

# 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)	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Millcreek Democratic Committee					
Street Address		1526 High St.					
City	ERIE	State	PA	Zip Code	16509		

Type of Report (Place x under report type)								
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		Year		Amendment Report		Termination Report		
		2021		<input type="checkbox"/>		<input type="checkbox"/>		

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01-01-2021	12-31-2021	
A. Amount Brought Forward From Last Report	\$	3,332.86	<div style="border: 1px solid black; padding: 5px; transform: rotate(90deg); font-size: small;">           RECEIVED            JAN 10 AM 8:10            2021         </div>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	7,030.00	
C. Total Funds Available (Sum of Lines A and B)	\$	10,362.86	
D. Total Expenditures (From Schedule III)	\$	5,210.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	5,152.86	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0	

Affidavit Section	
Part I- If this is a <b>Committee</b> report, treasurer sign here. If this is a <b>Candidate</b> report, candidate sign here.	I swear (or affirm) that this report, including the attached schedules on pages _____ to the best of my knowledge and belief true, correct and complete.
Sworn to and subscribed before me this <u>10<sup>th</sup></u> day of <u>January</u> 20 <u>22</u>  Signature My Commission expires <u>October 18 2022</u> MO. DAY YR.	 Signature of Person Submitting report <u>Alice E. Niebauer</u> Printed Name <u>814</u> <u>392-5176</u> Area Code                      Daytime Telephone Number

Part II- If this is a report of a <b>Candidate's Authorized Committee</b> , candidate 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 _____ day of _____ 20____ _____ Signature My Commission expires _____ MO. DAY YR.	_____ Signature of Candidate _____ Printed Name _____ Area Code                      Daytime Telephone Number

SCHEDULE I  
**Contributions and Receipts**

Detailed Summary Page

<b>Filer Identification Number</b>	<i>Millcreek Democratic Committee</i>	
<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>		
Total for the reporting period	(1) \$	<i>1,360.00</i>
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>		
Contributions Received from Political Committees (Part A)	\$	<i>910.00</i>
All Other Contributions (Part B)	\$	<i>1,160.00</i>
Total for the reporting period	(2) \$	<i>2,070.00</i>
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>		
Contributions Received from Political Committees (Part C)	\$	<i>3,400.00</i>
All Other Contributions (Part D)	\$	<i>0</i>
Total for the reporting period	(3) \$	<i>3,400.00</i>
<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>		
Total for the reporting period	(4) \$	<i>200.00</i>
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		<i>17,030.00</i>

2.

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	Millcreek Democratic Committee
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							Amount	
Full Name of Contributing Committee		Friends of Julie Slomski			Date [MM/DD/YYYY]	\$	200.00	
House #	5510	Street Address	Mill St.		Date [MM/DD/YYYY]	\$	200.00	
City	ERIE	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$	0
Full Name of Contributing Committee		ERIE-CRAWFORD central Labor			Date [MM/DD/YYYY]	\$	100.00	
House #	32	Street Address	W, 8th St.		Date [MM/DD/YYYY]	\$	0	
City	ERIE	State	PA	Zip Code	16501	Date [MM/DD/YYYY]	\$	0
Full Name of Contributing Committee		CTE Kim Clear			Date [MM/DD/YYYY]	\$	140.00	
House #	6060	Street Address	Briar Dr.		Date [MM/DD/YYYY]	\$	70.00	
City	ERIE	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$	0
Full Name of Contributing Committee		CTE John Loomis Sheriff			Date [MM/DD/YYYY]	\$	100.00	
House #	2921	Street Address	W. 32nd St.		Date [MM/DD/YYYY]	\$	0	
City	ERIE	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$	0
Full Name of Contributing Committee		Friends of Bob Merski			Date [MM/DD/YYYY]	\$	100.00	
House #		Street Address	P.O. Box 667		Date [MM/DD/YYYY]	\$	0	
City	ERIE	State	PA	Zip Code	16512	Date [MM/DD/YYYY]	\$	0
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	0	
House #		Street Address			Date [MM/DD/YYYY]	\$	0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0

## 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:	Millcreek Democratic Committee
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Full Name of Contributor	Alice E. Niebauer				Date [MM/DD/YYYY]	\$	60.00
House #	1526	Street Address	High St.		Date [MM/DD/YYYY]	\$	0
City	ERIE	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$
Full Name of Contributor	Linda McCabe				Date [MM/DD/YYYY]	\$	100.00
House #	815	Street Address	Bancroft Ave.		Date [MM/DD/YYYY]	\$	70.00
City	ERIE	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$
Full Name of Contributor	Ronald Diehl				Date [MM/DD/YYYY]	\$	100.00
House #	214	Street Address	Roslyn Ave.		Date [MM/DD/YYYY]	\$	70.00
City	ERIE	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Full Name of Contributor	Mary Jo Campbell				Date [MM/DD/YYYY]	\$	100.00
House #	5431	Street Address	Linden Ave.		Date [MM/DD/YYYY]	\$	0
City	Edinboro	State	PA	Zip Code	16412	Date [MM/DD/YYYY]	\$
Full Name of Contributor	Gerald Servidio				Date [MM/DD/YYYY]	\$	80.00
House #	1720	Street Address	W. Gore Rd.		Date [MM/DD/YYYY]	\$	0
City	ERIE	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$
Full Name of Contributor	Kathleen Fatica				Date [MM/DD/YYYY]	\$	100.00
House #	4623	Street Address	Southern DR.		Date [MM/DD/YYYY]	\$	70.00
City	ERIE	State	PA	Zip Code	16506	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.)

Filer Identification Number:	Millcreek Democratic Committee
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Full Name of Contributor	Samuel Comfort	Date [MM/DD/YYYY]	08/05/2021	\$	100.00			
House #	903	Street Address	Linden Ave.	Date [MM/DD/YYYY]	10/18/2021	\$	70.00	
City	ERIE	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$	0

Full Name of Contributor	Betty Young	Date [MM/DD/YYYY]	08/13/2021	\$	100.00			
House #	219	Street Address	Shelhamer Circle	Date [MM/DD/YYYY]		\$	0	
City	Edinboro	State	PA	Zip Code	16417	Date [MM/DD/YYYY]	\$	0

Full Name of Contributor	Michael Filbeck	Date [MM/DD/YYYY]	10/18/2021	\$	70.00			
House #	4879	Street Address	Thoroughbred Loop	Date [MM/DD/YYYY]		\$	0	
City	ERIE	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$	0

Full Name of Contributor	Tim McNair	Date [MM/DD/YYYY]	10/25/2021	\$	70.00			
House #	821	Street Address	State St.	Date [MM/DD/YYYY]		\$	0	
City	ERIE	State	PA	Zip Code	16501	Date [MM/DD/YYYY]	\$	0

Full Name of Contributor		Date [MM/DD/YYYY]		\$	0			
House #		Street Address		Date [MM/DD/YYYY]		\$	0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0

Full Name of Contributor		Date [MM/DD/YYYY]		\$	0			
House #		Street Address		Date [MM/DD/YYYY]		\$	0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0



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:	Millcreek Democratic Committee
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Full Name of Contributing Committee	Friends of Julie Slomski				Date [MM/DD/YYYY]	\$	1,000.00
House #	6610	Street Address	Mill St		Date [MM/DD/YYYY]	\$	2,400.00
City	ERIE	State	PA	Zip Code	16509	\$	0
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	0
House #		Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		\$	0
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	0
House #		Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		\$	0
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	0
House #		Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		\$	0
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	0
House #		Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		\$	0
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	0
House #		Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		\$	0

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)

Filer Identification Number:	<i>Millcreek Democratic Committee</i>
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Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						
Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						
Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						
Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						

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.

Filer Identification Number:	Millcreek Democratic Committee
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Full Name	Millcreek Township Supervisors								
House #	3608	Street Address	W. 26 <sup>th</sup> St.						
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	09/09/2021	\$	200.00
Receipt Description	Refund of Picnic Deposit								

Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									

Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									

Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									

Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									

Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
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:	<i>Millcreek Democratic Committee</i>
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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

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the reporting period	(2)	\$	0

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the reporting period	(3)	\$	0

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)		\$	0
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SCHEDULE II  
PART F  
**In-Kind Contributions Received**  
VALUE OF \$50.01 TO \$250

Filer Identification Number: *Millcreek Democratic Committee*

Full Name of Contributor				Date [MM/DD/YYYY]	\$		0	
House #	Street Address			Date [MM/DD/YYYY]	\$		0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Description of Contribution								
Full Name of Contributor				Date [MM/DD/YYYY]	\$		0	
House #	Street Address			Date [MM/DD/YYYY]	\$		0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Description of Contribution								
Full Name of Contributor				Date [MM/DD/YYYY]	\$		0	
House #	Street Address			Date [MM/DD/YYYY]	\$		0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Description of Contribution								
Full Name of Contributor				Date [MM/DD/YYYY]	\$		0	
House #	Street Address			Date [MM/DD/YYYY]	\$		0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Description of Contribution								

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:	<i>Millcreek Democratic Committee</i>
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Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		0
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		
Full Name of Contributor				Date [MM/DD/YYYY]	\$	0
House #	Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		0
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		
Full Name of Contributor				Date [MM/DD/YYYY]	\$	0
House #	Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		0
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		
Full Name of Contributor				Date [MM/DD/YYYY]	\$	0
House #	Street Address			Date [MM/DD/YYYY]	\$	0
City		State		Zip Code		0
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business				Description of Contribution		

SCHEDULE III

Statement of Expenditures

Filer Identification Number: *Millcreek Democratic Committee*

To Whom Paid		<i>Millcreek Township Supervisors</i>			Date [MM/DD/YYYY]	\$	<i>370.00</i>
House #	Street Address				Description of Expenditure		
<i>3608</i>	<i>W. 26<sup>th</sup> St.</i>				<i>05/26/2021</i>		
City	State	Zip Code					
<i>ERIE</i>	<i>PA</i>	<i>16506</i>	<i>Picnic of 8-19-21</i>				
To Whom Paid		<i>La Bella Catering</i>			Date [MM/DD/YYYY]	\$	<i>1,200.00</i>
House #	Street Address				Description of Expenditure		
<i>802</i>	<i>W. 18<sup>th</sup> St.</i>				<i>08/19/2021</i>		
City	State	Zip Code					
<i>ERIE</i>	<i>PA</i>	<i>16502</i>	<i>Catering for Picnic</i>				
To Whom Paid		<i>Deliver Strategies</i>			Date [MM/DD/YYYY]	\$	<i>2,400.00</i>
House #	Street Address				Description of Expenditure		
	<i>P.O. Box 100970</i>				<i>09/26/2021</i>		
City	State	Zip Code					
<i>Arlington</i>	<i>VA</i>	<i>22210</i>	<i>State Cards</i>				
To Whom Paid		<i>Erie County Democratic Party</i>			Date [MM/DD/YYYY]	\$	<i>900.00</i>
House #	Street Address				Description of Expenditure		
<i>1305</i>	<i>State St.</i>				<i>09/26/2021</i>		
City	State	Zip Code					
<i>ERIE</i>	<i>PA</i>	<i>16501</i>	<i>Fall Dinner - 2 tables</i>				
To Whom Paid		<i>Erie Humane Society</i>			Date [MM/DD/YYYY]	\$	<i>100.00</i>
House #	Street Address				Description of Expenditure		
<i>2407</i>	<i>Zimmerly Rd.</i>				<i>09/26/2021</i>		
City	State	Zip Code					
<i>ERIE</i>	<i>PA</i>	<i>16506</i>	<i>Donation from Picnic</i>				
To Whom Paid		<i>West County Democratic Committee</i>			Date [MM/DD/YYYY]	\$	<i>240.00</i>
House #	Street Address				Description of Expenditure		
<i>5431</i>	<i>Linden Ave.</i>				<i>09/26/2021</i>		
City	State	Zip Code					
<i>Edinboro</i>	<i>PA</i>	<i>16412</i>	<i>Picnic Share</i>				
To Whom Paid					Date [MM/DD/YYYY]	\$	<i>0</i>
House #	Street Address				Description of Expenditure		
City	State	Zip Code					
To Whom Paid					Date [MM/DD/YYYY]	\$	<i>0</i>
House #	Street Address				Description of Expenditure		
City	State	Zip Code					

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:	<i>Millcreek Democratic Committee</i>
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Name of Creditor						Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 0
City		State	Zip Code			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 0
City		State	Zip Code			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 0
City		State	Zip Code			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 0
City		State	Zip Code			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 0
City		State	Zip Code			
Description of Debt						
Name of Creditor						Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$ 0
City		State	Zip Code			
Description of Debt						