

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

	Principal Control of Control Control Control Control Control		- ` 						a be typea	<u>, </u>			
	Filer Identification Number	EIN #47-4		Repo	rt Filed I rk X)	3y Candid	ate.		Committee		X	Lobbyist	
	Name of Filing Comm Lobbyist			Comm	ittee to El	ect Horan-Kunco			, , , , , , , , , , , , , , , , , , , ,				.,,
	Street Address			439 W	est Arling	ton Rd.					•	· · · · · · · · ·	
	City	Erie	ans vasining min	i <u>l</u>		State	PA		Zip Code	16509			
	Type of Report (Place	x under repo	rt type)										
	1: 6 th Tuesday 2-(2)	Friday 3-	30 Day Post	4-6th	Tuesday	5-2nd Friday	6-30 Day	/ Post	7- Annual 😘	Special 2 ⁿ	Friday	Special 30 D	
	Pre-Primary Pre-P	rimary Pri	mary	Pre-E	lection	Pre- Election	Election			Pre-Electi	on 🕒 📑	Post-Electio	n
								(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	X		ere a d'anne par et de charle e rafig	X OF A CONTRACTOR OF THE CONTRACTOR OF T	odustrisakii
	Date Of Election (MIM/DD/YYYY)		11/8/11	Year		2018	Amendm Report			Terminati Report			
	Summary of Receipts Expenditures	and West Fro	m Date		To Date	. Regional and the second			THE STATE OF THE S	Office Use C	Chick Constitution of		ngane soan
	Expenditures 🕬 🔭		om Date										
	The state of the state of		1/1/18	termit A	1	2/31/18				多种种的			
	A Amount Brought Fo				:	3884.73							
	(From Schedule I)		no Receipts	Ş		0						<u>ن</u> (سر	
	C Total Funds Availab (Sum of Lines A and B)	le		\$	\$	3884.73				;		Encode 1970 a 1970 a Constant Constant	
	D. Total Expenditures (From Schedule III)			\$	2	2274.00					33 73		
	E. Ending Cash Balance (Subtract Line Difrom	Line C)		\$	1	1610.73						 고:	ļ
	F Value of In-Kind Cor (From Schedule II)		翻 化铁线	\$		0						350	
	G. Unpaid Debts and C (From Schedule IV)	Obligations		\$		0		_			•		
,	Death I little: in Company					Affidavit Sec	tion						
	Part 1- If this is a Committed I swear (or affirm) that this	is report, tre	asurer sign ne ding the attac	re. If the	is is a Can edules on	paper, is to the	ndidate sign oest of my kr	here. nowledge	and belief tru	e. correct an	d complet	<u> </u>	
	Sworn to and subscribed b						X = 0	`\	. 1	,	a tampici		
•	3 SE day of JO	muary	0_19	_	'1	_/	X/at	<u> </u>		torco			}
	mia	(,,) (#		ļ.,	•	Sign	iature of i	Person Submit		,)	_	
	Signatu	re		-		_	140		Printed Name	405	\$1 ~		
	My Commission expires	4-3-1	9		• •		VIR.		26	6 · 00	RPC		
COV	MONWEALTH OF PE	MPSYLVAR	AY YR.	_		A	rea Code	•	Dayti	ime Telepho	ne Numbe	r	
	Part II J. Haisvina report of	a Candidate's	Authorized (Committ	tee, candi	date shall sign he	re.				-	 	
	I swear (or affirm) that to	the best of my						ed any pi	ovisions of th	e Act of June	3, 1937 (F	P.L. 1333, NO.32	:0) as
MEME	MYCOAAAission Expires Ap ER. PENNSYLVANIA ASSOCIAT	ION OF NOTAR	J IES										1
	Sworn to and subscribed b	efore me this	10				λ.	1/.	4.				
ļ	day of	nucyyy2	0_19		1	\subseteq	X-11	Simon				_	
	Jama U Signatur	wilt.			,		Pessi	CA	re of Candida	1 - K	unc	<u>~</u> 0	
	My Commission expires	1-3-1	9		, '		814			154-	056	7	.
		MO. DAY	YR.	=		Ai	ea Code			e Telephone			
Į	<u>:</u>		·										
COL	MONWEALTH OF PE	MAICVIVAN	II A										

NOTARIAL SEAL Tonia Wilt, Notary Public City of Erie, Erie County My Commission Expires April 3, 2019 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer, Identification Numbers Committee to Elect Horan-Kunco	
1 Uniterrized Contributions and Receipts-\$50.00 or Less per Contributor	
Total for the reporting period (1)	\$ 0
2-)Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$
Total for the reporting period (2)	\$ 0
3. Contributions Over \$250.00 (From Part C'and Part D)	
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$
Total for the reporting period (3)	\$ 0
14: Other Receipts-Refunds, Interest Earned, Returned Checks; ETC: (From Part E)	
Total for the reporting period (4)	\$

Total Monetary Contributions and Receipts during this reporting period (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report

Cover Page, Item B)

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00 Use this Part to itemize only contributions received from Political Committees with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification Number.	Committee to Elect Horan-Ku	inco		
		,		Amount
Full Name of Contributing Committee			Date [MM/DD/YYYY] \$	
	Pour and Committee of the Committee of t	 	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
House # Street A	\$200 PER		Date [MM/DD/YYYY] \$	
Gry C	State .	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing				
Committee ()			Date [MM/DD/YYYY]	
House # Street A	ddress		Date [MM/DD/YYYY] S	· · · · · · · · · · · · · · · · · · ·
Gity	Ctate	Zip Code	Date [MM/DD/YYYY] \$	
	State	ZIP CODE		
Full Name of Contributing Committee			Date [MM/DD/YYYY] \$	
House # Street A	ddress		Date [MM/DD/YYYY] \$ \$	
House'# Street A				
City (State	Zip Code	Date [MM/OD/YYYY] \$	
Full Name of Contributing Committee			Date [MM/DD/YYYY] \$	
House # Street A	ddress		Date [MM/DD/YYYY] \$	
	State	Zip Code	Date IMM/DD/yyyy) S	
City	State		Date [MM/DD/YYYY] = \$	
Full Name of Contributing Committee			Date [MM/DD/YYYY] S	
House # Street Ac	ddress		Date [MM/DD/YYYY] \$	
Chy	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing	[45] 烈用种种			
Committee	Total State (Carlot)			
House ## Street Ac	ldress		Date [MM/DD/WYY] S	
House # Street Ac	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.)

Fileridentuicenon Number	Committee to Elect Horar	n-Kunco			
THE PROPERTY OF THE PROPERTY OF				Date [MM/DD//YYYY](8	X .
Thousest: State	ericadices			Date (MM/DD/YYYY)	
(eltv)	State	Zipi Godi	e de la companya de l	Date [MM/DD/MMM] is S	2
##UNEmerole@httlbutor				Date [MM/DD//////]	
litorsaii: She	ev/Address			Date [MM/DD/M/M/) S	
(GILY)	State	Zip Godi		Date [MM/DD/AYYYA] S	
FUILING INCOMEDITION	A STATE OF THE STA			Date [MM/DD/YYYY] S	A STATE OF THE STA
House # Sire	eet/Address	THE CONTROL OF THE CO		Date[[MM/DD//////]] S	
City	State	Zip.Code		Date [MM/DD/MY/M) it S	
สามารถสากสามารถ				Date IMM/DD//////II S	
Housekii Sina	et/Address	N.F.	Î	Date (MM/DD/MMM)	
(নাম)	State	Zipkeode 1		Date [MM/DD/;Y/(Y)] S	
Full Name of Contributor				Date (MIM//DD/AAAA) S	A Property of the Control of the Con
Houself, Street	erAddress	The state of the s		Date [MM/DD/mm/M] S	ĝi .
(elux)	State	. Zipi ¢ode		Date (MM/DD/AAAA)	
Eulli Nem kolicom ilbuto,				Date [MM/DD//WW/]	
Nouse: Street	avatidhas	W2 - 2-40_3H14		Date[[MM/DD/MMA]]	
(बार्)	State	Zip@ode		Date[MM/DD/YWY]	

PART C

Contributions Received From Political Committees

Over \$250.00

taller identification Number

Use this Part to itemize only contributions received from Political Committees with an aggregate value over \$250.00 in the reporting period.

Committee	ee to Elect Horan-Kunco			
[#J][NEmeoff (contributingcommitte)			Date [MM/DD/YMM]	WHITE SECTION OF THE
(Housette Street Addite	255 40		Date IMM/DD/YYYY) & \$	Williams
G(i)	State	Zip Code si	Date:[MM/DD/XXXX] \$	CC 32355555
Rullivamedo Contributina Committea	[dama[sectration].]	1 Name and the Section of Control	Date [MM/DD/XXXX]	
Street Addic	155 155		Date(IMM/DD/MMM)	
Party .	Sate	Zipi¢ode	Date [MM/DD/XXXX] (5	
्रवर्गाणसम्बद्धाः व्यवस्यानसम्बद्धाः			Date (MM/DD/YYYY)	
(House);; Street Addite	ess III		Date (MM/DD/////()	
(GIT)	State	Zipicode Li	Date (MM/OD/AWW)	
િત્યાપિતાલર્જિ ContabutingCommittee			Date MM/DD/WW	
Rouse III Street Addre			Patelimin//PP/AAAA	
Polity	State	Zip code	NDSTE (MM/DD/MAM) S	\$
Hull/Nameof Contributing committee			*Date [MM//DD///////] \$	
Hayadi SireevAttije			Date [MM/DD/YYYY] S	
lejty	State	Zipicode	Pate (MM/DD/MMM)	
નિમામાં ભાગ તે. (જામમાં કે પ્રોતાનું ઉભાગામાં ઉભાગ (જામમાં કે પ્રાથમિક સ્ટામિક સ			Date [MM/DD/MM/] S	i
Houseall Street/Addre	SS		Chate (MM/DD///////)	
(elty)	State	Zip(Gode)	Date (MM/DD/XXXX)	

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)

Fileridentification Number (Commit	tee to Elect Horan-Kunco	
HRU Alemerik den tributer		Date [MM/DD/XXXXX]
Poure#. Single Add.		Date [MM/DD/MY/M] ### \$
efty Fampleye#Name	State Zip Code II	Date (MM/DD/MM/)
rangio) and mus rangalyspa (Malling AXCd) as w/ rangalyspa (Malling AXCd) as w/		
Taulanamadacon (albumor		Date (MM/QD/YYYM) S
House() Sargay/Mid.	SSS SSS SSSS SSSS SSSS SSSS SSSS SSSS SSSS	Date [MM//DD/M///)] S
OLY	State //Zip/Gode	
Jangleya Name Jangleya Walling Alchesy Jangga Na karengan Janggas		Occupation
न्याम्य <u>म्</u> त्रवाहरूत्वन्त्रम्यस्य		Date [MM/DD/MMM]
#House## Strzest/scidiz		Date[MM/DD/XXXX]
(CITY)	State Zip Code	Date (MM/DD/XYYY)
Emiska Richel Emiska Richelling Excellence 		Occupation
Raheipal Placeo (Bysiness		Date [MM/DD/YYYY]
Gover:// Succeit/cdix		Date (MM//DD/XYXM) S
ety	State Zip Code	Date(IMIM/Jod/AAAA)
Emeloyer Name		Occupation

PART E

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

AEGUNALODENINESSES	Committee to Elect Horan-Kunco
HEOLOGICA TO THE TOTAL THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TOTAL TOTAL TOTAL TO THE TOTAL TOT	
FullName Storsert She	etyAddress (Address (Address)
Gity.	State Zip Code Code
Roll (Varme	te Address
Forse!" Stre	State Zip Date IMM/DD/MYY) State Code
REGERENCE PRESENTATION	(Markethorographical) (Notewardersteinstein) (Notewardersteinstein)
SBUJNETTICS	
Housess Stre	TcAddress State: Zip Pate: Date: MM/DD/MYYY) \$3
Horself, Stee	State Zip Date (MM/DD//YYYY) \$ Code Code Code Code Code Code Code Code
Receipt Description	[4] 医对种条件结形
EUI/Name	
Houselff Street	TACCICES TACCICES THE CONTROL OF T
CHV	State Zip Date (MM/DD/YYYY) \$ Codes
તિલયોજ્ઞ ભવસ્ત્રીઇનીજા	[WASSERD WASSERD TELEVISION
Foll Name	HERMINES IN SEC.
स्राच्याकारः । । । । । । । । । । । । । । । । । । ।	CAddress States Enland
	State Zip Date MM//DD/YYYY) Code
िहित्तवीर्धः हिह्नसीर्धनका	[PARPER [PARPENTED]] [PARPERTED]
Fill Name	ANNAHUMAHAM
Chousell such	CADOTESS STATE ZIGNESS ZOATE ZIGNESS ZIGNESS
	State: Zip Date:[MM//DD//YYYY/] S Codes
Reading (Execulation	

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

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

File i dentification Number Committee to Ele	ct Horan-Kunco		
ar , intribitativitgeriying Golyhsisinin	KSREGENZEDAVALULEGE S50	00 C	ORILESS PER CONTRIBUTOR M 1885 1885 1885 1885 1885 1885 1885 1885 1885
TOTAL for the reporting period	(1)	\$	0
2 INKIND CONTRIBUTIONS RESERVED	ALUE @F\$5600/ito;\$250	00 (FI	ROMPARTE)
TOTAL for the reporting period	(2)	\$	0
S INTERIOR TO THE STATE OF THE	ALUE OVER \$250 00 (FROM	PAR	(1 G)
TOTAL for the reporting period	(3)	\$	0
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DU		\$	
PERIOD (Add and enter amount totals from boo on Page 1, Report Cover Page, Item F)	kes 1, 2, and 3; also enter		0
		L	

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Fileridentification Number Co	mmittee to Elect Horan-Kunco)		
FULLINE INTERO (Contributo):			Date [MM/DD/YYYY]	
liouse/f#.	Address		Date [MM/DD/YYYM]	
Gity	State	Zipicode.	Date (MM/DD/XYYY)]	
Description of Confedentian			<u> </u>	
Full Name of Contributor			(Date[IMM/DD/MYYY])	
(Flores#) Street/	Address		(Date [MM/DD/MM]) (S)	
(ବାଙ୍ 	State	Z[p Code]	Date [MM/DD/WYW] S	
Desaibสอกอังจักสิโมนีสือก				
izullizetinieso@contributore			Date[[MM/lpc//xyyy] \$5	
Glity	(diress		Date((NM)/DD)/AAAA] \$3	
	State	Zip,€ode,	Date (MM/DD/YYYY)]	
क्षित्रकात्रिका अंग्रिकात्रीक्षिका				
Vanil Nameroj (contributor)			Date [MM//DD/MY//] \$	
Houseld Street			Date (MM/DD/MY//II) S	
Glay Description of contribution	State.	Zip Code	Date (MM/DD/xxxx) \$5	
Total de la contra la cont			<u> </u>	
l-ulliName of Contributor			Date [MM//DD//YYY]	
House: Stream.	ddress		Date[[MM//DD///YY]] S	
e q t v	State?	Zip.Code #	Date (MM)/DD/MY/Y/I	
किन्द्रग्रीकालाला स्थापात्रा ।				

SCHEDULE II Part G

In-Kind Contributions Received

VALUE OVER \$250

l Fileri identification (Number) The Committee to Elect Horan-Ki
--

	·	
มลาปมนอกกษณฑ <i>อ</i> ดสอากาสเซตเซอ		Date (MM/DD/WW)
lilouse## Street/Address		*Date IMM/DD/YYYYI ***
	State Zip Code	Date [IMM/DD/YYYYY]
Employer/Name		Occupation
amployenMellin (Afdres: //Paincipell Biletcog(Guelhets		(Description) starting of the contribution of
Pull Namao reomitorio:		#Date [MM/DD/YYYY] % \$
Mouses street/Address		Date: MM/DD/YYYY
raty .	State 7/ip/code	Pate[[MIV/PD/XYYY]] S
Hindbyer (Aprile		Occupation
(amployen/XeIII)) py/storess//PAllidipel) (Pletero i Bueligess		Description & Contribution & Contrib
Momelance Securifilities		Pate (MM//DP/YYYY)) 5
House## Street/Address		[Date [MM/DD/XXXX]]
(GIV)		ADate [MM/DD/MM]
famaloyer(Jenne		Occupation
famaloger (Artite familoger(Veilling/AVG)::85://Faligatel faltes of Pusinges		Description and of the contribution of the con
Figure Newmark		Date [MM/DD/YYYY] 344
Houseiii StrieerAddress		Date [MM/DD//YYM]
Gity 1	State Zip(code	IPate IMM/QP/MYMIII # 15
emřeží nevolcimEl		Occupation .
Bingleyer(Yelling/Yeldises/Perhape) Obeset/Pusiness		Description is of a second sec

SCHEDULE III Statement of Expenditures

File/Identification:Number:	Committee to Elect Horan-Kunco		

AT COMPANY OF THE SERVE		Date MM/DD/MYM SS	
To Whom Pald Mercyhurst Preparatory School	ot	1/27/18	and the same of
House 538 Street Address East Grand		Description of Expenditure	
+MANAGERS NO.	PA Code 16		
ToWhom Paid / Friends of Rick Filippi		5/2/18 250.00	
(House) Street Address		Description of Expenditures	
iGity.	Zípi Code	campaign contribution	
ITOW hom: Paid Ellen Curry Foundation		#Date:[MM//DD//YYY1] \$ 5 8/2/18 750.00	
House 1 606 Street Address Holland St.		Description of Expenditure	
Gity Erie	PA Zip 165	Scholarship donation	
To Whom Paid DiNicola for Congress		Date [MIV/DD/YYYY]	
Houself 1001 Street Addless State St.		Description of Expenditure	
Erie Stat	PA Zip 16.	campaign contribution	
rto Whomi Pald Citizens Bank		#Date [MM/DD/YYYY]	
House II Street Address Light 1 Street Address Citizens Pla	za	Description of Expenditure	
Providence	RI Zip Gode 029	bank statement fee	
iToWhom/Raid		Date [MM/DD/YYYY]	
Modser: SweatAddress		Description of Expenditure	
S(F)	Zipia Code		
To:WhomPatel		Description of Expenditure # 2845	
Rouse III Street Address		Description of Expenditure	
City Stat	Zip Code		
TCW/born/Patd		IDate [MM/DD/MYM]: \$5	
House## Street/Address		(Description of Expenditure	
SIA	Zip (Gode		

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.

alleridentillerion Nimbea	Committee to Elect Horan-Kunco
Name of Creditor Nouse::: Gity Description of Debt	Outstanding Balance of Debt DATE DEBT NCURRED [MM/DD/Y/YY] State Zip Code
Name of Greditor Stree House ## Stree Gity Despition of Debt	Codesia Outstanding Balance of Debt (Codesia
Gity Person of P	State Zion Zion Zion Zion Zion Zion Zion Zion
Name of Gration House, Since (dig)	DATE DEBT: NCURRED IMM/OD//W/V/I State Code Code
Remeol/Gradico) Riouse III. Givi Desaijation of Pab	#Address #DATE DEBTINCURRED #STATE #IMM//DD///YYY/I ###############################
Namieo (Agradito) (Rouse 9) Street	Outstanding Balance of Debt (1) VAddress DATE DEBT INCURRED (1) State Zip Code