworn to and subscribed before m	e this	miss miss	2 6 13 CO CITE I	ilas.	ge and belief true	e, correct and comple	te.
30 day of Januar	Y 20 24	ion E					
audi R.	Water	ania	at so	Signature (ARON E. RILEY	of Person Submitt	ng report	
Signature	1-1	Erie County nexpires Dec sion number	of Pennsylvan Watson, Not		Printed Name	***************************************	_
wy commission expires	102/2026	M1 ''	3 5 -		460-60		
MO.	DAT YR.	155 e	PS A	rea Code	Daytin	ne Telephone Numbe	er
Part II- If this is a report of a Candid I swear (or affirm) that to the best amended.	date's Arthorized Comm of my knowledge and be	ites candida lief this Mittic	ফ্লি ফ্লিৰাl sign he al cঞ্জা mittee h	re. as not violated any	provisions of the	Act of June 3, 1937 (P.L. 1333, NO.320) as
Sworn to and subscribed before me	e this		<u> </u>	. 1		. •	
30 day of Thrying	U20 AH	My o	Com	Nisa.	R. For	nck)	
1111111	Tip to	Angela Comn	monwea LIS	_	ature of Candidat	ie.	_
Signature	willey.	gela L. Wat Erie missien exi ommission	lealin LIS	A R. FERRICK	Printed Name		
My Commission expires 12	02/000/0.	En En	의 81	4	873-805	51	
MO.	DAY YR.	Erie County Erie County Sien expires Decem mission number 142	Penns	ea Code	Daytim	e Telephone Number	
		y De	Y Y Y Y				
		centration	7.				

SCHEDULE I Contributions and Receipts

Detailed Summary Page

Eller Identification Number	•	, .	
81-5189653			
01-0100000			
		_	

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 Aland Part B)	ankar Peringgan di Kalan Buruk Bulangan di Buruk		
Contributions Received from Political Committee	s (Part A)		\$
All Other Contributions (Part B)			\$
	Total for the reporting period	(2)	\$
3. Contributions Over \$250.00 (From Part Cland	Part D)		
Contributions Received from Political Committees	s (Part C)		\$
All Other Contributions (Part D)			\$ 2499.85
	Total for the reporting period	(3)	\$ 2499.85
4. Other Receipts-Refunds, Interest Earned, Reti	Irned Checks, ETC. (From Part E		
7	Total for the reporting period	(4)	\$
Total Monetary Contributions and Receipts during enter amount totals from Boxes 1, 2, 3 and 4; also Cover Page, Item B)		port	\$ 2499.85

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

81-5189653

STATE OF THE STATE			
SOUTH THE STATE OF			Amount
Full Name of Contributing Committee		Date [MM/DD/YYYY] \$	
House # Street Address City State	PROGRAMMENT AND ARREST	Date [MM/DD/YYYY] - 1 \$	·
City State Full Name of Contributing	Zip Code	Date [MM/DD/YYYY] \$	
Committee House # Street Address			
	ERTMANNASSATARAN MARKE TSTEERET	Date [MM/DD/YYYY)] \$	
City State Full Name of Contributing	Zip Code	Date [MM/DD/YYYY] S Date [MM/DD/YYYY] S	
Committee House # Street Address		Date MM/DD/YYYY) \$	
City : State	Zip Code		
Full Name of Contributing	CIA COME	Date [MM/DD/YYYY] \$	
Committee House # Street Address		Date [MM/DD/YYYY] S.	,
City State	Zip Code	Date [MIN/DD/YYYY] \$	
Full Name of Contributing		. Date [MM/DD/YYYY]: 5.	
Committee House # Street Address		Date [MM/DD/YYYY] S	
City. State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing Committee		Date [MM/DD/YYYY] \$	
House # Street Address		Date [MM/DD/YYYY] S	
Chy State	Zip Code	Date [MM/DD/YYYY] 5	

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.)

File Bestiff of on Number 81-5189653	
81-5180653	
01-0103003	

(A)				
Full-Name: Of-Contributor			ELVENDO VIIM STEEL	n e
Fouse 1. Smot Address			Date [MW/DD/XYYX]	
	State 就是办法	Zip Code	Date MIN/DD/Y44	
Full Name of Contains of			Date (IMM/OD/AYAY)	
Straet Address			Date MM/DD/ATTX	
	State Foldred Foldred	Zip Gode	Date [MM/DD/14Y/]	
All Mane of Gueribuson	-		Date (MM/PD/A)(e) = 3	
Street Address			Date (MM/9ib/A) (N) €	
	State:	Zip Code	Date MM/DD/Y/197	
Sil Para S. Controllo			Date (MM/9D/YYYY) S	
Street Audress			Date (MM/DD/Y¥YY) 5	
The second secon	State	Zip Gode	Date IMM/DD/YYYYI . \$	
Fill Name of Southbulds			PartiMM/PD-Mesalis	
Herisa R. Street Address			Date (MM/DD/YYYY)	
No. 1 a Artist	State -	dZip Code	Date (MM/DD/YYYY)	
CILARINE D. CONTRIBUTO:			Date (MM/DD/WYY)	
House # Street Address			Date (MM/DD/YYY) 5	
	Stare 1	Zip Cone	Date [MM/DD/YYYY] s	

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.

77.00-10-10 (Mariana)					
Eler is	ientification Number: 1997: 1997: 1998: 1998: 81-5189	653			
	ame of Committee			Date (MM/DD/AWY)	
	Street Addre			Date (MM/DD/YYYY)	
Ċίξ		State	2(p-Code	Date [MM/DD/YYYY]	
	ane of the second of the property of the second of the sec	Acceptable Acceptance Accepts	Patrick and all and an analysis and a second a	Date IMM/DD//YWW	
	Street Addre	is		Date MIM/OD/YYYY	
	16 Ah	State:	2)p Code	Date [MM/dd/YYYY] 3	######################################
Commi	ame c buring Commikes			ACCISE CALCULATOR ASSAULT	
Bouse	Street Addre			Date (MM/sub/servi): 1	
di-g		State (p) (c) (c)	zipicode	#Datei(NKV/PD744/44)in #5	
Contri	Guting Committee			Date (MM/OD/AVYA)	
Movise Lines	Street Addre			Bate (MM/Db/YYYY) \$	
		State	Zip Sode:	OBX E IMM (OD ANY M)	
	but og Committee 1			Date (MM/Ob/XYYY) 3	
	Maria Sireci Adare			Date [MM/DD/YYYY] \$	
Citya 199 din Paul Ne		State	Zip Code:	Date [MM/DD/YYYY] S	
	exting Committee	9			
1	The August			Date [MM/DB/YYYY] \$	
City		State	Zip Code	Date (MIN/DD/YYYY) 5	

addiction I

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)

eiler (deutlication Number 81-5189	653		
0-4.00			

70.753.0053.0000.00000.00000.00000.00000.00000.0000				
Full Name of Contributor	TIMOTHY & LISA FERRICK		Date (MM/DD/AYY)	2499.85
3030	eet Address CLARK ROAD		Date [MM/DD/YXYY]	
ERIE	State PA	Zip Code 16510	Date [MM/DD/VVV) \$	
Employer Name A 7 th ex in passon and Employer Mailing Aridrass		FORGIVENESS - NO ACTUAL \$\$\$	S Occupation	
Halameri Harero Historia Gall Namero Contributo	Carlo Malla			
			State MNI/DD/AYAYA 37 55	
	eet Address		Date (WIMADDAYFIG)	
	State	Z p.Code	Date [MM/DD/YYYY]	
Employer Name of College Malling Address			Occupation	1-181
Pariting Shared Relining				
Rull Maine of Contributor			= Pate I(MM//DD/A/YYA4 - a = 15	
	eet Address Tight (1) Tight (1)		Date (MM/DD/YYYY) 3	
	State	Zip Gode	Date [MM/DD/YYYY] \$	
Employer Name Employer Mailing Address	(日本) (2) (4) (4) (5) (5) (5) (5) (5) (5		Occupation	
Cilholal Place of Biginess	Days Christ	· · · · · · · · · · · · · · · · · · ·		
Full Name of Contributo			Daile (Miy/DD/YYY) s	
が表現。 (名) 数数数	set Address		Date [MM/DD/YYYY] \$	-
	State H	Zip Code	Date [MM/DD/YYY4] \$	
Employer Name Employer Mailing Address Phinsipal Water of Business			Occupation	

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.

	81-5189653	<u> </u>		
City Accept Lessiption	freet Address	State	Zip Code	Date (MIW/DD/YYYY) \$
Cult Name Heuse # 3 Ciby Recept Description	reet Address	State	Zip Code	Date (MM/Db/YYYY)
City Pascration	reet Address	State	Zip.	Date (NIM/DD/XYXX)
Applied to the State of the	en Address	State	Code	Date (MM/DD/YYYY)
Cisy According to a scription	act Address	State State	Zip Gode	Date (MM/bb/4444)
Acrose in Str. City Research Description	et Address	State	Zip.— Code	Date (MM/DD/YYYY)

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

Eller Remirication Number 81-518	9653			
THE STREET WHEN THE WAY WE SEE THE STREET	ineratokialanan ing kanya	LUGOF S5000 OR LESS PER CON	TRIBUTOR	
TOTAL for the reporting period	(1)	\$		
2 IN CIND CONTRIBUTIONS RE	281VBO VALUE OF \$50.0	LIG S250 DO (EROIX PARTER)		
TOTAL for the reporting period	(2)	\$		About the comment of
1. 3. INKIND CONTRIBUTION REC	IVED:VALUE OVER \$250	IQD (FROM BARO GI		
TOTAL for the reporting period	(3)	\$		
TOTAL VALUE OF IN-KIND CONTRIBUTION PERIOD (Add and enter amount totals in the property on Page 1, Report Cover Page, Item F)	ONS DURING THIS REPO from boxes 1, 2, and 3; a	RTING \$		

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

04 5400059	
01-0109000	

sell Name of Contributor			Date [MM/DD/AYAY] : \$	
Acust X Street Address			Date [MM/DD/YYYY] \$	
Face of the second of the seco	State	Zip Code	Date [MM/DD/YYYY] \$	
Description of Contribution			l. territoria	<u> </u>
Eul Namero Contributo			Dates (WIN/ADD/AYAYA)	-
Hödes f			Data (MM/OD/YYYY) \$	
110	State :	Zip Code	Date [MM/DD/YYYY] \$	
Dagenphan of Confeloration				·
EUL Vame o Contributor			Date [MIM/OD/ATAY] \$	
House 4 Street: Address			Date [MM/DD/YYYY]. 5	
	State	ZIP Code (c) PLASEA PLA COMPANIE (C)	Date [MM/DD/YYYY] .3	
Beschietten of Contribution				
FUL Name of Contributor			Date [MM/DB/YYYY] = 55	
House # Street Address			Date (VIM/DD/YYYY) . \$	
City Contribution	State (15., all)	Złp Codę 14	Date (MM/DD/YYYY) \$	
利益的自然所以自由于全国的				
Pull-Name of Contributor			-Bate (MM/BD/YY)(4)	
Beuse # Street Address			Date (MIN/DD/YYYY) . \$	· · · · · · · · · · · · · · · · · · ·
City is: [[[]]] Sessiption of Commonton []]	State:	Zip-Code	Date [MM/DD/YYYY] \$	

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Eller de retricitier Number 81-5189653	

a illarant ko ekontaj matek		
		*Paxe [MM/DD/2/YAY]
House # Street Address	ENGAGE STREET	Date [MM/OD/YYY4]
Employee-Name	State Zip Code	Date (MIV/DD/AAAA) \$
加热性的系统性的现在分词形式		Occupation
Employer Mailing Address / Principal Place of Business Tull Name of Contributor		Description + Of Contribution
		-Date (MNI/DD/VWW) = 5
House # Street Address	Total Management Manag	Date [MM/DD/YYYY] 5
Training Some	State Zip Code	Date (MM/bb/24/34) 55
		Occupation .
Employer Mailing Address / Principal Riagnop Rusiness		Description 1. of Contribution
Auli Name of Containuto		Date (MM/OD/AYXY)
House It Street Address		S Pare (MM//DD/XY/Y)
Tmployer Name	State Zip Code	Date (MIN/DD/YYYY) \$
Employer Mailing Address / Principal		Occupation
Place of Business		Description: of: Completion
Pull Name of Contributor		Date (MIN/ADDAY) 35
Mouse H Street Address	1000 Market Market (Market Market Mar	Date [MM/00/YYY] 5
Employer Name	State Zip Code:	Date [MM/DD/YXXY] # \$
Employer Malling Address / Principal		Occupation 2
Place of Business		Description of Contribution

Statement of Expenditures

High-leading Number: 81-5189653	

SECOND POTOS LOTO DE SE				
ENERGIA ELEGISTA TIMO	OTHY & LISA FERRICK		Date [MM/DD/YYYY] 12/04/2023	3500.15
1000	CLARK ROAD		Description of Expending	Wie in the second secon
ERIE	State PA	Zip 16510	CAMPAIGN LOAN PAYM	ENT
ii c Whom Paid TIMO	OTHY & LISA FERRICK		/Date [MIM/DB/94534] = 12/31/2023	2499.85
# DUSE # 3030	CLARK ROAD		Description of Expendit	
ERIE	State PA	Zip Code 16510	LOAN FORGIVENESS - N	IO \$\$\$ EXCHANGED
East them east of the control of the	a management construction	Resilvation States and	DUK (WAN/OP) NAKA	
House # Stro	et Address		Description of Expendita	pre production and the second
ALE N SANCE	State:	Zip Code		
	Committee Services and Australia		Date (VINVDO/AVA)	
Anuse A Street	et Address		Description of Expenditu	icen PORRECTION CONTRACTOR
CITY STATE OF THE	State	Zip		
A Whon Faid			TOGRE WINDAUD/ATTACH	
House II	el Aspress		Description of Expenditu	ran (1905) Part (1905)
GISCO	State	20		
#Vienzac		Cade	a Dayeri MiM/ADD/XXXXXIII	.¥Ø
House't State	2 Addition		Description of Expenditu	
	State	62(F)-53(S)		
er virāniyan	24-1-2 a 17-2	Code	Date IMM/00/YHY	
House # Size	et Address			
City I	Since	Zip _{all}	Description of Expenditu	
iniani neisian neisianön sanemis		Gode ₩ ± A	100 Maria 100 Ma	
的复数形式 医多种原理 1996年中央			Date IMW/DD/ANY	140 140
House 1 Street	t Address	a manage of the state of the st	Description of Expenditur	ing parameter de la companya de la c
	\$1ate	- Zip Gode - (1)		

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.

Files identification Number: 81-5189653		
1		
PA FAROCES		
81_5180653		
01-3103033		

Name of Children The			Outstanding Balarice of Debt
	et Address	DATE DEBT INCURRED	
		tate Zip Code	
JASCEPTION OF PED			and society
Name of Creditor House a	et Aduress	DATE DEBT INCURRED	Outstanding Galance of Debt:
City III		Zip Zip Code	
Alana of Season Street	eel. Address	DATE DEBT INCURRED	Outstanding Balance of Geet
cies		tate Zjp Code	100 mg/s
		· · · · · · · · · · · · · · · · · · ·	Outstanding Balance of Peot
House # Stro	est-Address	DATE DEST INCURRED [IMM/DB/YYYY] tate Zip	\$
Description of Debt		tate Zip Code:	
Name of Creditar			
Houselt Stre	e Address	DATE DEBT INCURRED IN	
City Description of Debt	S S	fate Zip Code	13 17 17 17 17 17 17 17 17 17 17 17 17 17
parakinalines oza kolikularia anali I <mark>n Yamionio (spied no</mark> vini kolikularia Indiaesi Aliania II aliania analia		· · · · · · · · · · · · · · · · · · ·	Cutstanding Balance of Debt
House # Stee	et Address	DATE DEBT INCURRED [MM/DD/AYXY] 1/2	
City Déscription of Deby	5	rate Zip Code	

Commonwealth of Pennsylvania

CAMPAIGN FINANCE ANNUAL REPORT

December 31, 2023

TO:

FRIENDS OF LISA FERRICK

FROM:

LISA R. FERRICK and TIMOTHY FERRICK

REGARDING:

OUTSTANDING LOAN BALANCE TO THE COMMITTEE

Please accept this notification as forgiveness of the loan(s) we individually and/or collectively made to Friends of Lisa Ferrick during the year of 2023. The outstanding balance of the loan(s) is \$2,499.85, as outlined on Schedule IV Statement of Unpaid Debts of the Committee's Campaign Finance Reports. It is our stated intent to forgive Friends of Lisa Ferrick each of the individual loans to the committee that are outlined on Schedule IV Statement of Unpaid Debts of the committee's reports.

This is being done so the treasurer of Friends of Lisa Ferrick can file the annual Campaign Finance Report and terminate the committee.

Respectfully Submitted,

Lisa R. Ferrick and Timothy Ferrick

Commonwealth of Pennsylvania - Notary Seal

Cammission expires Public My Commission Expires May 26, 2027

Commission Number 1290868

AFFIDAVIT SECTION

I swear (or affirm) that to the best of my knowledge and belief the information contained in this letter is true and correct.

Sworn to and subscribed before me this 2 9 day of January 20 2 4	Risa R. Kemix
\mathcal{M}	Signature of Person Submitting Letter Lisa R. Fernak
Michelle Jonda) Usa N. Fernal
Signature	Printed Name
My Commission expires 5, 26 2023	² } <u>814</u> 873-8051
Commonwealth of Pennsylvania - Notary Seal MICHELLE GONDA - Notary Public Erie County My Commission Expires May 26, 2027 Commission Number 1290868	Area Code Daytime Telephone Number
I swear (or affirm) that to the best of my knowledge and	belief the information contained in this letter is true and
correct.	
Sworn to and subscribed before me this	
29 day of January 20 304	1 Timator P. Forrick
100	Signature of Person Submitting Letter

DAY

Printed Name

Daytime Telephone Number

Area Code