



Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Deputition Number 1: 1888	Report Filed By Cano (Mark X)	idate	Committee	Inabbyist .		
Lobbyist	Friends of Leah Merski					
Street Address	371 E. 36th St					
City Erie	Sate	PA	Ep cade 16504			
Type of Report (Place x under report type)						
1-6 PUESTAY, 2-2" Friday 3-30 Pay Post		1 Part 1 P	7- Amual Special Speci			
Pre-Primary Primary Primary	Pre-Election	on ce-cuon		aut Zost-Election		
(MA /DD / 1974) 05/20/2025	Year 2025	Amendment Report	Termina Report	ion .		
Summary of Receipts and From Date Expenditures	To Date		For Office Use	Only The Part of t		
01/01/2025	05/05/2025					
A Amount Brought From East Report	0.00					
B. Total Monetary Contributions and Receipts Errom Schedule (1878)	\$ 0.00					
C. total Funds Available (Sum of Lines Available)	\$ 0.00			< 2		
D. Total Expenditures (From Schelie III)	\$ 0.00	į		2025 MAY FREE		
ElEmine Gas/Balance Substact time Disporting C	\$ 0.00					
E. Malae of an Eine Contributions Received	\$ 0.00			#S 4		
(Controlled): Group and Petris and Obligations	\$ 0.00					
(Erom/Schemile)V)	Affidavit	Section		<u> </u>		
Part 1- If this is a Committee report, treasurer sign he	ere. 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						
05day ofMay2025	• 1	(age	Husoe			
	<u> </u>	Signature o	of Person Submitting report	 ;		
Signature	-	Carrott Words	Printed Name			
My Commission expires	4 7	814	969-0251			
MO. DAY YR.	_	Area Code	Daytime Teleph	one Number		
Part II- If this is a report of a Candidate's Authorized (
I swear (or affirm) that to the best of my knowledge a amended.	and belief this political committ	ee has not violated any	provisions of the Act of Jur	ne 3, 1937 (P.L. 1333, NO.320) as		
Sworn to and subscribed before me this		<i>l</i>	N \	^		
	٧	NON	$e^{-\epsilon}$	$\mathcal{A}(\mathcal{L})$		
day of20	-	Signi	ature of candidate			
Signature	-	Leah Merski	Printed Name			
·	. 1	814	392-2598			
My Commission expires		Area Code	Daytime Telepho	ne Number		

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

	
Filer Identification Number	
"新游"的经验, 1995年,	

			**
1.Unitemized Contributions and Receipts-\$50.00 of Less per Contributors			
Total for the reporting period (1)	\$	330.00
2 Contributions of \$50.01 to \$250.00 (From Part A and Part Biggs # ## ## ### #######################		12.1	
Contributions Received from Political Committees (Part A)	,	\$	150.00
All Other Contributions (Part B)	5	\$	200.00
Total for the reporting period (2) \$	\$	350.00
3. Contributions Over 5250.00 (From Part C and Part D)		ž.,	
Contributions Received from Political Committees (Part C)	7	\$	500.00
All Other Contributions (Part D)	Ş	\$	0.00
Total for the reporting period (3) \$	\$	500.00
4 Other Receipts Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period (4	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)	,	\$	850.00

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.

900 De 24-4-00-00-00-00-00-00-00-00-00-00-00-00-				Amount
Full Name of Contributing Committee	Women the Future		Date [MM/DD/YYYX] 04/15/2025	150.00
	PO Box 35	No. 15 cont.	Date [MM/DD/YYYY]	S
Erie	State PA	Zip Code 16512		
Fall Name of Contributing Committee				\$
	t Address		AND SHAPE STATE OF THE STATE OF	\$
City	State	Zip Code	*Date [MM//DD//YYYY]	
Full Name of Contributing Committee			Date (MM/DD/YYYY)	
	t Address	Magazan	Date (MM/DD/WW)	\$
City	State	Zip Gode	· · · · · · · · · · · · · · · · · · ·	\$
Full Name of Contributing (Committee) House# Street	t Address		Date [MM/DD/YYYY]	\$.
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Committee			Date [MM/DD/YYYY]	
			According to the second	
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Committee			Date [MM/DD/YYY]	
Eny (State	Zipicode		
	State		Date [MM/DD/YYYY] S	

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.)

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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.

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	State			

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)

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Englove same				Occapitation (1995)	
	A THE STATE OF THE				

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.

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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

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TOTAL for the reporting period	(1)	\$	0.00
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TOTAL for the reporting period	(2)	\$	0.00
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TOTAL for the reporting period	(3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTION	IS DITIDING THIS BEDORTING	- A	
PERIOD (Add and enter amount totals fro		. •	
on Page 1, Report Cover Page, item F)			

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

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State Szip Code	Date [MM/201/1114]
Designation of Contribution	
Full Name of Contributor	Date (Milder Date State
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City State Zip Code	Date (MM/DD/TYP)
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SCHEDULE II Part G

In-Kind Contributions Received

VALUE OVER \$250

All Albertatics from Borobe :	

Full Name of Containing	Wate MM/DDA 684
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Said Zip Code	Date MIM/DDCYYY BLOODS
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Eukklanie of Eositributor	Daffakinn/DD(ALYYH)gga &
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Property Additional Control of the C	DESCRIPTION OF SOURCEMENTS

Statement of Expenditures

a Ber Identification Numbel:

Desantis Signs & G	raphics		04/21/2025	121.94
	est 18th	No.	Description of Expenditure	
Erie	PA	16502	Pins	
Desantis Signs & G	raphics		03/28/2025	433.54
House # 540 Street Andress W	est 18th		Description of Expenditures	
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Street Address			Description of Expenditure	
City City City City City City City City	State			

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.

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(RIGHT)				[©] State			
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Pennsylvania Department of State

Name of Filing Committee, Candidate, or Lobbyist

Bureau of Campaign Finance & Lobbying Disclosure
500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

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.

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Reporting Cycle	Name				
🖄 Cycle 1	☐ Cycle 2	☐ Cycle 3		Cycle 4	☐ Cycle 5
6 th Tuesday	2 nd Friday	30 Day	6 th Tuesday Pre-Election		2 nd Friday
Pre-Primary	Pre-Primary	Post Primary			Pre-Election
☐ Cycle 6	☐ Cycle 7	☐ Cycle 8		☐ Cy	cle 9
30 Day Post-Election	Annual Report	2 nd Friday Pre-Specia	Special Election 30 Day Post-Special		ost-Special Election
nat the accompa	nying Campaign F	inder the law of the inance Report is	true and	correct.	-
Coloffer			05/05/2025		
Signature of Trea	asurer, Candidate	, or Lobbyist	Da	ate (MM/C	DD/YYYY)
Garrist	mershi		E	rie IPA	1 United state
Printed Name			Location (City/State/Country)		



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement
500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

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.

Coastan	05/05/2025
Signature of Treasurer, Candidate, or Lobbyist	Date (MM/DD/YYYY)
Garrest Mersici	Eriz/PA/Unital State
Printed Name	Location (City/State/Country)