Filer Identification 83-3969891		Report Filed By (Mark X)			Candidate		Committee Lobbyist			ist				
Name of Filing Committee, Candidate or Lobbyist			Comi	Committee to Elect Chuck Nelson									<u> </u>	
Street Address			646 V	N 9th St										
City Erie			<u> </u>			State PA			Zip Code	16502				
Type of Report (P	ace x under	report type)		<u> </u>		804 K B 1041				10002				
1-6 th Tuesday 2	- 2 nd Friday re-Primary			Tuesday lection		^d Friday Election	6- 30 C Electio	Day Post in	7- Annual	Special 2 nd Pre-Electio		Special Post-El	30 Day ection	
Date Of Election (MM/DD/YYYY)		5/21/2019	Year		2	2019	Amend Report			Terminatio	n			
Summary of Recei	pts and	From Date		To Date	•				For	Office Use Or	ily			
-Aperiultures		6/1/19		1/21/20				를 수 있는 것이 없다는 그 것이 되었다. 그런						
A. Amount Brough	it Forward F	rom Last Repor	t \$				<u> Friday</u> ning		<u> </u>					
B. Total Monetary (From Schedule I)	B. Total Monetary Contributions and Receipts S								e e			%		
C. Total Funds Ava (Sum of Lines A an			\$						(7070 . 1844		
O. Total Expenditures (From Schedule III)				\$ 6.11			M29 F							
E. Ending Cash Balance (Subtract Line D from Line C)			\$											
F. Value of In-Kind Contributions Received				\$										
(From Schedule II) G. Unpaid Debts ar (From Schedule IV)	nd Obligation	IS	\$	<u> </u>										
	_ sa_ aar				Aff	idavit Sect	ion							
Part 1- If this is a Com I swear (or affirm) tha	mittee report	treasurer sign he	re. If thi	s is a Cano	lidata .	roport con	didate -!-	n here.						
25th day of M	MUMMA A	20 70 mmonwealth c	of Penns , Wertz	ylva nia - N Notary F	Notary Public	Seal	Q	snature of	Printed Name	tink report	omplete			
My Commission expires My commission expires November 3, 2022 8 (4) MO. DAY Commission number 1228741 Member, Pennsylvania Association of Notaries Area Code Member Pennsylvania Association of Notaries Area Code														
Part II- If this is a repor	t of a Candida	te's Authorized C	ammitte	ee candid	ata cha	المناسبة الما	e						<u> </u>	
swear (or affirm) that amended.	to the best of	my knowledge ai	nd belief	this politi	cal con	nmittee ha	s not viola	ated any p	provisions of the	Act of June 3,	1937 (P.I	L. 1333, N	O.320) as	
Sworn to and subscribe	ed before me t	his												
25m day of 10	AUNTENUV T	20 2A												
Dimbers	2018	listo						Signat	ure of Candidat	e		-		
Signa	ture C	ommortwealth of Kimberly A. V	14617-1		tary Se blic	al]	C'La.	-185	Nelson inted Name		······································	•		
My Commission expires Mo. My Commission expires				pires November 3, 2022			720.996 Daytime Telephone Number							
	<u> </u>	Aember, Pennsylv	ania Ass	ociation o	I MOREL									

Statement of Expenditures

Filer Identification Number:	_
83-3969891	

To Whom Paid	Act Blue			Date [MM/DD/YYYY] \$				
	Act blue			06/05/2019 6.11				
House #	Street Address			Description of Expenditure				
City		State	Zip					
			Çode	Fees for online donations				
To Whom Paid			(a)	Date [MM/DD/YYYY] \$				
House #	Street Address			Description of Expenditure				
Cinc		[2] A 102 (202)	Port of the over					
City		State	Zip Code					
To Whom Paid				Date [MM/DD/YYYY] \$				
House #	Street Address			Description of Expenditure				
61		Political description						
City		State	Zip Code					
To Whom Paid	\$15.4°	10.20 8.00 10.00 18	Bit of the with the bit of the bit of	Date [MM/DD/YYYY] \$				
House #	Street Address			Description of Expenditure				
City		State	Zip Code					
To Whom Paid			Code					
10 Whom Paid				Date [MM/DD/YYYY] \$				
House #	Street Address			Description of Expenditure				
City		State	Zip					
		Jale	Code					
To Whom Paid		The stay of the		Date [MM/DD/YYYY] \$				
House #	Street Address		Description of Expenditure					
			O C T Mark Construction	The second secon				
City		State	Zip Code					
To Whom Paid	75 T	Inches of States		Date [MM/DD/YYYY] \$				
			•					
House#	Street Address		Description of Expenditure					
City		State	Zip Code					
To Whom Paid	200 C C	DISTRICTED OF THE PARTY OF THE	CONE.	Process Teath at this process of the second				
i A AALIONI LAID				Date [MM/DD/YYYY] \$				
House #	Street Address	······································	Description of Expenditure					
STREET ADDRESS				pestipuon oi Expenditure				
City	■ 02 (1990) 144 (497) 114 (1991) 1192	State -	Zip					
			Code					