

# Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	20160119	Report Filed By (Mark X)		Candidate		Committee	X	Lobbyist	
Name of Filing Committee, Candidate or Lobbyist		Committee to Elect Dan Laughlin							
Street Address		P.O. Box 9610							
City	Erie	State	PA	Zip Code	16505-				

TYPE OF REPORT (place X to the right of report type)

1- 6th Tuesday Pre-Primary	2- 2nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6th Tuesday Pre-Election	5- 2nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2nd Friday Pre-Election	Special 30 Day Post-Election
						X		
Date Of Election (MM/DD/YYYY)		YEAR		Amendment Report		Termination Report		
11/8/2022		2022						

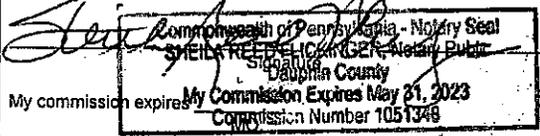
Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
A. Amount Brought Forward From Last Report	11/29/2022	12/31/2022	<div style="writing-mode: vertical-rl; transform: rotate(180deg);">                     ERIE COUNTY VOTER REGISTRATION                      2023 JAN 25 PM 12:55                 </div>
B. Total Monetary Contributions and Receipts (From Schedule I)		\$ 135,746.54	
C. Total Funds Available (Sum of Lines A and B)		\$ 8,500.00	
D. Total Expenditures (From Schedule III)		\$ 144,246.54	
E. Ending Cash Balance (Subtract Line D from Line C)		\$ 3,153.26	
F. Value of In-Kind Contributions Received (From Schedule II)		\$ 141,093.28	
G. Unpaid Debts and Obligations (From Schedule IV)		\$ 0.00	

### Affidavit Section

**PART I** - If this is a **Committee** report, treasurer sign here. If this is a **Candidate** report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 18 day of JANUARY, 2023



My commission expires 05/21/2023

*[Signature]*  
Signature of Person Submitting Report

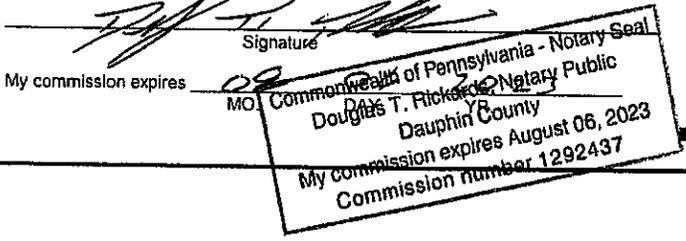
\_\_\_\_\_  
Printed Name

Area Code \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_

**PART II** - If this is a report of a **Candidate's** Authorized Committee, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this 16 day of JANUARY, 2023



My commission expires 08/06/2023

*[Signature]*  
Signature of Candidate

\_\_\_\_\_  
Printed Name

Area Code \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_

**SCHEDULE I**  
**Contributions and Receipts**  
**Detailed Summary Page**

<b>Filer Identification Number</b>	20160119
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<b>1. Unitemized Contributions and Receipts \$50.00 or Less per Contributor</b>		
Total for the reporting period	(1)	\$ 0.00
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>		
Contributions Received from Political Committees (Part A)		\$ 0.00
All Other Contributions (Part B)		\$ 0.00
Total for the Reporting Period	(2)	\$ 0.00
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>		
Contributions Received from Political Committees (Part C)		\$ 6,500.00
All Other Contributions (Part D)		\$ 2,000.00
Total for the reporting period	(3)	\$ 8,500.00
<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>		
Total for the reporting period	(4)	\$ 0.00
<b>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)</b>		<b>\$ 8,500.00</b>

**PART A**  
**Contributions Received From Political Committee**  
**\$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.

<b>Filer Identification Number</b>	20160119
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Amount

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

<b>PAGE TOTAL</b>	
\$	0.00

**PART B**  
**ALL OTHER CONTRIBUTIONS**  
**\$50.01 TO \$250.00**

Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number	20160119
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AMOUNT

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL	
\$	0.00

**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.

<b>Filer Identification Number</b>	20160119
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				AMOUNT
Full Name of Contributing Committee Constellation Employee PAC			Date (MM/DD/YYYY) 12/6/2022	\$ 2,500.00
Mailing Address 101 Constitution Ave, NW Suite 400, East			Date (MM/DD/YYYY)	\$
City Washington	State DC	Zip Code (Plus 4) 20001-	Date (MM/DD/YYYY)	\$
Full Name of Contributing Committee First Energy PAC			Date (MM/DD/YYYY) 12/6/2022	\$ 500.00
Mailing Address 76 S Main St			Date (MM/DD/YYYY)	\$
City Akron	State OH	Zip Code (Plus 4) 44308-	Date (MM/DD/YYYY)	\$
Full Name of Contributing Committee Pfizer PAC			Date (MM/DD/YYYY) 12/6/2022	\$ 500.00
Mailing Address 235 E 42nd St			Date (MM/DD/YYYY)	\$
City New York	State NY	Zip Code (Plus 4) 10017-	Date (MM/DD/YYYY)	\$
Full Name of Contributing Committee PSEA PACE			Date (MM/DD/YYYY) 12/6/2022	\$ 2,500.00
Mailing Address 400 N Third St P.O. Box 1724			Date (MM/DD/YYYY)	\$
City Harrisburg	State PA	Zip Code (Plus 4) 17105-	Date (MM/DD/YYYY)	\$
Full Name of Contributing Committee SEIU Healthcare PA COPE			Date (MM/DD/YYYY) 12/6/2022	\$ 500.00
Mailing Address 1500 N 2nd St Suite 12			Date (MM/DD/YYYY)	\$
City Harrisburg	State PA	Zip Code (Plus 4) 17102-	Date (MM/DD/YYYY)	\$
<b>Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.</b>				<b>PAGE TOTAL</b> \$ 6,500.00

**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)

<b>Filer Identification Number</b>	20160119
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				AMOUNT
Full Name of Contributor Kent Thiry			Date: (MM/DD/YYYY) 12/20/2022	\$ 2,000.00
Mailing Address 2 Cantitoe Ln			Date: (MM/DD/YYYY)	\$
City Cherry Hills Village	State CO	Zip Code (Plus 4) 80113-	Date: (MM/DD/YYYY)	\$
Employer Name		Occupation Retired		
Employer Mailing Address/Principal Place of Business				

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 2,000.00

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.

<b>Filer Identification Number</b>	20160119
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Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>	
\$	0.00

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

<b>Filer Identification Number</b>	20160119
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**1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the Reporting Period (1)	\$	0.00
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**2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)**

TOTAL for the Reporting Period (2)	\$	0.00
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**3. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OVER \$250.00 (FROM PART G)**

TOTAL for the Reporting Period (3)	\$	0.00
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<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)</b>	\$	0.00
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PART F

**In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250.00

<b>Filer Identification Number</b>	20160119
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AMOUNT

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

<b>PAGE TOTAL</b>	
\$	0.00

SCHEDULE II  
Part G  
**In-Kind Contributions Received**  
VALUE OVER \$250.00

Filer Identification Number	20160119
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AMOUNT

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL	
\$	0.00

**SCHEDULE III**  
**Statement of Expenditures**

<b>Filer Identification Number</b>	20160119
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To Whom Paid Verizon Wireless			Date (MM/DD/YYYY)	\$	89.15
Mailing Address 700 Cranberry Woods Dr			Description of Expenditure		
City Cranberry Township	State PA	Zip Code (Plus 4) 16066-	Phone		
To Whom Paid Google			Date (MM/DD/YYYY)	\$	76.32
Mailing Address 1600 Amphitheatre Parkway			Description of Expenditure		
City Mountain View	State CA	Zip Code (Plus 4) 94043-	Website		
To Whom Paid DTR Consulting			Date (MM/DD/YYYY)	\$	500.00
Mailing Address 210 Kelker St			Description of Expenditure		
City Harrisburg	State PA	Zip Code (Plus 4) 17102-	Professional services		
To Whom Paid Democracy Engine			Date (MM/DD/YYYY)	\$	194.03
Mailing Address 1090 Vermont Ave			Description of Expenditure		
City Washington	State DC	Zip Code (Plus 4) 20005-	Service fee		
To Whom Paid Kleinbard			Date (MM/DD/YYYY)	\$	2,191.59
Mailing Address Three Logan Square 1717 Arch St, 5th Floor			Description of Expenditure		
City Philadelphia	State PA	Zip Code (Plus 4) 19103-	Legal fees		
To Whom Paid Verizon Wireless			Date (MM/DD/YYYY)	\$	102.17
Mailing Address 700 Cranberry Woods Dr			Description of Expenditure		
City Cranberry Township	State PA	Zip Code (Plus 4) 16066-	Phone		

**Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.**

*\*REFER TO INSTRUCTIONS FOR EXPENDITURE CODE NUMBERS.*

<b>PAGE TOTAL</b>	
\$	3,153.26

**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.

<b>Filer Identification Number</b>	20160119
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Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

<b>PAGE TOTAL</b>	
\$	0.00