

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	83-3969891	Report Filed By (Mark X)	Candidate	Committee	☒	Lobbyist	☐
Name of Filing Committee, Candidate or Lobbyist		Committee to Elect Chuck Nelson					
Street Address		646 W 9th St					
City	Erie	State	PA	Zip Code	16502		

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
☐	☐	☐	☐	☐	☐	☒	☐	☐
Date Of Election (MM/DD/YYYY)		11/02/2021	Year		Amendment Report	☐	Termination Report	☐

Summary of Receipts and Expenditures	From Date	To Date
	01/21/23	12/31/23
A. Amount Brought Forward From Last Report	\$	1,959.18
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	4,081.61
C. Total Funds Available (Sum of Lines A and B)	\$	5,939.18
D. Total Expenditures (From Schedule III)	\$	1,562.73
E. Ending Cash Balance (Subtract Line D from Line C)	\$	4,376.45
F. Value of In-Kind Contributions Received (From Schedule II)	\$	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	

For Office Use Only

2024 JAN 26 AM 12:19
ELECTRONIC
NOTIFICATION

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 and exhibits, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

25th day of January 2024

Signature of Person Submitting report
Tara L. Watson

My Commission expires 12/03/2026
MO. DAY YR.

Signature of Person Submitting report
Tara L. Watson

814 746-2755
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

25th day of January 2024

Signature of Candidate
Charles L. Nelson

My Commission expires 12/03/2026
MO. DAY YR.

Signature of Candidate
Charles L. Nelson

814 720-9996
Area Code Daytime Telephone Number

Notary Seal
Commonwealth of Pennsylvania - Notary Public
Angela L. Watson, Notary Public
Erie County
My commission expires December 2, 2026
Commission number 1425503
Member, Pennsylvania Association of Notaries

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number 83-3969891

1. Unitemized Contributions and Receipts - \$50.00 or Less per Contributor

Total for the reporting period (1) \$ 255

2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)

Contributions Received from Political Committees (Part A) \$ 400.00

All Other Contributions (Part B) \$ 1,725.00

Total for the reporting period (2) \$ 2,125.00

3. Contributions Over \$250.00 (From Part C and Part D)

Contributions Received from Political Committees (Part C) \$ 500.00

All Other Contributions (Part D) \$ 1,100.00

Total for the reporting period (3) \$ 1,600.00

4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)

Total for the reporting period (4) \$ 101.61

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 8) \$ 4,081.61

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		83-3969891									
-----------------------------	--	------------	--	--	--	--	--	--	--	--	--

										Amount	
Full Name of Contributing Committee		IAFF 293				Date [MM/DD/YYYY]		\$	200		
						05/06/2023					
House #		Street Address		PO Box 3576		Date [MM/DD/YYYY]		\$			
City	ERIE	State	PA	Zip Code	16502	Date [MM/DD/YYYY]		\$			
Full Name of Contributing Committee		LPAC				Date [MM/DD/YYYY]		\$	200		
						05/06/2023					
House #	120	Street Address		W 10TH ST		Date [MM/DD/YYYY]		\$			
City	ERIE	State	PA	Zip Code	16501	Date [MM/DD/YYYY]		\$			
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$			
House #		Street Address				Date [MM/DD/YYYY]		\$			
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$			
House #		Street Address				Date [MM/DD/YYYY]		\$			
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$			
House #		Street Address				Date [MM/DD/YYYY]		\$			
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$			
House #		Street Address				Date [MM/DD/YYYY]		\$			
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$			
House #		Street Address				Date [MM/DD/YYYY]		\$			
City		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.)

Filer Identification Number: 83-396989.f									
Full Name of Contributor Kevin Sidella						Date [MM/DD/YYYY] 05/06/2023		\$ 250	
House #		Street Address 2317 Scarsborough Drive				Date [MM/DD/YYYY]		\$	
City HARRISBURG		State PA		Zip Code 17112		Date [MM/DD/YYYY]		\$	
Full Name of Contributor Mitchell Hecht						Date [MM/DD/YYYY] 05/06/2023		\$ 250	
House #		Street Address 64 Carters Beach Rd				Date [MM/DD/YYYY]		\$	
City ERIE		State PA		Zip Code 16511		Date [MM/DD/YYYY]		\$	
Full Name of Contributor Mindy Boyd						Date [MM/DD/YYYY] 05/06/23		\$ 200	
House #		Street Address 4521 Greengarden Rd				Date [MM/DD/YYYY]		\$	
City Erie		State PA		Zip Code 16509		Date [MM/DD/YYYY]		\$	
Full Name of Contributor Margaret Watts						Date [MM/DD/YYYY] 05/06/2023		\$ 200	
House #		Street Address 12663 Forrest Dr				Date [MM/DD/YYYY]		\$	
City Edinboro		State PA		Zip Code 16511		Date [MM/DD/YYYY]		\$	
Full Name of Contributor John Bartlett						Date [MM/DD/YYYY] 05/06/2023		\$ 125	
House #		Street Address 6102 Estate Dr				Date [MM/DD/YYYY]		\$	
City Erie		State PA		Zip Code 16509		Date [MM/DD/YYYY]		\$	
Full Name of Contributor David Brennan						Date [MM/DD/YYYY] 05/06/2023		\$ 100	
House #		Street Address 3407 Glenside Ave				Date [MM/DD/YYYY]		\$	
City Erie		State PA		Zip Code 16508		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:		83-3969891									
-------------------------------------	--	------------	--	--	--	--	--	--	--	--	--

Full Name of Contributor:		Robert Kerner				Date [MM/DD/YYYY]		\$	100
						05/06/2023			
House #	2335	Street Address		E 44th St		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16510	Date [MM/DD/YYYY]		\$	
Full Name of Contributor:		Cathy O'Neil				Date [MM/DD/YYYY]		\$	100
						05/06/2023			
House #	4633	Street Address		Lake Pleasant Rd		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16504	Date [MM/DD/YYYY]		\$	
Full Name of Contributor		Rich Wagner				Date [MM/DD/YYYY]		\$	100
						05/06/2023			
House #	4228	Street Address		State St		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16508	Date [MM/DD/YYYY]		\$	
Full Name of Contributor		Carl Anderson				Date [MM/DD/YYYY]		\$	100
						05/06/2023			
House #	3830	Street Address		Parade St		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16504	Date [MM/DD/YYYY]		\$	
Full Name of Contributor		John Csir				Date [MM/DD/YYYY]		\$	100
						05/06/2023			
House #	3409	Street Address		Zuck Rd		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]		\$	
Full Name of Contributor		Kurt Crays				Date [MM/DD/YYYY]		\$	100
						05/06/2023			
House #	1133	Street Address		Kerry Ln		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16505	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:		83-3969891									
-------------------------------------	--	------------	--	--	--	--	--	--	--	--	--

Full Name of Contributing Committee		Erie Insurance PAC					Date [MM/DD/YYYY]		\$ 500	
							05/06/2023			
House #	100	Street Address		Erie Insurance PL					Date [MM/DD/YYYY]	
City	Erie	State	PA	Zip Code	16530		Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee							Date [MM/DD/YYYY]		\$	
House #		Street Address							Date [MM/DD/YYYY]	
City		State		Zip Code			Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee							Date [MM/DD/YYYY]		\$	
House #		Street Address							Date [MM/DD/YYYY]	
City		State		Zip Code			Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee							Date [MM/DD/YYYY]		\$	
House #		Street Address							Date [MM/DD/YYYY]	
City		State		Zip Code			Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee							Date [MM/DD/YYYY]		\$	
House #		Street Address							Date [MM/DD/YYYY]	
City		State		Zip Code			Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee							Date [MM/DD/YYYY]		\$	
House #		Street Address							Date [MM/DD/YYYY]	
City		State		Zip Code			Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee							Date [MM/DD/YYYY]		\$	
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)

Filer Identification Number: 83-3969891

Full Name of Contributor		Harris Dunri				Date [MM/DD/YYYY]		\$	100
						04/16/2023			
House #	2050	Street Address		South Shore Drive		Date [MM/DD/YYYY]		\$	500
						07/06/2023			
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]		\$	500
						07/31/2023			
Employer Name		Self Employed				Occupation		Finance	
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, 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:	83-3969891
-------------------------------------	------------

Full Name		Northwest Savings Bank									
House #	800	Street Address		State St							
City	Erie	State	PA	Zip Code	16502	Date [MM/DD/YYYY]		\$	101.61		
Receipt Description		Interest									
Full Name											
House #		Street Address									
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Receipt Description											
Full Name											
House #		Street Address									
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Receipt Description											
Full Name											
House #		Street Address									
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Receipt Description											
Full Name											
House #		Street Address									
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Receipt Description											
Full Name											
House #		Street Address									
City		State		Zip Code		Date [MM/DD/YYYY]		\$			
Receipt Description											

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	83-3969891
-------------------------------------	------------

To Whom Paid		Friends of Jim Wertz				Date [MM/DD/YYYY]		\$	500
						12/30/2023			
House #		Street Address	PO Box 114			Description of Expenditure			
City	Erie	State	PA	Zip Code	16512	PA-49 Race			
To Whom Paid		Friends of Chris Drexel				Date [MM/DD/YYYY]		\$	300
						08/17/2023			
House #	2713	Street Address	Nagle Rd			Description of Expenditure			
City	Erie	State	PA	Zip Code	16510	County Council District 5 Race			
To Whom Paid		Friends of Rock Copeland				Date [MM/DD/YYYY]		\$	300
						07/29/2023			
House #	1336	Street Address	Patterson Ave			Description of Expenditure			
City	Erie	State	PA	Zip Code	16508	County Council District 3 Race			
To Whom Paid		Foust for Controller				Date [MM/DD/YYYY]		\$	100
						08/23/2023			
House #	4331	Street Address	Neptune Dr			Description of Expenditure			
City	Erie	State	PA	Zip Code	16506	County Controller Race			
To Whom Paid		Charles Nelson				Date [MM/DD/YYYY]		\$	362.73
						05/21/23			
House #	646	Street Address	W 9th St			Description of Expenditure			
City	Erie	State	PA	Zip Code	16502	Reimbursements for Derby Party Incidentals			
To Whom Paid						Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure			
City		State		Zip Code					
To Whom Paid						Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure			
City		State		Zip Code					
To Whom Paid						Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure			
City		State		Zip Code					