Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 2015	5C0087				port ed B		CAN	DII	DATE	~	C	ОММІТТ	EE	LO	BB	YIST		
Name of Filing C	ommittee, Candid	late or L	obbyist:		CON	NNEL	LY, E	RIN C	OLL	EEN									
Street Address:																			
City:								State:	1				Zip Co	de:	16508				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	<u>-</u>	2. X	30 DA		P	OST-	3.		AMEND REPOR		Yes	3	No)	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E-	5.	30 DA		P	OST-	6.		TERMIN REPOR		Ye	,	No)	√
report type)	ANNUAL REPORT	7.	Year 2015					IG MET					PAPER		Y		DISKE	TTE	
Name of Office S	ought by Candida	ite:	•		-			DATE	0	F ELE	CTI	ON	District Numbe			art	y Code	Cour	
								МО		DAY	,	YEAR	6	СРЈ		DEM		25	
JUDGE OF THE	COURT OF COM	10N PLE	AS						11		3	2015		(SEE	INSTRU	TIO	NS FOR	CODES)
Summary of	•	МО	DAY	YEAR	ł			МО		DAY	1	YEAR	F	OR OFF	ICE U	SE (ONLY		
Expenditures	from:		1 1	. 2	015	Т	0		5		4	2015	5						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$					0.00							
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule	e I)	\$					0.00							
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					0.00							
D. Total Expend	ditures (From Sch	edule II	I)				\$				2	,030.48							
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				(2,	030.48)							
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	[)	\$					0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)			\$					0.00			•				
				AFF	ID/	٩VI	T SE	CTIO	N										
PART I - If this is	a Committee rep	ort, trea	surer sign	here.	If th	is is	a Car	ndidate	e re	port, c	cano	didate si	gn here						
I swear (or affirm) correct and complete	that this report, inc ete.	luding the	e attached so	hedule	s file	d on	paper	or by el	ectr	onic m	ediu	m, are to	the best	of my kr	owled	je a	nd beli	ef , tr	ue
Sworn to and subs	cribed before me thi day of	is	20						-			Signatu	e of Pers	on Subm	itting I	Repo	ort		_
	Signati						-		•				Pri	nted Na	me				-
My Commission Ex	•								-				Em	ail					-
	мо	D	AY	YR			_			Arc	ea C	ode	Dayti	me Tele	phone	Num	ıber		
Part II- If this is	a report of a can	didate's	authorized	Comr	nitte	e, C	andid	ate sha	all s	sign he	ere.								
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and bel	ief this	polit	tical	comm	ittee ha	s no	ot viola	ted a	any provi	sions of t	he act of	June 3	,19	37 (P.L	133	з,
Sworn to and subsc	ribed before me this	1										;	Signature	of Cand	idate				-
	day of 						_						Print	ed Nam					_
	Signature						-		_						-				_
My Commission Exp	_												Em	ail					
	МО	D	AY	YR	ł		•			Area	Cod	e	ı	Daytime	Teleph	one	Numb	er	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CONNELLY, ERIN COLLEEN	From:	1/1/201	<u>5</u> To:	<u>5/4/2015</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part 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
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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.

Name of Filing Committee or Candida	e	R	eporting	Period			
		F	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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.

Name of Filing Commi	ttee or Candidate	1	Reporting I	Period			
		,	From:		Te	o:	
		L		DATE			AMOUNT
Full Name of Contributo	r		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)		1	Ī	I	

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

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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		,	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Schee	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

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

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

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00

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.

Name of Filing Committee	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	4.			\$	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

Name of Filing Committee or Candidate	Reporting Period		
CONNELLY, ERIN COLLEEN	From:	<u>1/1/2015</u> To:	<u>5/4/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod		
CONNELLY, ERIN COLLEEN	From	1/1/2015	То:	<u>5/4/2015</u>

				DATE			AMOUNT
aid			мо	DAY	YEAR		
to Elect Erin Conn	elly		1.0				
dress 1623 W. 2	11 St		4	16	2015	\$	1,200.00
9	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16502	Loan to	Committe	е		
aid			МО	DAY	VEAD		
er Foundation			140		ILAK		
dress 5062 Ellin	gton Dr		3	3	2015	\$	250.00
9	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16506	advertis	sing			
Paid			MO	DAY	VEAD		
ealth of PA			MO		ILAK		
dress 400 North	St		3	6	2015	\$	100.00
risburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
	PA	17120	democra	atic petitio	n filing fe	e	
Paid	<u> </u>	·		l _{DAV}	VEAD		
ealth of PA			МО	DAY	YEAR		
tress 400 North	St		3	6	2015	\$	100.00
400 1101111							
risburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	State PA	Zip Code (Plus 4) 17120	1	tion of Exp		2	
			republic	an petition	filing fee	9	
risburg	PA		1			2	
risburg	PA		republic	an petition	filing fee	\$	50.00
rrisburg Paid y Democratic Party Iress 1305 State	PA	17120	mo 2	DAY	YEAR 2015		50.00
rrisburg P aid y Democratic Party	PA e St.		mo 2	DAY 23 tion of Exp	YEAR 2015		50.00
rrisburg Paid y Democratic Party Iress 1305 State	e St. State	17120 Zip Code (Plus 4)	MO 2 Description email blooms	DAY 23 tion of Explast	YEAR 2015 enditure		50.00
Paid y Democratic Party dress 1305 State	e St. State	17120 Zip Code (Plus 4)	MO 2 Descript	DAY 23 tion of Exp	YEAR 2015		50.00
Paid y Democratic Party dress 1305 State	e St. State PA	17120 Zip Code (Plus 4)	MO 2 Description email blooms	DAY 23 tion of Explast	YEAR 2015 enditure		
Paid y Democratic Party dress 1305 State e	e St. State PA	17120 Zip Code (Plus 4)	MO 2 Descript email bl MO 4	DAY 23 tion of Explast DAY	YEAR 2015 enditure YEAR 2015	\$	10.73
	raid er Foundation dress 5062 Elling ealth of PA dress 400 North rrisburg raid ealth of PA	to Elect Erin Connelly dress 1623 W. 21 St State PA Paid Praid Praid Praid Paid Pa	to Elect Erin Connelly dress 1623 W. 21 St E State Zip Code (Plus 4) 16502 Paid PA 16502 Paid PA 2ip Code (Plus 4) 16506 PA 16506 Paid PA 16506 Paid PA 16506 Paid PA 17120 Paid PA 17120	And to Elect Erin Connelly Alress 1623 W. 21 St State Zip Code (Plus 4) PA 16502 Loan to Paid Paid Paid Paid Paid Paid Paid Paid Paid	And to Elect Erin Connelly Ares 1623 W. 21 St State	And to Elect Erin Connelly Aress 1623 W. 21 St	Mo DAY YEAR State Zip Code (Plus 4) Description of Expenditure Loan to Committee

To Whom Paid								
FedEx Office				МО	DAY	YEAR		
							_	170.01
Mailing Address 5755 Peach St				4	20	2015	\$	170.01
City Erie		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16509	printing				
To Whom Paid								
FedEx Office				МО	DAY	YEAR		
Mailing Address	5755 Peach St			4	21	2015	\$	60.14
City Erie		State	Zip Code (Plus 4)	Description of Expenditure				
		PA	16509	business cards				
To Whom Paid					l			
Community Access Television				МО	DAY	YEAR		
Mailing Address 142 W. 12th St.				4	21	2015	\$	35.00
City Erie	State Zip Code (Plus 4)			Description of Expenditure				
		PA	16501	video				
To Whom Paid					l _{DAV}	VEAD		
Cvs Pharmacy				МО	DAY	YEAR		
Mailing Address 1535 W 26th St				2	6	2015	\$	19.60
City Erie		State	Zip Code (Plus 4)	Description of Expenditure				
	PA 16508			Stamps				
To Whom Paid								
County of Erie				МО	DAY	YEAR		
Mailing Address 140 W 6th St				1	28	2015	\$	35.00
City Erie		State	Zip Code (Plus 4)	Description of Expenditure Supervoter list				
		PA	16501					
								PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$	2,030.48
								2,030.40