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

Filer Identification	Report Filed E	By Candida	_	Committee	-	Lobbyist
Number Name of Filing Committee, Candidate or	( Mark X)					
Lobbyist Street Address	Friends of Aub	rea Hagerty-Ha	ynes			
	630 Edgevale		•		_	
<b>City</b> Erie		State	PA	Zip Code	16509	
Type of Report (Place x under report type)			1			
1 <sub>8</sub> 6 <sup>th</sup> Tuesday 2- 2 <sup>nd</sup> Friday 3-30 Day Post	1 11 2		6- 30 Day Post	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
Pre-Primary Pre-Primary Primary	Pre- Election	Pre- Election	Election	Maraisi	Pre-Election	POST-EIECTION
Date Of Election (MM/DD/YYYY) 5/20/2025	Year	2025	Amendment Report		Termination Report	
Summary of Receipts and From Date	To Date			For	Office Use Only	
Expenditures 1/1/2025	ł I	/5/2025	and All Marines			
A. Amount Brought Forward From Last Repor	t	59.22				
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 1	5,295.00			5	2025 HAY
C. Total Funds Available (Sum of Lines A and B)	\$ 1:	5,354.22				
D. Total Expenditures (From Schedule III)	\$ 6	5,448.40				5
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 8	3,905.82			STRATION	R S
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00			<u> </u>	< ယ္ ယူ
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 2	2,644.03				·
Part 1- If this is a <b>Committee</b> report, treasurer sign h	oro Ifthic is a Car	Affidavit Sec				
I swear (or affirm) that this report, including the atta				ge and belief tr	ue, correct and compl	ete.
Sworn to and subscribed before me this		÷	11 11	-00	n	
day of20	- '1	-	Heathe	of Person Subm	cullung	<i>)</i>
Signature	_ <b> -</b>		Heathe	Printed Nam	inkwicz	
, and the second	, ,	•	Q 1U	, <b>3</b>	92-6248	
My Commission expires	_	A	rea Code	Day	time Telephone Numb	er
Part II- If this is a report of a Candidate's Authorized	Committee, cand	idate shall sign he	ere.			
I swear (or affirm) that to the best of my knowledge amended.	and belief this pol	itical committee l	has not violated any	/ provisions of t	he Act of June 3, 1937	(P.L. 1333, NO.320) as
Sworn to and subscribed before me this			1 20	n set	ttana	
day of20	- '	r F	Sign Sign	ature of Candid	late of the	Tax see
Signature	-		HUBRU	Printed Name.	EKTY-F	THYNUES
	, 1		814	4	101-992	<b>1</b> ノ
My Commission expires	_	A	rea Code	Dayt	ime Telephone Numbe	r

### SCHEDULE I

## **Contributions and Receipts**

**Detailed Summary Page** 

Filer Identification Number		
A SALA STATE OF THE SALAR STATE		
A LANCE CONTROL CONTRO		
And the second s		

1.Unitemized Contributions and Receipts-\$5	0.00 or Less per Contributor				
Elements (1) and Control of the Cont	Total for the reporting period	(1)	\$	175.00	
2. Contributions of \$50.01 to \$250.00 (Fron		da 11 1 2 2 Agentina 1			
Part A and Part B)					
Contributions Received from Political Commi	ttees (Part A)		\$	100.00	
All Other Contributions (Part B)			\$	1700.00	
	Total for the reporting period	(2)	\$	1800.00	
3. Contributions Over \$250,00 (From Part C	and Part D)				
Contributions Received from Political Commi	ttees (Part C)		\$	300.00	Angular de par estre : de la secución de la companya
All Other Contributions (Part D)			\$	13,020.00	
	Total for the reporting period	(3)	\$	13,320.00	
4. Other Receipts-Refunds, Interest Earned,	Returned Checks, ETC. (From Part E	30000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7777		
	Total for the reporting period	(4)	\$	0.00	
Total Monetary Contributions and Receipts di enter amount totals from Boxes 1, 2, 3 and 4; Cover Page, Item B)			\$	15,295.00	,

#### 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

				Amount
Full Name of Contributing			Date [MM/DD/YYYY]	
Committee Committee	e To Elect Carl Ar	nderson	4/30/2025	100.00
House # Street Address			Date [MM/DD/YYYY]	
C	/O 3830 Parade B	lvd.		
City Erie	State PA	Zip Code 16504	Date [MM/DD/YYYY]	
Full Name of Contributing	Arr and another		Date [MM/DD/YYYY] \$	No. 9 c. or
Committee				
House # Street Address			Date [MM/DD/YYYY]	00000000000000000000000000000000000000
Ety	State	Zip Code	Date [MM/DD/YYYY] \$	
The state of the s				coopilis orange (a) range (a)
Full Name of Contributing			Date [MM/DD/YYYY] \$	
Committee				
House # Street Address		· · · · · · · · · · · · · · · · · · ·	Date [MM/DD/YYYY] \$	
			9 m 60% F 20% F 20	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing			Date [MM/DD/YYYY] \$	
Committee :			Date (MINI/DO/(ACT))	
House # Street Address			Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] S	
Security of the Control of the Contr	A Committee of the comm		1 - January V - Agriculture V	
Full Name of Contributing			Date [MM/DD/YYYY] \$	:
Committee				
House # Street Address			Date [MM/DD/YYYY] = \$	
ACT CONTROL OF THE CO	State	Zip Code as	Date [MM/DD/YYYY] \$	
Full Name of Contributing		and Sping Control of the Control of	Date [MM/DD/YYYY] = \$\$	-
Committee			Date [MM/DD/YYYY] 5	ici
House # Street Address			Date [MM/DD/YYYY] \$	7 20 20 20 20 20 20 20 20 20 20 20 20 20
				New York Control of the Control of t
City	State	Zip Code	Date [MM/DD/YYYY] \$	

\$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 Contrib	nor.	Date [MM/DD/YYYY] \$	
	Kathleen Fatica	2/28/2025	100.00
House #	Street Address	Date [MM/DD/YYYY] \$	
	4623 Southern Drive		
City	State Zip Code	Date [MM/DD/YYYY] \$	
Erie	PA 4 16506		
Full Name of Contribu		Date [MM/DD/YYYY] : \$	
	Thomas S. Talarico	4/24/2025	100.00
House#	Street Address	Date [MM/DD/YYYY] \$	
	230 West 6th Street		
City	State Zip Code	Date [MM/DD/YYYY] \$	
Erie	PA 16507		
Full Name of Contribu	713	Date [MM/DD/YYYY] \$	
	Damon Hopkins	4/24/2025	100.00
House#	Street Address	Date [MM/DD/YYYY] \$	
	333 State Street		
City 🖫	State Zip Code	Date [MM/DD//YYY] \$	
Erie	PA 16507	A -	
100	# # # # # # # # # # # # # # # # # # #		
Full Name of Contribu	ito:	Date [MM/DD/YYYY] \$	
Full Name of Contribu	itor Patricia Kennedy	*Date [MM/DD/YYYY] \$ 04/08/2025	100.00
Full Name of Contribu	200	**	100.00
	Patricia Kennedy	04/08/2025	100.00
House #	Patricia Kennedy  Street Address 8663 Maplecrest Drive  State Zip Code	04/08/2025	100.00
House#	Patricia Kennedy  Street Address 8663 Maplecrest Drive	04/08/2025  Date [MM/DD/XYYYY] \$ \( \sqrt{x} \)	100.00
House #	Patricia Kennedy  Street Address 8663 Maplecrest Drive  State PA Zip Code 16426	04/08/2025  Date [MM/DD/XYYYY] \$ \( \sqrt{x} \)	
House #  City McKean	Patricia Kennedy  Street Address 8663 Maplecrest Drive  State PA Zip Code 16426	04/08/2025  Date [MM/DD/XYYY] \$  Date [MM/DD/YYYY] \$	200.00
House #  City McKean	Patricia Kennedy  Street Address  8663 Maplecrest Drive  State PA Zip Code 16426	Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	
House #  City McKean  Full Name of Contribu	Patricia Kennedy  Street Address 8663 Maplecrest Drive  State PA Zip Code 16426  LPAC Erie	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025	
House #  City McKean  Full Name of Contribut  House #	Patricia Kennedy  Street Address 8663 Maplecrest Drive  State PA Zip Code 16426  LPAC Erie  Street Address 120 W. 10th Street  State Zip Code	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025	
House #  City McKean  Full Name of Contribut  House #	Patricia Kennedy  Street Address  8663 Maplecrest Drive  State PA Zip Code 16426  LPAC Erie  Street Address 120 W. 10th Street	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025  Date [MM/DD/YYYY] \$	200.00
Gity McKean  Full Name of Contributh  House #	Patricia Kennedy  Street Address 8663 Maplecrest Drive  State PA Zip Code 16426  LPAC Erie  Street Address 120 W. 10th Street PA Zip Code 16501	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$	200.00
House #  City McKean  Full Name of Contributh  House #  City Erie	Patricia Kennedy  Street Address  8663 Maplecrest Drive  State PA Zip Code 16426  LPAC Erie  Street Address 120 W. 10th Street  PA Zip Code 16501	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$	200.00
Gity McKean  Full Name of Contributh  House #	Patricia Kennedy  Street Address 8663 Maplecrest Drive  State PA Zip Code 16426  LPAC Erie  Street Address 120 W. 10th Street PA Zip Code 16501	Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  A/1/2025  Date [MM/DD/YYYY] \$  A/1/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$	200.00
Full Name of Contribu	Patricia Kennedy  Street Address  8663 Maplecrest Drive  State PA Zip Code 16426  ILPAC Erie  Street Address  120 W. 10th Street  PA Zip Code 16501  Nicholas Pagliari	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  04/7/2025	200.00
Full Name of Contribu  City Erie  Full Name of Contribu	Patricia Kennedy  Street Address  8663 Maplecrest Drive  State PA Zip Code  LPAC Erie  Street Address  120 W. 10th Street  PA Zip Code  16501  Richolas Pagliari  Street Address  5670 Winthrop Drive  State  Zip Code	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  04/7/2025  Date [MM/DD/YYYY] \$	200.00
House #  Gity McKean  Full Name of Contribut  City Erie  Full Name of Contribut	Patricia Kennedy  Street Address  8663 Maplecrest Drive  State PA Zip Code 16426  LPAC Erie  Street Address  120 W. 10th Street  State PA Zip Code 16501  Nicholas Pagliari  Street Address	04/08/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/1/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  04/7/2025  Date [MM/DD/YYYY] \$	200.00

#### 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:	

<b>Full Name of Contributo</b>		Date [MM/DD/AWA]	
	Kenneth J. Gamble	4/30/2025	100.00
House#	rreet Address	Date [MM/DD/YYYY] \$	
	947 W. 32nd Street		
City \	State Zip Code	Date [MM/DD/YYYY] S	
Erie	海 (F PA 事		
Full Name of Contributo		Date [MM/DD/YYYY]	
	Sam Talarico	4/24/2025	100.00
House# S	reet Address	Date [MM/DD/YYYY] \$	
\$ 2	4120 Harvard Road		
City.	State Zip Code	Date (MM/DD/YYXX)	
Erie	PA / 基本 16509	* 9	
Full Name of Contributor		Date [MM/DD/YYYY] \$	
	Tammi L. Elkin	4/30/2025	200.00
House #	ireet Address	Date [MM/DD/YAVA) S	
3	143 East Main Street	Constitution of the Consti	
City (2)	State Zip Gode	/Date [MM/DD/YYYY] \$	
North East	PA 16428	' Pate [MINI/DD/1111]	
		P. S.	
Full Name of Contributor		Date [MM//DD/AWA] = 5	100.00
	James Depalma	4/30/2025	100.00
	James Depalma reet Address		100.00
	James Depalma	4/30/2025  Date [MM/DD/YYYY] \$	100.00
House # Si	James Depalma  reet Address 537 Shenley Drive  State Szip Code	4/30/2025	100.00
House # Si	James Depalma  537 Shenley Drive  State PA  21p Code 16505	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$	100.00
House # Si	James Depalma  537 Shenley Drive  State PA  16505	4/30/2025  Date [MM/DD/YYYY] \$	·
House # Si	James Depalma  537 Shenley Drive  State PA  21p Code 16505	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$	100.00
House # Si City Erie	James Depalma  537 Shenley Drive  State PA  Janice H. Sitter  Feet Address	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$	·
House # Si City Erie	James Depalma  537 Shenley Drive  State PA  Janice H. Sitter	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025	·
House # St	James Depalma  537 Shenley Drive  538 PA  Janice H. Sitter  6006 Longwood Drive	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025	·
House # St  City Erie  Full Name of Contributor  City Erie	James Depalma  537 Shenley Drive  State PA  Janice H. Sitter  6006 Longwood Drive  State PA  Zip Code  16505	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$	100.00
House # St  City Erie  Full Name of Contributor  House # St	James Depalma  537 Shenley Drive  State PA  Janice H. Sitter  6006 Longwood Drive  State PA  Zip Code 16505	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$	100.00
House # St  City Erie  Full Name of Contributor  City Erie	James Depalma  537 Shenley Drive  State PA  Janice H. Sitter  6006 Longwood Drive  State PA  Zip Code  16505	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$	100.00
House # St  City Erie  Full Name of Contributor  City Erie  Full Name of Contributor	James Depalma  537 Shenley Drive  State PA  Janice H. Sitter  6006 Longwood Drive  State PA  Zip Code 16505	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$	100.00
House # St  City Erie  Full Name of Contributor  City Erie  Full Name of Contributor	James Depalma  537 Shenley Drive  State PA  Janice H. Sitter  Feet Address  6006 Longwood Drive  State PA  Zip Code  16505  Kathleen Fatica	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025	100.00
House # St  City Erie  Full Name of Contributor  City Erie  Full Name of Contributor  House # St  City Erie	James Depalma  537 Shenley Drive  537 Shenley Drive  548 PA  Janice H. Sitter  Feet Address  6006 Longwood Drive  51ate PA  Zip Code 16505  Kathleen Fatica  Feet Address  4623 Southern Drive  State  Zip Code	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025	100.00
House # St  City Erie  Full Name of Contributor  City Erie  Full Name of Contributor  House # St	James Depalma  537 Shenley Drive  537 Shenley Drive  16505  Janice H. Sitter  Feet Address  6006 Longwood Drive  72ip Code  16505  Kathleen Fatica  Feet Address  4623 Southern Drive	4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  Date [MM/DD/YYYY] \$  4/30/2025  Date [MM/DD/YYYY] \$  4/30/2025	100.00

#### 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:

		ž.								
										3
Full Na	me of Contributor	Jessica Fisc	cus					/M/DD//YYY]** /10/2025	5	100.00
House	<b>51</b> 0	reet Address	3970 South	Hill Road			Date [N	IM/OD/WYY)	Ġ.	
City	McKean		State	PA	Zip Code	16426	*Date [N	IM/DD/YYYY]	S	
Full Na	me of Contributor	Brendan Sa	la					(M/DD/YYYY) 30/2025	\$	100.00
House	f St	reet Address	1723 West 4	5th Stree	et .		Date [N	IM/DD/AVAS/IS	S	
City	Erie	<b>多一种意义</b>	State	PA	Zip Code	16509	¿pate (M	IM/DD/YYYY]	\$	•
Full Na	me of Contributor	Lynn Halasz				*		<b>M/PD/</b> /\*\\/  = 24/2025	\$	100.00
House /	St	reet Address	3420 Lancas	ster Road			Date (M	IM/DD/AYAYA	S	
City	Erie	**************************************	State	PA	Zip Code	16506	Date (M	M/DD/YYYY]	\$	
Full Nar	ne of Contributor					•	Date (M	IMANDOAVAA	*\$	·
House f	Sti	reet Address					Date [M	M/DD/YYYY	5	
City 2	2000	A	State i		Zip Code			M/DD/YYYY]	\$	
Full Nar	ne of Contributor			·			Date [M	M/DD/WW]	\$	:
House #	Stř	eet Address					Date [M	M/DD/YYYY]	Ş	
City	Populari		State !		Zip Code	./		M/DD/YYYY]	\$	
	ne of Contributor							Waddiaaaaa	S	
House #	Str	eet Address						M/DD/YYYY]	\$	
City			State		Zip Code		Date [M	M/DD/YYYY]	\$	

#### 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:				
				X
Full Name of Contributing Committee	Committee to Elect Elizabeth H	Hirz DA		300.00
	- <u>-</u>		04/08/2025	• *
	PO Box 295		Date [MM/DD/YYYY] \$	
City Fairview	State PA	Zip Code 16415	Date [MM/DD/YYYY] \$	
Full Name of 1. Contributing Committee			Date [MM/DD/YYYY] \$	ACCOUNT OF THE PROPERTY OF THE
House # Str	reet Address		*Date[MM/DD/YYYY] \$	
City:	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of A			*Date[MM/DD/YYYY] \$	
House # Str	reet Address		Date [MM/DD/XYYY]*: "\$4	3.*. 
City	State	Zip Code	Date [MM/DD/YYYY] ,\$	
Full Name of Contributing Committee			Date [MM/DD/Y4YY] \$	
House # Str	reet Address		Date [MM/DD/YYYY] \$	· ·
City	State	Zip Code	-bate (MM/Ob/AYAY) ()	
Full Name of a Contributing Committee			Date [MM/DD/YYYY] \$	
	eet Address		Date [MM/DD/AYAY] \$	
<b>Gty</b>	State	Zip Code*	Date [MM/DD/YYYY] \$	
Full Name of Contributing Committee			Date [MM/DD/XYYYI] 5	
	eet Address		Date [MM/DD/YYYY] \$	
City (	State	Zip Code	_Date [MM/DD/YYYY] \$1.	

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 (MIM/Do/AVAY)	
	Chad Vilushis	3/13/2025	1000.00
	eet Address 6009 Lakeshore Drive	Date (MM/DD/YYYY) \$.	
City # Erie	State PA Zip Code 16505	Date [MM/DD/YYYY] \$	
Employer Name	McCormick & Vilushis LLC	Occupation Attorney	·
Employer Mailing Address Principal Place of Business			
Full Name of Contributor	Eric Barry	_Date [MM/DD/YYYY]	500.00
	11064 S. Shore Avenue	Date [MM/DD/YYYY] 5 \$	•
North East	PA Zip Code 16428	fDate [MM/DD/YYYY] 🐺 💲	
Employer Name	Action Bail Bonds	Occupation Bail Bondsman	
Employer Mailing Address Principal Place of Business			
Full Name of Contributor	Jane Earli	Date [MM/DD/YYYY] \$ 4/10/2025	500.00
House # Stre	net Address 1509 Pasadena Drive	EDate[MM/DD/YYYY] 🗽 🕏	·
City Erie	State PA Zip Code 16505	Date [MM/DD/YYYY] \$	
Employer Name	Retired	Occupations	
Employer Mailing Address Principal Place of Business			
Full Name of Contributor	Andrew Sisinni Esq	Date [MIM/DD/YYYY] \$ 4/21/2025	500.00
	et Address 1314 Griswold Plz	Date [MM/DD/YYYY] 447\$	
City Erie	State: PA Zip Code 16501	Date [MM/DD/YYYY] \$	
Employer Name	Sisinni Legal	Occupation Attorney	

1314 Griswold Plz, Erie PA 16501

Employer Mailing Address /

Principal Place of Business

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:

三枝 黄 朱 三 第		
Full Name of Contributor	,	Date [MM/DD/YYYY] \$
Cna	arbel Latouf	4/9/2025
House # Street Ad	ddress	Date [MM/DD/YYYY] 5
	2409 State Street	
i Ag i i i i i i i i i i i i i i i i i i	State Zip Code	Date [MM/DD/YYYY] 2 \$2
Erie	PA 24p Code 16503	Date IMIM/OD/1/1/11
Employer Name	Sold Karana	Occupation
医萎蔫性 孝 春 二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	Latouf Law Firm	Attorney
Employer Mailing Address / Frincipal Place of Business	2409 State Street, Erie PA 16503	
Principal Place of Business		Date [MM/DD/YYYY] \$
	seph Conti	750.00
		4/7/2025
House # Street Ad		Date [MM/DD/YYYY] \$
	7498 Water Street	
City	State Zip Code	#Date (MM/DD/YYYY) 5
Fairview	PA 16415	E. Capping
Employer Name	Joseph P. Conti Attorney	Occupation Attorney
Employer Mailing Address	Joseph P. Conti Attorney	Audiney
Principal Place of Business	456 West 6th Street, Erie PA 16507	
Full Name of Contributor	AND SECOND SECON	Date [MM/DD/YYYY] ; \$
	e Mikoveh	4/8/2025 500.00
\$ 50 TH		
House # Street Ad	ddress 10290 Ivarea Road	Date [MM/DD/YYYY] \$
4週	10290 Ivarea Hoad	
Cranesville	State Zip Code # 16410	Date [MM/DD/YYYY] \$
Cranesville	PA 16410	
Employer Name	Quinn Law Firm	Occupation Attorney
Employer Mailing Address /		E COST TO SECURITY OF THE SECU
Principal Place of Business	2222 West Grandview Blvd., Erie PA 16506	· · · · · · · · · · · · · · · · · · ·
Full Name of Contributor		Date [MM/DD/YYWY] 25
Eric	Hackwelder	4/4/2025 500.00
House # Street Add	Marce	4/4/2025 \$
Touse "	137 E. 13th Street	Section 1997
City	State Zip Code 16503	Date [MM/DD/YYYY] \$
Erie	PA 16503	
Employer Name	Sebald, Hackwelder, & Knox	Attorney
Employer Mailing Address /		
	137 E. 13th Street, Erie PA 16503	•

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)

Fileridentification Number

18 18 A 1 19 19 19 19 19 19 19 19 19 19 19 19 1		
Full Name of Contributor		EDate [MM/DD/YYYY] \$
	Stephen Sebald	4/3/2025
House # Stre	et Address 137 E. 13th Street	Date [MM/DD/XXXX] 5
City (	State Zip Code	Date [MM/DD/YYYY] \$
Erie	PA 16503	
Employer Name	Sebald, Hackwelder, & Knox	Occupation: Attorney
Employer Mailing Address Principal Place of Business		
Full Name of Contributor		Date [MM/DD/YYYY] \$
· · · · · · · · · · · · · · · · · · ·	Eric Purchase	4/2/2025 750.00
House # Stre	et Address 82 Gibson Street	Date [MM/DD/YYYY] \$
City North East	State PA Zip Code 16428	Date [MM/DD/YYYY]
Employer Name	Purchase, George, & Murphey, P.C.	Attorney
Employer Mailing Address Principal Place of Business		
Full Name of Contributor		Date [MM/DD/YYYY] 5
	Craig Murphey	4/1/2025 750.00
	et Address 3631 Winthrop Drive	Date [MM/DD/YYYY] \$
City.	State PA Zip Code 16506	Date [MM/DD/YYYY] = 32 ST
Employer Name	Purchase, George, & Murphey, P.C.	Occupation Attorney
Employer Mailing Address Principal Place of Business		
Full Name of Contributor		**Date [MM/DD/YYYY] \$ 750.00
	Timothy George	4/7/2025
House # Stree	et Address 1488 Elleway Ct.	Date [MM/DD/YYYY] \$
City Fairview	State PA Zip Code 16415	Date [MM/DD/YYYY] \$
Employer Name	Purchase, George, & Murphey, P.C.	Occupation Attorney
Employer Mailing Address	2525 West 26th Street, Erie PA 16506	

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:

	<u> </u>	
E WINDS	des .	
Full Name of Contributor	John Carlson	4/3/2025 5 750.00
House# Stre	eet Address 821 State Street	*Date [MM/DD/YYYY] \$
Gity	State Zip Gode Zip Gode	Date [MM/DD/YYYY] 7.5.
Erie	PA Lip Code 16501	
Employer Name	Attorney John B. Carlson	Occupation Attorney
Employer Mailing Address Principal Place of Business		
Full Name of Contributor		Date (MM/JOD/WWW) (5.
	Roger Richards	4/3/2025
House# Stre	eet Address 230 West Sixth Street	Date [MM/DD/YYYY] \$
City	State Zip Code	Date [MM/DD/YYYY] \$
Erie	PA 25 16507	
Employer Name	Richards & Associates	Occupation Attorney
Employer Mailing Address Principal Place of Business		
Full Name of Contributor		Date [MM/DD/YYYY] \$
	Gene Placidi	4/2/2025
House # Stre	eet Address 502 W. 7th Street	Date [MM/DD/YYYY]
City Erie	State PA Zip Code 16502	Date [MM/DD/YYYY] \$
Employer Name	MP2 Placidi & Parini	Occupation Attorney
Employer Mailing Address Principal Place of Business		
Full Name of Contributor	april (garapus, 19)	Date [MM/DD/YYYY] \$ 5
	Joseph DePalma	4/21/2025 770.00
1	eet Address 365 E. 37th Street	Date [MM/DD/YYYY] \$
<b>City</b> Erie	State Zip Code 16504	Date [MM/DD/YYYY] \$
Employer Name	McCormick & Vilushis LLC	Occupation Attorney
<b>Employer Mailing Address</b>	1514 Liberty Street, Erie PA 16502	

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] \$
	Matthew Pirrello	4/3/2025
House # Stre	aet Address 3123 Contessa Lane	Date[[MM//DD/YYYY] 3 5
<b>City</b> Erie	State PA Zip Code 16506	Date [MM/DD/YYYY] \$
Employer Name	Pirrello Enterprises	Occupation Record Management
Employer Mailing Address Principal Place of Business		Section 2012 Control of the Control
Full Name of Contributor		Date [MM/DD/YYYY] \$
	Douglas McCormick	3/28/2025 750.0
House ##	4820 Highview Blvd.	Date [MM/DD/YYYY] \$ /
City Erie	State PA Zip Code 16509	Date [MM/DD/YYYY] Ş
Employer Name	McCormick & Vilushis LLC	<b>Occupation</b> Attorney
Employer Mailing Address Principal Place of Business	1514 Liberty Street, Erie PA 16502	Special Control of Control
Full Name of Contributor	Kenneth Bickel	Date [MM/DD/AXXVI] 35 750.00
House# Stre	et Address	Date [MM/DD/YYYY] \$
300 S	1900 Greentree Drive	
City 5 Erie	State PA Zip.Code 16509	Date [MM/DD/XYYY] 3 3 4\$ 4
Employer Name	(45) (43) (43) (43) (43) (43) (43) (43) (43	Occupation
Employer Mailing Address Principal Place of Business		
Full Name of Contributor		Date [MM/DD/YYYY] \$
	et Address	Date [MM/DD/YYYY] \$
City.	State Zip Code	_Date [MM/DD/YYY] \$
Employer Name		Occupation
Employer Mailing Address		

#### **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 Num	iber:			
Full Name				·
House #	Street Address		·	
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		[11 6 4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1 1 1 8 8 3 x x x 1	1 t- /
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address		,	
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	The state of the s	10/3/2/2/201	El viel 1 to the content	
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] 5
Receipt Description	98.2			
Full Name				
House #	Street Address			V 411
City		State	Zip Code	Date [MM/DD/YYYY] \$
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:			
1. UNITEMIZED IN KIND CONTRIBUTION	ONS RECEIVED-VALUE OF \$5	0.00 (	OR LESS PERCONTRIBUTOR
TOTAL for the reporting period	(1)	\$	0.00
z. IN-KIND CONTRIBUTIONS RECEIVED	D-VALUE (0.E.\$50.01 TO \$250)	00 (F	ROM PART E) . 5 77 **
TOTAL for the reporting period	(2)	\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED	VARUFLOVER \$250,000 (FRO)	A PAR	DG) 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
TOTAL for the reporting period	(3)	-	0.00
		1 1	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS D PERIOD (Add and enter amount totals from b on Page 1, Report Cover Page, Item F)		\$	0.00

## SCHEDULE II PART F

## **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

Filer Identification Number:	,	

Full Name of Contributor    Date [MM/DD/YYYY]   \$
City   State   Zip Code   Date [MM/DD/YYYY]   \$
City   State   Zip Code   Date [MM/DD/YYYY]   \$
Description of Contributor    Date [MM/DD/YYYY]   \$
Description of Contributor    Date [MM/DD/YYYY]   \$
Description of Contributor    Date [MM/DD/YYYY]   \$
Fill Name of Contributor    Date [MM/DD/YYYY]   \$
House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Description of Contributor Date [MM/DD/YYYY] \$  House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Description of Contribution
House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Description of Contributor Date [MM/DD/YYYY] \$  House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Description of Contribution
Date [MM/DD/YYYY]   State   Zip Code   Date [MM/DD/YYYY]   State   Date [MM/DD/YYYY]   State   Date [MM/DD/YYYY]   State   Date [MM/DD/YYYY]   State   Zip Code   Date [MM/D
Date [MM/DD/YYYY]   State   Zip Code   Date [MM/DD/YYYY]   State   Date [MM/DD/YYYY]   State   Date [MM/DD/YYYY]   State   Date [MM/DD/YYYY]   State   Zip Code   Date [MM/D
Description of Contributor   Date [MM/DD/YYYY]   \$
Description of Contributor   Date [MM/DD/YYYY]   \$
Date [MM/DD/YYYY]   \$
Full Name of Contributor    Date [MM/DD/YYYY]   \$
House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Description of Contribution
House # Street Address Date [MM/DD/YYYY] \$  City State Zip Code Date [MM/DD/YYYY] \$  Description of Contribution
City State Zip Code Date [MM/DD/YYYY] \$  Description of Contribution
City State Zip Code Date [MM/DD/YYYY] \$  Description of Contribution
Description of Contribution
Description of Contribution
Full Name of Contributor Date [MM/DD/YYYY] \$
「大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大
House # Street Address Date [MM/DD/YYYY] \$
House # Street Address Date [MM/DD/YYYY] \$
City State Zip Code Date [MM/DD/YYYY] \$
Description of Contribution
Full Name of Contributor Date [MM/DD/YYYY] \$
House # Street Address Date [MM/DD/YYYY] \$
Street Address Page (May 2017) 4
City State Zip Code Date [MM/DD/YYYY] \$
Description of Contribution

## SCHEDULE II Part G

#### Part

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

**VALUE OVER \$250** 

Filer Identification	on Number:			
Full Name of C	ontributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
	Street Audress			
City		State	Zip Code	Date [MM/DD/YYYY] \$
		100		
Employer Nam				Occupation
Employer Mail Place of Busine	ing Address / Principal	9765 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		Description of
Christian of				Contribution
Full Name of C	ontributor			Date [MM/DD/YYYY] \$
House #	Street Address		,	Date [MM/DD/YYYY] \$
Citý	(2.35公司 2.15 3 <u>2.35</u> [公司]	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Nam	<b>加加州西北京市中央</b> 基本			Occupation
Employer Mail Place of Busine	ing Address / Principal			Description of
				Contribution
Full Name of C	ontributor		•	Date [MM/DD/YYYY] \$
House #	Street Address		v	Date [MM/DD/YYYY] \$
City	ESC STOCK AND COMMON STREET STOCK	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Nam	e i i i i i i i i i i i i i i i i i i i			Occupation
	ing Address / Principal	- 104 - 104 - 104		Description
Place of Busine	SS PAR 全模型 WEAT		•	of Contribution
Full Name of C	ontributor	· · · · · · · · · · · · · · · · · · ·		Date [MM/DD/YYYY] \$
House #	[2] - 46 - 46 - 47 - 47 - 47 - 47 - 47 - 47			Date [MM/DD/YYYY] \$
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Nam	e	Š.		Occupation
Employer Mail Place of Busine	ing Address / Principal sss	* 1		Description of Contribution

# Statement of Expenditures

2000000			100	25-0-1-EX	roceco	COMPANY CO
Filer	man	63 67 50	IT I CM		123	
	بلغار مستجارات		- American II		250	Miles No
ACCOUNTS 19-100-100-100-100-100-100-100-100-100-1					250	

To Whom Paid:		Date [MM/DD/YYYY]	***
United States Postal Service	•	4/17/2025	73.00
House # Street Address 3607 Poplar Street	eet	Description of Expenditu	re
City Erie State: PA	<b>Zip</b> 16508	Stamps for Fundraiser Invite	98
To Whom Paid Erie County Elections		Date [MM/DD/YYYY] 3/10/2025	100.00
House # Street Address 140 W. 6th Street	et	Description of Expenditur	<b>e</b>
City State PA	Zip 16501	Filing Fee	
To Whom Paid	a code	Date [MM/DD/YYYY]	1241.50
DeSantis Signs  House# Street Address		4/18/2025  Description of Expenditur	
540 West 18th St			
Ciby Erie PA	<b>Zip</b> 16502	Yard Signs	
To Whom Paid The Brewerie at Union Station		Date [MM/DD/YYYY] 4/30/2025	1450.00
House # Street Address 123 West 14th St	treet	*Description of Expenditur	e
City Erie State PA	Zip Code: 16501	Fundraiser Event	
To Whom Paid UPS Store 5271		Date [MM/DD/A114]	125.35
House # Street Address 3411 Peach Street	et	4/30/2025  Description of Expenditure	•
City Erie State PA	Zip 16508	Sign for Host Committee	<b>#</b>
To Whom Paid Polish Falcons		Date (MM/DD/AAAA	150.00
House# Street Address 431 East 3rd Street	not .	4/10/2025  Description of Expenditure	
City	Zip	Bowling Tournament/ Dyngu	is Day
To Whom Paid	Code 16509	Date [MM/DD/YYY] 5	
斯科 UPS Store 5271		4/16/2025	174.90
House # Street Address 3411 Peach Street	eet	Description of Expenditure	B
City Erie State PA	Zip Code 16508	Invites/Envelopes for Fundra	aiser Event
To Whom Paid UPS Store 5271		*Date (MM/OD)AYYAY) \$ \$ 4/15/2025	580.56
House# Street Address 3411 Peach Street	et /	Description of Expenditure	
City Erie State PA	<b>Zip</b> 16508	Invites/Info Cards for Fundra	liser Event

# SCHEDULE III Statement of Expenditures

Filer Identification Number:	 	

To Whom Paid			Date [MM/DD/YYYY] \$	
to whom Pate	Act Blue Fees		4/14/2025 3.93	
House #	Street Address		Description of Expenditure	
City	(State	Zip Code	Online Donation Fee	
To Whom Paid	ErieBank Checking Account Fees		Date [MM/DD/YYYY] \$	
House #	Street Address		4/30/2025  Description of Expenditure	-
Albert	萋			_
City	State	Zip Code	Account Fees	
To Whom Paid	Act Blue Fees		*Date [MM/DD/YYYY]	
House #	Street Address		Description of Expenditure	## F
City	State	Zip Code 🚛	Online Donation Fee	
To Whom Paid	United States Postal Service	The state of the s	Date [MM/DD/YXYX) \$ 146.00	
House#	Street Address		4/18/2025  Description of Expenditure	
	3607 Poplar Street		<b>等。</b>	· · · · · ·
<b>City</b> Erie	<b>State</b> PA	Zip	Stamps for Invites for Fundraiser	
To Whom Paid ::	A.F. Dobler Hose		Date [MM/DD/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
House #	Street Address 37 Walnut Street		Description of Expenditure	
<b>City</b> Girard	State PA	Zip	Donation	
To Whom Paid	Tops Market		Date [MM/DD/AYAY] 5 2/8/2025 65.06	
House #	Street Address 712 West 38th Stre	eet	Description of Expenditure	
City Erie	State PA	Zip # 16508	Supplies for Fundraiser event	
To Whom Paid	Target		Date [MM/DD/YMY] \$ 55.10	
House #	Street Address 6700 Peach Stree		Description of Expenditure	The second
City Erie	State PA	Zíp Code 16509	Supplies for Fundraiser event	
To Whom Paid	Dollar Tree		2/26/2025 18.55	
House #	Street Address 2211 West 12th St		Description of Expenditure	
City Erie	State PA	Zip Code 16505	Supplies for Donation Baskets	

# SCHEDULE III Statement of Expenditures

Filer Identification Number:			
Filer identification Number:			
Frier identification Numbers			

THE RESIDENCE OF THE PARTY OF T				
To Whom Paid Dolla	ır General		Date [MM/DD/YYYY] \$ 2/23/2025	5.30
	5051 Peach Street		Description of Expenditure	4 - 40.52 2 - 40.52 2 - 40.52
City Erie	State PA	Code 16509	Fundraiser Event Supplies	
To Whom Paid DeSa	antis Signs		Date [MM/DD/YYYY] \$ 4/2/2025	200.00
House # Stre	et Address 540 West 18th Street		Description of Expenditure	
Erie	State PA	Zip 16502	Yard Signs	
To Whom Paid VFW	Post 470		Date [MM/DD/MYY] \$ 2/28/2025	321.00
House # Stree	1808 West 26th Street		Description of Expenditure	
City Erie	State 1 PA	Zip Code , 16508	Fundraiser Event	
To Whom Paid Comm	nittee to Elect Jeremy Lightner		*Date [MM/DD/YYYY] \$. 3/21/2025	100.00
	PO Box 132		Description of Expenditure	
City Fairview	<b>State</b> PA	<b>Zip</b> 16415	Donation - Fundraiser Event	•
				w4
· 管 管理	n Falcons		Date [MM/DD/YYYY], \$\frac{1}{3}\f	100.00
Polish	431 East 3rd Street		i i i i i i i i i i i i i i i i i i i	100.00
Polish	er Address	Zip Code 16509	4/30/2025	100.00
House # Stree	431 East 3rd Street  State PA		A/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$ 3/3/2025	464.06
Polish House # Stree  City Erie  To Whom Paid Amaz  House # Stree	431 East 3rd Street  State PA		4/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$	464.06
House # Stree  City Erie  To Whom Paid Amaz	431 East 3rd Street  State PA		A/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$ 3/3/2025	464.06
Polish House # Stree  City Erie  To Whom Paid Amaz  House # Stree	431 East 3rd Street  State PA  con  State State	Code 16509	A/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$ 3/3/2025  Description of Expenditure	464.06
Polish House # Stree  City Erie  To Whom Paid Amaz  House # Stree  City  To Whom Paid Kirkla  House # Stree	431 East 3rd Street  State PA  con  State State	Code 16509	A/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$ 3/3/2025  Description of Expenditure  Parade Supplies  Date [MM/DD/YYYY] \$	464.06
House # Stree  City Erie  To Whom Paid Amaz  House # Stree  City  To Whom Paid Kirkla	Address 431 East 3rd Street  State PA  PA  State PA	Code 16509	A/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$ 3/3/2025  Description of Expenditure  Parade Supplies  Date [MM/DD/YYYY] \$ 2/7/2025	464.06
House # Stree  City Erie  To Whom Paid Amaz  House # Stree  City  To Whom Paid Kirkla  House # Stree	State PA  PA  PA  PA	Zip Code	A/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$ 3/3/2025  Description of Expenditure  Parade Supplies  Date [MM/DD/YYYY] \$ 2/7/2025  Description of Expenditure	464.06
Polish House # Stree  City Erie  To Whom Paid Amaz  House # Stree  City Erie  City Erie  To Whom Paid Kirkla	State PA  PA  PA  PA	Zip Code	A/30/2025  Description of Expenditure  Raffle Donation  Date [MM/DD/YYYY] \$ 3/3/2025  Description of Expenditure  Parade Supplies  Date [MM/DD/YYYY] \$ 2/7/2025  Description of Expenditure  Supplies for Raffle Baskets  Date [MM/DD/YYYY] \$	464.06 52.93

# Statement of Expenditures

Filer Identification Number:		•
[ - 조리의 전 :		

To Whom Paid	Dollar Tree			Date [MM/DD/YYYY] 4/25/2025	<b>\$</b> 37.72		
House #	Street Address 3708 Liberty Street		Description of Expenditure				
City Erie		State PA	Zip Code 16508	Basket Donation Supplie	Basket Donation Supplies		
To Whom Paid  Dollar General			Date [MM/DD/YYYY] 4/24/2025	<b>\$</b> 36.90			
House #	Street Address	5051 Peach Street		Description of Expendi	 ture		
City Erie		State PA	<b>Zip</b> 16509	Basket Donation Supplie	<u> (1985년) 1 2 1 5 일 (1985년) 1</u> 1 <b>S</b>		
To Whom Paid	Tops		Street Street   The Street Street	Date [MM/DD/YYYY] 2/25/2025	<b>\$</b> 150.00		
House #	Street Address 7	12 West 38th Street	,	Description of Expendi	ture		
City Erie		State PA	Zip Code 16508	Lottery Tickets for Raffle	Basket		
To Whom Paid	Amazon	Contraction	[ (Strong to Andrew to the ]	Date [MM/DD/YYYY] 4/15/2025	74.15		
House #	Street Address			Description of Expendi	ture		
City	ity State Zip Code			Basket Donation Supplies			
To Whom Paid	Tops	The section of the se	[macross Macros]	Date [MM/DD/YYYY] 3/15/2025	\$ 150.00		
House #	Street Address 7	12 West 38th Street		Description of Expendi	ture		
City Erie		State PA	Zip Code 16508	Lottery Tickets for Raffle	Baskets		
To Whom Paid	Kirklands		1	Date [MM/DD/YYYY] 2/13/2025	<b>\$</b> 187.85		
House #	Street Address 6	i00 Millcreek Mall		Description of Expenditure			
<b>City</b> Erie		State PA	Zip' 16565	Basket Donation Supplies	s		
To Whom Paid	Dollar General			Date [MM/DD/YYYY] 4/27/2025	<b>\$</b> 58.30		
House #	Street Address	5051 Peach Street		Description of Expendi	ture		
City Erie	The second of th	State PA	Zip Code 16509	Supplies for Signs	And the property of the country of the following of the control of		
To Whom Paid Wine & Spirits		Date [MM/DD/YYYY] 2/17/2025	\$ 131.03				
House #	House# Street Address 3702 Liberty Street		Description of Expenditure				
City Erie	<u> </u>	State PA	<b>Zip</b> 16508	Bottles for Donation Bask	cets		

#### 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.

	O
Filer Identification Number:	

Name of Creditor	Aubrea Hagerty-Haynes		Outstanding Balance of Debt
House # Stre	et Address 630 Edgevale Drive	# DATE DEBT INCURRED [MM/DD/YYYY]	\$
City 73	Erie State	3/16/2021  PA Zip 16509  16509	1309.10
Description of Debt	Loan to Committee (Signs)		· !
Name of Creditor	Aubrea Hagerty-Haynes		Outstanding Balance of Debt
House# Stre	et Address 630 Edgevale Drive	DATE DEBT INCURRED [MM/DD/YYYY]  3/30/2021	\$
City	Erie State	PA <b>Zip</b> 16509	489.06
Description of Debr	Loan to Committee (Shirts)		1990/00/201 -
Name of Creditor	Aubrea Hagerty-Haynes		Outstanding Balance of Debt.
House # Stre	et Address 630 Edgevale Drive	DATE DEBT INCURRED.**  [MM/DD/YYYY]  3/30/2021	
City 18	State Erie	PA <b>Zip</b> 16509	110.00
Description of Debt	Loan to Committee (Stamps)		
Name of Creditor	Aubrea Hagerty-Haynes		Outstanding Balance of Debt
House # Stre	et Address 630 Edgevale Drive	DATE DEBT INCURRED IN IMM/DD/YYYY] 1344 4/16/2021	
City Description of Debt	Erie State	PA <b>Zip</b> 16509	149.05
	Loan to Committee (Wood for signs)		
THE SAME A	Aubrea Hagerty-Haynes		Outstanding Balance of Debt
	630 Edgevale Drive	DATE DEBT INCURRED [MM/DD/YYYY]). 5/20/2021	\$ 
City	Erie State	PA <b>Zip</b> 16509	100.00
Description of Debt	Water for AKT Run Donation	- ADAM (MIL	
2012 2 TA 1	Aubrea Hagerty-Haynes		Outstanding Balance of Debt
House # Stree	630 Edgevale Drive	DATE DEBT INCURRED [MM/DD/YYYY] 7/3/2021	
City	Erie	PA <b>Zip</b> 16509	44.96
Description of Debt	Loan to Committee (Candy for parade)	CP and a second	

#### **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:

Name of Creditor	Aubrea Hagerty-Haynes		Outstanding Balance of Debt
House # Str	630 Edgevale Drive	DEBT INCURRED IM/DD/YYYY] 10/8/2021	\$
City	State	;	35.40
Description of Debt	Loan to Committee (sand bags for campaign signs)		
Name of Creditor	Aubrea Hagerty-Haynes		Outstanding Balance of Debt
House # Str	630 Edgevale Drive	DEBTINGURRED M/DD/YYYY] 10/7/2021	<b>\$</b>
City		Zip Code 16509	58.18
Description of Debt 4	Loan to Committee (wood for campaign signs)		
Name of Creditor		DEBT INCURRED	Outstanding Balance of Debt
		M/DD/YYYY)	
City (City (City))		Zip Code	
Description of Debt			
Name of Creditor Stre		DEBT INCURRED	Outstanding Balance of Debt S.
		M/DD/YYYY]	
City	#State	Zip Code	
Description of Debt	·		
Name of Creditor		<b>5</b>	Outstanding Balance of Debt
	S. S. MI	MADENKAAR	<b>S</b>
City	State :	Zip Code	
Description of Debt			
Name of Creditor			Ourstanding Balance of Debt
House #		DEBT INCURRED W/DD/YYYY]	\$
City!	State	Zip 🙄 🖁	
Description of Debt			

### 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:	

Name of Creditor	Aubrea Hagerty-Haynes	Outstanding Balance of Debt
House # Str	pate incurred  630 Edgevale Drive  7/4/2021	
City	Erie State PA Gode 16509	117.00
Description of Debt	Loan to Committee (Candy for parade)	
Name of Creditor	Aubrea Hagerty-Haynes	Outstanding Balance of Debt
House # Stre	DATE DEBT INCURRED  630 Edgevale Drive  8/7/2021	\$
City	Erie State PA Zip 16509	76.28
Description of Debt 2	Loan to Committee (Candy for parade)	
Name of Creditor	Aubrea Hagerty-Haynes	Outstanding Balance of Debt
	Eet Address  DATE DEBT INCURRED = [MM/OD/XXXY]  630 Edgevale Drive 9/12/2021	
City 5	Erie State PA Zip Code 16509	35.72
Description of Debt	Loan to Committee (Bubbles for parade)	
Name of Creditor	Aubrea Hagerty-Haynes	Outstanding Balance of Debt
House# Stre	Eet Address 630 Edgevale Drive 8/5/2021	. <b>S</b>
City 1	Erie State PA Code 16509	21.18
Description of Debt	Loan to Committee (Bubbles for parade)	
Name of Creditor	Aubrea Hagerty-Haynes	Outstanding Balance of Debt
	et Address 630 Edgevale Drive (MM/DD/YYYY) 8/5/2021	\$
City	Erie PA Zip 16509	13.48
Description of Debt	Loan to Committee (Bubbles for parade)	
Name of Creditor	Aubrea Hagerty-Haynes	Outstanding Balance of Debt
House # Stre	et Address 630 Edgevale Drive 9/17/2021	
City	Erie State PA Code 16509	84.62
Description of Debt #5	Loan to Committee (Candy for parade)	



#### **Pennsylvania Department of State**

Bureau of Campaign Finance & Civic Engagement 210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4) <a href="https://www.dos.pa.gov/campaignfinance">www.dos.pa.gov/campaignfinance</a> • <a href="mailto:ra-stcampaignfinance@pa.gov">ra-stcampaignfinance@pa.gov</a>

## 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.

Name of Filing	Committee, Can	didate, or Lobby	rist		E 11.2
Reporting Cycle	Name				
☐ <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	Cycle 2  2 <sup>nd</sup> Friday  Pre-Primary	☐ Cycle 3 30 Day Post Primary	6 <sup>th</sup> T	Cycle 4 uesday Election	☐ <b>Cycle 5</b> 2 <sup>nd</sup> Friday  Pre-Election
☐ Cycle 6  30 Day Post-Election	☐ Cycle 7  Annual Report	☐ <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special	l Election	•	cle 9 ost-Special Election

**Part I** - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist 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

Date (DD/MM/YYYY)

Heather Maciulewicz

Erie PA USA

Printed Name

Location (City/State/Country)



#### **Pennsylvania Department of State**

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**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 of Abbyrict

Date (DD/MM/YYYY)

**Printed Name** 

Location (City/State/Country)