Campaign Finance Report

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

Filer Identification 20120075 Rep Number : File							CAN	DI	DATE		СОМІ	MITTEE	<	LOB	BYIST		
Name of Filing (Committee, Candid	ate or L	obbyist:			-	TO ELE	СТ	RYAN	BIZ	L ZARRO						
Street Address:																	
City:	ERIE						State:	E: PA Zip Code: 16506-3011						011			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	2ND FRIDAY PRE- 2. X 3 PRIMARY F				P	POST- 3.			AMENDN REPORT		Yes	Ν	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	2ND FRIDAY PRE- ELECTION 5. 30				P	POST- 6.			TERMINATION REPORT?		Yes	Ν	0	\checkmark
report type)	ANNUAL REPORT	7.	Year 2015				ING MET) CHECK					PAPER		\checkmark	DISK	ETTE	
Name of Office S	L Sought by Candidat	te:					DATE	0	F ELEC	CTIO	N	District Number	Office Code	Par	ty Cod	Cou Cod	
							мо		DAY	YE	AR			DEN	1	1000	
								11		3	2015		(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR	2		мо		DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	,	
Expenditures	s from:		3 31	2	015	то		5		4	2015						
A. Amount Bro	ught Forward From	n Last R	eport				\$			30,4	65.88						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			:	\$			30,4	65.88						
D. Total Expen	ditures (From Scho	edule II	I)				\$			7,4	42.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			23,0	23.88	-					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						
				AFF	IDAV	IT S	ECTIO	Ν									
	s a Committee rep																
correct and compl) that this report, incl ete.	luaing the	e attached sc	neaule	s filed of	n pape	r or by ei	ectr	onic me	aium	, are to t	the best o	т ту кпоч	vieage	and be	lier, ti	rue
Sworn to and subs	scribed before me this day of 	5	20					-		S	ignature	e of Perso	n Submitt	ing Rep	oort		_
	Signatu	re				_		-				Prin	ted Name				—
My Commission E	xpires							-				Ema	il				_
	МО	D	AY	YR					Are	a Cod	e	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized	Comn	nittee,	Candi	date sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ief this	politica	l com	mittee ha	s no	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subscribed before me this day of 20										s	ignature (of Candida	ite			-	
						_						Printe	ed Name				-
My Commission Exp	Signature							-				Ema	il				_
	мо	D	AY	YR					Area	Code		D	aytime Te	elephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** COMMITTEE TO ELECT RYAN BIZZARRO From: <u>3/31/2015</u> **To:** 5/4/2015 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate				Reporting Period						
				From: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00		

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. (Exclude contributions from political committees reported in Part A)										
Name of Filing Committee or Candida	te		Rep	orting P	eriod					
			Fror	From: Te			D:			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address		_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on	\$	0.00								

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		A	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 Schedule I, Detailed Summary Page, Section							\$	0.00		

PART D 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				porting Period					
From:				m: To:					
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

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.

Name of Filing Committee or Candidate			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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 P	eriod	
COMMITTEE TO ELECT RYAN BIZZARRO	From:	<u>3/31/2015</u> то:	<u>5/4/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBU	FOR	
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, 2		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting Period						
	From:			То:					
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address						 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		-		•				
Enter Grand Total of Part F on Scl Section 2.	nedule II, In-Ki	nd Contributions Detai	led 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				Reporting Period						
				om:		То:				
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00					

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
COMMITTEE TO ELECT RYAN BIZZARRO	C		From	<u>3/3</u> :	<u>1/2015</u>	То:	<u>5/4/2015</u>		
				DATE		AMOUNT			
To Whom Paid				DAY	YEAR				
FECHORKO PROPERTIES									
Mailing Address				7	2015	\$	1,067.00		
City ERIE State Zip Code (Plus 4)				tion of Exp	enditure	•			
	PA	16505	HQ EXP	ENSES					
To Whom Paid HDCC	мо	DAY	YEAR						
Mailing Address	2	7	2015	\$	6,000.00				
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17101	STAFFI	NG					
To Whom Paid E A H S EDINBORO HISTORICAL SOC.			мо	DAY	YEAR				
Mailing Address			3	24	2015	\$	175.00		
City EDINBORO	State	Zip Code (Plus 4)	Descrip	L tion of Exp	enditure	I			
	PA	165	BANNER	ર					
To Whom Paid SACRED HEART ALTER SOCIETY			мо	DAY	YEAR				
Mailing Address			3	28	2015	\$	200.00		
City ERIE State Zip Code (Plus 4)				l tion of Exp	enditure	I			
PA 16508				DONATION-SPAGHETTI DINNER					
							PAGE TOTAL		
Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item D).			\$	7,442.00		

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