

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number		Report Filed By (Mark X)		By Candi	Candidate		Committee		X	Lobbyist	
Name of Filing Committee, Candidate or Lobbyist Friends of Marcus				Marcus Jacobs PAC							
Street Address	rasinings a vi Saromets vijest	en vervenden in de Stadende diskere	2517	Bird Driv	e						
City	Erie	·			State	PA		Zip Code	16510		
Type of Report (F											
1-6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary		4-6 ^{th T} Pre-El	211111111111111111111111111111111111111	5- 2 nd Frida Pre- Electio	bit years approved to the high style of the style of	****************	7- Annual	Special 2" Pre-Election	**********************	Special 30 Day Post-Election
	\boxtimes										
Date Of Election (MM/DD/YYYY)		05/20/25	Year	gounus Dali ili	2025	Amendn Report	ent		Terminati Report	on	
Summary of Rec	eipts and	From Date		To Date			4044	For	Office Use C	inly	
Expenditures		01/01/2025		05	/05/2025		in El a				
A. Amount Broug					0					<	2
B. Total Monetar (From Schedule I		ns and Receipts	\$	27	50					010	2025 MAY
C. Total Funds Av			\$	A CONTRACT		12,=	75¢)		PA DE	
D. Total Expendit (From Schedule I	ures		\$	217	31.63	<u> </u>					9
E. Ending Cash Ba	alance		\$	<u>~.</u>	8.3	7.					2
(Subtract Line D : F. Value of In-Kin	Box telusory Real Education Colored	ns Received	\$	61	S • J	4					Ö
(From Schedule I G. Unpaid Debts		ns in the	\$	~ .	<u> </u>	_				2	င္ဆ
(From Schedule I			7	97	300						
Part 1- If this is a Co					date report,			:			
I swear (or affirm) t Sworn to and subsc			ched sch	edules or	Sper, is so th	e Sest of my k	nowledg	e and belief tr	ue, correct an	d comple	te.
day of_	May	_20,25		. 1	ny Pu ny Pu mber 4558	§ Jar	rlre	rd,	Mone	لعاد	 .
-Karr	un E	Than	بربا	- -	/lvani Nota Inty Dece	S Sig	nature of ハロディ	Person Subm		<u> تعاد ح</u>	
	ignature /) _	20-20		, [ayer, ayer, e Cou	ا د ا		Printed Name	-1 17	ダ フ	
My Commission exp	MO.	DAY YR.	<u>- 0</u>		aith of Penns n E. Thayer, Erle Cor sion expires	Area Code			time Telepho		er
Part II- If this is a rep	oort of a Candid	ate's Authorized	Commit	tee, cand	date_shallaig	H e re.					
I swear (or affirm) to amended.	hat to the best o	f my knowledge a	ınd belie	f this pol	tigan tomreitte	e las not viola	ited any p	provisions of th	ne Act of June	3, 1937 (P.L. 1333, NO.320) as
Sworn to and subsci	ibed before me	this	_	ļ	, Sea	vries /			,		74,
day of 1	May	20 <u>QS</u>	- .	. [otary ublic r 20, 2	JE Man	Lez_	TA-G	aule		
Law	en E	Than	γW		ary Pub ary Pub ember 2	Nav	Signa Sul	ture of Candid	Jacol	13	
	gnature) 	3	, I	Sylvar Not: Unity Dece	i A	P	rinted Name	a o	7 -	,
My Commission exp	ires /OL O. MO.	DAY YR.	_0		of Pennsylva Thayer, Not Erie County expires Dec	Agea Code	-	Dayti	me Telephone	Number	4
					Ith of E. Th Er Er ion ex	nsytva					
					Commonwealth of Pennsylvania - Notary Lauren E. Thayer, Notary Public Erie County My commission expires December 20, 30, 300 Commission number 1455865	Member, Pennsylvage Temporal Control					
					ommo Lí y corr C	empe					•
				ì	ರ \$`	₹ 5					\$

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer (dentification Number	
Filer (dentification Number	

1. Uniternized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	50
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		(5) (6)	
Contributions Received from Political Committees (Part A)		\$	0
All Other Contributions (Part B)		\$	700
Total for the reporting period	(2)	\$	700
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	0
All Other Contributions (Part D)		\$	0.
Total for the reporting period	(3)	\$	
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	0
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, Rep Cover Page, Item B)	ort	\$	750

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.

Piler identification					
					Amount
Full Name of Con	tributing			Date [MM/DD/YYYY]	. S
Committee					
House#	Street Address			Date [MM/DD/YYYY]	S
					200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City		State	Zip Code	Date [MM/DD/YYYY]	S.
Full Name of Con	tributing	000000000000000000000000000000000000000		Date [MM/DD/YYYY]	\$
Committee					
House #	Street Address				
ilouse #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
	energy and the rest and delicated and delica				
Full Name of Cont Committee	tributing			Date [MM/DD/YYYY]	\$
House#	Street Address			Date [MM/DD/YYYY]	\$
City	erstie s traiteli eliminaus	State	Zip Code	Date [MM/DD/YYYY]	Š
			Constitution		
Full Name of Cont	tributing	•		Date [MM/DD/YYYY]	\$2
Committee	eranian i				
House #	Street Address			Date [MM/DD/YYYY]	\$
prosper Carp					
City	. figlicitivitini interiori interiori	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Cont	ributing	Minimum to be a second of the		Date [MM/DD/YYYY]	\$
Committee					
House#	Street Address			Both INMA/OD/WOOM	
nouse #	Street Address			Date [MM/DD/YYYY]	\$
		N. Atavata			
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Cont Committee	ributing			Date [MM/DD/YYYY]	. \$
					inii
House#	Street Address			Date [MM/DD/YYYY]	\$
				00000	ii.
City		State	Zip Code	Date [MM/DD/YYYY]	\$
36.30				2000	

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:	
Filer Identification Number:	

Full Name of Contributor	Marcus Jacobs		100
		04/02/2025	100
House # 2517	reet Address	Date [MM/DD/YYYY]	3
	Bird Drive		
City Erie	State PA Zip Code 16510	Date [MM/DD/YYYY] S	S
Ene	PA June 1 June 1 Too 10		
Full Name of Contributor		Date [MM/DD/YYYY] \$	
	Dusckas Funeral & Cremation Services Inc	04/03/2025	100
	reet Address	Date [MM/DD/YYYY] 5	
2607	Buffalo Road		
City	State Zip Code	Date [MM/DD/YYYY] \$	
Erie	PA 16510		
Full Name of Contributor		Date [MM/DD/YYYY] \$	
	Regina Julius	04/16/2025	100
House # St	reet Address	Date [MM/DD/YYYY] \$	
2914	Woodlawn Áve		
City .	State Zip Code	Date [MM/DD/YYYY] \$	i
Erie	PA 16510		
Full Name of Contributor			
		I liate IMM/III/YYYYI I S	
	Nancy Mindek	Date [MM/DD/YYYY] \$	100
Horse#	Nancy Mindek	04/11/2025	100
House #			100
4913	Nancy Mindek eet Address Koehler Road	04/11/2025 Date [MM/DD/YYYY] \$	100
	Nancy Mindek eet Address	04/11/2025	100
City Erie	Nancy Mindek reet Address Koehler Road State PA Zip Code 16510	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	100
4913 City	Nancy Mindek reet Address Koehler Road State PA Zip Code 16510	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	100
City Erie Full Name of Contributor	Nancy Mindek eet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025	100
City Erie Full Name of Contributor	Nancy Mindek eet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow eet Address	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	100
City Erie Full Name of Contributor House # 3215	Nancy Mindek eet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow eet Address Francis Street	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025 Date [MM/DD/YYYY] \$	100
City Erie Full Name of Contributor House # Str	Nancy Mindek eet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow eet Address	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025	100
City Erie Full Name of Contributor House # 3215 City Erie	Nancy Mindek Teet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow Trancis Street State PA Zip Code 16510	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025 Date [MM/DD/YYYY] \$ O4/17/2025 Date [MM/DD/YYYY] \$	100
City Erie Full Name of Contributor House # 3215	Nancy Mindek Feet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow Francis Street State PA Zip Code 16510	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025 Date [MM/DD/YYYY] \$	100
City Erie Full Name of Contributor House # 3215 City Erie Full Name of Contributor	Nancy Mindek Teet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow Trancis Street State PA Zip Code 16510 Doris Cipolla	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	100
Full Name of Contributor House # 3215 City Erie Full Name of Contributor House # Str	Nancy Mindek Feet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow Francis Street State PA Zip Code 16510 Doris Cipolla Eet Address	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025 Date [MM/DD/YYYY] \$ O4/17/2025 Date [MM/DD/YYYY] \$	100
City Erie Full Name of Contributor House # 3215 City Erie Full Name of Contributor	Nancy Mindek Teet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow Trancis Street State PA Zip Code 16510 Doris Cipolla	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	100
Full Name of Contributor House # 3215 City Erie Full Name of Contributor House # Str	Nancy Mindek Feet Address Koehler Road State PA Zip Code 16510 Sandra and Ronald Morrow Francis Street State PA Zip Code 16510 Doris Cipolla Eet Address	04/11/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ 04/17/2025 Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	100

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.)

Full Name of Contributor	ži			
Full Name or Contribution	Sergio Garnica & Maria Saldana		Date [MM/DD/YYYY] \$ 05/01/2025	100
House # Stre	eet Address Station Road		Date [MM/DD/YYYY] \$	
City Erie	State PA	Zip Code 16510	Date [MM/DD/YYYY] \$	
Full Name of Contributor			Date [MM/DD/YYYY] 5	
House # Stre	eet Address		Date [MM/DD/YYYY] \$	
City English	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Stre	eet Address		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributor			Date [MM/DD/YYYY] \$	
	eet Address		Date [MM/DD/YYYY] \$	
City 1	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Stre	eet Address		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Stre	et Address		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/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:

Full Name of			Date [MM/DD/YYYY]	\$
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY] :	
City	State	Zip Code	Date [MM/DD/YYYY]	\$
		e es se constant de la constant de l		
Full Name of			Date [MM/DD/YYYY] 2	
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY]	
			- I	
City	State	Zip Code	Date [MM/DD/YYYY]	.
		Harris Africa Caracana		
Full Name of			Date [MM/DD/YYYY]	
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY] 5	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of			Date [MM/DD/YYYY] 5	
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY] \$	
City.	State	Zip Gode	Date [MM/DD/YYYY] \$	
ERONALIA EL				
Full Name of			Date [MM/DD/YYYY] \$	
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
			[2.5]	
Full Name of			Date [MM/DD/YYYY] \$	
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY] \$	
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)

Full Name of Contributor	Moreus	Jacobs	Date [MM/DD/YYYY 0円/03(20	325 2000
2517	et Address Bird		Date [MM/DD/YYYY]	2 (1) (2) (3) (3) (3) (3) (3) (3) (3) (3) (3) (3
City Erve			>(O Date [MM/DD/YYYY]	
Employer Name	West	eyville Bor	rough Occupation M	ormover
Employer Mailing Address / Principal Place of Business	3421	Bulfalo	rough occupation M. Road, Eriz,	PA,16510
Full Name of Contributor			Date [MM/DD/YYYY]	
House # Street	et Address		Date [MM/DD/YYYY]	1 3
City.	State	Zip Code	Date [MM/DD/YYYY]	
Employer Name	Programme of the second		Occupation	
Employer Mailing Address / Principal Place of Business				
Full Name of Contributor	A CONTRACTOR OF THE CONTRACTOR		Date [MM/DD/YYYY]	
	et Address		Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/YYYY]	
Employer Name			Occupation	TO M MIN.
Employer Mailing Address / Principal Place of Business				
Full Name of Contributor	Manufacture or market and a second or market		Date [MM/DD/YYYY]	1661 1665 1866
	t Address		Date [MM/DD/YYYY]	
City	State	Zip Code	Date [MM/DD/YYYY]	
Employer Name Employer Mailing Address /	ggindadh.		Occupation	
Principal Place of Rusiness				

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 Number				ender var en	1
Full Name			•		
House # Si	treet Address				4
City		State	Zip Code	Date [MM/DD/YYYY]	4 \$
Receipt Description					
Full Name					,
A Section Conference on the Co	treet Address				000 Q00 * 001
City But to the second		State	Zip Gode	Date [MM/DD/YYYY]	.
Receipt Description					
Full Name					
	reet Address				
City		State	Zip Code	Date [MM/DD/YYYY]	
Receipt Description		EBB Mensor and the control of	\$ 20° co milescore de la facilitación	1	10000001
Full Name					
	reet Address				30 S. W. W.
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Receipt Description					
Full Name					
House # St City	reet Address	State	Zip	Date [MM/DD/YYYY]	\$
			Code:		
Receipt Description	\$65 645 645 645 645				
Full Name					
	reet Address		a -, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	h-leshawka mane	The Arm
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:	· .		Carlos Carlos	W71.07	
1 UNITEMIZED IN KIND CON	HARRESONGERS CONTRACT	HIJE OE SSA ADVORJUESS	PER-CONTRIBUTOR		
TOTAL for the reporting period	(1)				
2 IN-KIND CONTRIBUTIONS R	ECCIVED-VALUE OF \$50.0	1 TO \$250 00 (FROM PA	RTF)		
TOTAL for the reporting period	(2)	\$		- 49	
3. IN-KIND CONTRIBUTION RE	CEIVED-VALUE OVER \$25	0.00 (FROM PART G)			
TOTAL for the reporting period	(3)	\$			
TOTAL VALUE OF IN-KIND CONTRIBUT PERIOD (Add and enter amount totals on Page 1, Report Cover Page, Item F	s from boxes 1, 2, and 3;	1 ' 1			

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Nu	mber				
	Control Contro				
Full Name of Contri	butor			Date [MM/DD/YYYY] \$	
House #	Street Address			Date [MM/DD/YYYY] \$	
City	Fig. 10, 200 to Anticological Cologica Ace 3 of the dicheren a comp	State	Zip Code	Date [MM/DD/YYYY] .\$	
Description of Cont	ribution				
Full Name of Contril	butor			Date [MM/DD/YYYY] \$	
House #	Street Address			Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Description of Contr	ribution				
Full Name of Contril	butor			Date [MM/DD/YYYY] \$	
House#	Street Address			Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Description of Contr					
Full Name of Contrib				Date [MM/DD/YYYY] \$	
House#	Street Address			Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	

Zip Code

Date [MM/DD/YYYY] | \$

Date [MM/DD/YYYY] \$

Date [MM/DD/YYYY] \$

State

House #

City

Description of Contribution

Description of Contribution

Street Address

Full Name of Contributor

SCHEDULE II Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer identification Number:	
The World Control of The State	
Full Name of Contributor	Date [MM/DD/XYYY] \$
House # Street Address	Date [MIM/DD/YYYY] \$
City State Zip Code	Date [MM/DD/YYYY] \$
	And Administry of The same up open agent and open and the same agent
Employer Name	Occupation
Employer Mailing Address / Principal	Description
Place of Business	of Contribution
Full Name of Contributor	Date [MM/DD/YYYY] \$
House # Street Address	Date [MM/DD/YYYY] \$
	ender a remain de la companya de la
City: State Zip Code	Date [MM/DD/YYYY] \$
	Production of the second secon
Employer Name	Occupation
Employer Mailing Address / Principal Place of Business	Description of
	Contribution
Full Name of Contributor	Date [MM/DD/YYYYI] \$
House # Street Address	Date [MM/DD/YYYY] \$
City State Zip Code	Date [MM/DD/YYYY] \$
	Constant to Constant to Constant On pressor Will further
Employer Name	Occupation
Employer Mailing Address / Principal	Description
Place of Business	ot Contribution
Full Name of Contributor	Date [MM/DD/YYYY] \$
House # Street Address	Date [MM/DD/YYYY] \$
City State Zip Code	Date [MM/DD/YYYY] \$
	And the state of t
Employer Name	Occupation
Employer Mailing Address / Principal	Description
Place of Business	of Contribution

Statement of Expenditures

Fil	er	lder	ıtıfi	cat	ion	Nu	mb	er:

To Whom Paid	· · · · · · · · · · · · · · · · · · ·	-	•	_ · ·	Date [MM/DD/YYYY]	\$
	Copy King				04/09/2025	98.06
House # 1162	Street Address W 8th 9	Street	-		Description of Expendit	ure
City Erie	Si	ate PA	Zip Code	16502	500 Flyers	
To Whom Paid	Copy King				Date [MM/DD/YYYY]	\$ 291.50
					04/23/2025	
House # 1162	Street Address W 8th 9	Street			Description of Expenditu	
City Erie	St	ate PA	Zip Code	16502	1000 Flyers and 10 Yards	signs
To Whom Paid	McCarty Printing				Date [MM/DD/YYYY] 04/24/2025	\$ 375
House # 246	Street Address E 7th S	treet			Description of Expenditu	file repair file file fil
City _		ate	Zin		三年 计信用的 计图	
Erie		PA	Zip Code	16503	Batch 1 - Mailers - Printing	Ехр
To Whom Paid	_V Print Center LLC				Date [MM/DD/YYYY)	\$ 540.60
					04/18/2025	
1701	Street Address Union E	Boulevard			Description of Expenditu	re La prima de bren a des
City Allentown	St	PA	Zip Code	18109	100 Yard Signs - Printing	
			CONTRACTOR AND ADVANCED A VALUE OF A VALUE O			
To Whom Paid	_V Print Center LLC				Date [MM/DD/YYYY] 04/30/2025	73.23
	Street Address	oulevard				
House#	Street Address Union B	oulevard	Zip Code	18109	04/30/2025	
House # 1701 City Allentown To Whom Paid	Street Address Union B	36		18109	04/30/2025 Description of Expenditu Postage Yard Signs	
House # 1701 City Allentown To Whom Paid	Street Address Union E	PA PA		18109	04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY]	5 375
House # 1701 City Allentown To Whom Paid	Street Address Union B St. VacCarty Printing	PA rreet	Code	18109	04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY] 05/02/2025	\$ 375
House # 1701 City Allentown To Whom Paid House # 246 City Erie To Whom Paid	Street Address Union B St. McCarty Printing Street Address E 7th St	PA PA	Code Zip		04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Mallers - Printing Date [MM/DD/YYYY]	\$ 375
House # 1701 City Allentown To Whom Paid House # 246 City Erie To Whom Paid	Street Address Union B Str McCarty Printing Street Address E 7th St	PA treet	Code Zip		04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Mallers - Printing	\$ 375 Exp \$ 379.24
House # 1701 City Allentown To Whom Paid House # 246 City Erie To Whom Paid	Street Address Union B Street Address E 7th Street Address McCarty Printing Street Address Street Address	PA treet PA	Zip Gode		04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Mallers - Printing Date [MM/DD/YYYY] 05/02/2025	\$ 375 Exp \$ 379.24
House # 1701 City Allentown To Whom Paid House # 246 City Erie To Whom Paid House # 246 City Erie	Street Address Union B Sta McCarty Printing Street Address E 7th Sta McCarty Printing Street Address E 7th Sta	PA treet PA	Zip Code	16503	04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Mallers - Printing Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Postage	\$ 375 Exp \$ 379.24
House # 1701 City Allentown To Whom Paid House # 246 City Erie To Whom Paid House # 246 City Erie To Whom Paid	Street Address Union B Sta McCarty Printing Street Address E 7th Sta McCarty Printing Street Address E 7th S Sta	PA treet PA	Zip Code	16503	04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Mailers - Printing Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Postage	\$ 375 Fe Exp \$ 379.24 Fe F
House # 1701 City Allentown To Whom Paid House # 246 City Erie To Whom Paid House # 246 City Erie To Whom Paid	Street Address Union B Street Address E 7th St Street Address E 7th St Street Address E 7th S Street Address E 7th S	PA treet PA	Zip Code	16503	04/30/2025 Description of Expenditu Postage Yard Signs Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Mallers - Printing Date [MM/DD/YYYY] 05/02/2025 Description of Expenditu Batch 2 - Postage Date [MM/DD/YYYY]	\$ 375 Fe Exp \$ 379.24 Fe F

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:

			granger, and the second second second second second
Name of Creditor	1		Outstanding Balance of Debt
	Marcus Jacobs	DATE DEBT INCURRED	S S
2517	et Address Bird Drive	[MM/DD/YYYY]	19
	THE WAR	04/03/2025	
City	Erie State	PA Zip 16510	2000
Description of Debt			E angulo de Simile America de Simile America de Simile
	Forgivable loan from candidate for startup expense	S	
Name of Creditor			Outstanding Balance of Debt
House # Stre	et Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$
		tumvasa, ita	
City	State	Zip	
Description of Debt		Code	
Name of Creditor			Outstanding Balance of Debt
House # Stree	et Address	DATE DEBT INCURRED	\$
		[MM/DD/YYYY]	
City	State	Zip	
AND AND SECURITION		Code	
Description of Debt			
Name of Creditor	•		Outstanding Balance of Debt
Hause # Stree	et Address	DATE DEBT INCURRED	\$
		[MM/DD/YYYY]	
City	State	Zip	
有基本保护的现在分词的	HELI WES	Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House # Stree	et Address	DATE DEBT INCURRED	\$
		[MM/DD/YYYY]	
City	State*	Zip	
		Code	
Description of Debt			
Name of Creditor	<u> </u>		Outstanding Balance of Debt
	et Address	DATE DEBT INCURRED	
Stree	PARTIES AND	[MM/DD/YYYY]	
City	State	Zip Code	
Description of Debt	Ø 10 10 10 10 10 10 10 10 10 10 10 10 10	BETTALL STEEL	
		•	