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 | 20120 | 0075 | | | | Repo Filed | | : | CA | NDII | DATE | | СОММ | ITTEE | TTEE LOBBYIST | | | | |
|---|--------------------------|-------------|-----------|----------------|---------|------------|---------------|----------------|-------|---------------|--------|----------|-------|-------------|--------------------|----------------|----------|--------|-----------|----------|
| Name of Filing C | ommittee, | Candida | te or Lo | obbyis | t: | | COMM | ITT | EE 7 | ΓΟ EL | .ECT | RYAN | BIZ | ZARRO | | | | | | |
| Street Address: | 2653 V | VEST 25 | TH STE | REET | | | | | | | | | | | | | | | | |
| City: | ERIE | | | | | | | | | State | e: | PA | | | Zip Cod | le: 16 | 506-3 | 011 | | |
| TYPE OF REPORT | 6TH TUESDA PRE-PRIMAR | | 1. | 2ND F PRIMA | | PRE- | 2. | | D DA | | Р | OST- | 3. | | AMENDM REPORT? | | Yes |] [| No | \ |
| (place X to the right of | 6TH TUESDA PRE-ELECTI | | 4. | 2ND F ELECT | | PRE- | - 5.2 | X 30 El | | Y | Р | OST- | 6. | | TERMINA REPORT? | | Yes |] | No | \ |
| report type) | ANNUAL R | EPORT | 7. | Year | 2017 | | | | | IG ME CHEC | | _ | | | PAPER | | \ | DIS | (ETTE | |
| Name of Office S | ought by C | andidat | e: | | | | | | | DAT | ΕO | F ELE | CTI | NC | District Number | Office Code | Pai | ty Co | le Cou | |
| | | | | | | | | | | МО | | DAY | Y | EAR | | | DEI | М | | |
| | | | | | | | | | | | 11 | | 7 | 2017 | | (SEE INS | STRUCTI | ONS FO | R CODES | 5) |
| Summary of Receipts and Expenditures from: MO DAY YEAR MO DAY YEAR TO 10 20 20 20 20 | | | | | | | | EAR | FO | R OFFIC | E USE | ONL | Y | | | | | | | |
| expenditures | irom: | | | 9 | 19 | 20 |)17 | то | | | 10 | : | 23 | 2017 | | | | | | |
| A. Amount Bro | ught Forwa | rd From | Last R | eport | | | | | \$ | | | | | 537.67 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 4,650.00 | | | | | | | | | | | | | | | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) \$ 44,187.67 | | | | | | | | | | | | | | | | | | | | |
| D. Total Expenditures (From Schedule III) \$ 1,886.50 | | | | | | | | | | | | | | | | | | | | |
| E. Ending Cash | Balance (S | ubtract | Line D | From | Line C | :) | | _ | \$ | | | | 42, | 301.17 | | | | | | |
| F. Value Of In- | | | | | | | e II) | | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Oblig | gations (| (From S | chedu | ile IV) | | | | \$ | | | | | 0.00 | | | | | | |
| | | | | | | AFF] | IDAV | /IT | SE | CTIC | NC | | | | | | | | | |
| PART I - If this is | | - | - | | _ | | | | | | | | | _ | | e l | | | -1:-£ A. | |
| I swear (or affirm) correct and comple | | oort, incit | iding the | attacn | ea scn | eaules | Tilea c | п ра | per o | ог ву е | electr | onic m | eaiun | n, are to t | ne best o | т ту кпоч | vieage | and b | енет , ті | rue |
| Sworn to and subs | cribed before day of | e me this | | 20 | | | | | | | | | | Signature | of Perso | n Submitt | ing Re | ort | | |
| | | Signatur | e | | | | | _ | | | | | | | Prin | ted Name | 1 | | | |
| My Commission Ex | opires — | | | | | | | _ | | | | | | | Ema | il | | | | |
| | М | 0 | DA | ΑY | | YR | | | | | | Are | ea Co | de | Daytim | e Teleph | one Nu | mber | | ᆜ |
| Part II- If this is | a report of | f a cand | idate's | authoi | rized (| Comm | ittee, | Can | dida | ate sl | nall s | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | best of m | y knowle | edge an | d belie | f this | politic | al co | mmi | ittee h | as no | ot viola | ted a | ny provis | ions of the | e act of Ju | ıne 3,1 | 937 (I | P.L. 133 | 3, |
| Sworn to and subsc | ribed before day of | me this | | 20 | | | | | | | | | | s | ignature o | of Candida | ate | | | - $ $ |
| | | | | - | | | | | | | | | | | Printe | d Name | | | | - |
| My Commission Exp | _ | ınature | | | | | | _ | | | - | | | | Ema | il | | | | - $ $ |
| , commission exp | | | | | | | | | | | | | | | | | | | | _ |
| | | мо | DA | AY | | YR | | | | | | Area | Code | | Da | aytime To | elephor | ne Nur | nber | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting Period | | | | | | |
|--|------------------|----------|--------------|------------|--|--|--|
| COMMITTEE TO ELECT RYAN BIZZARRO | From: | 9/19/201 | <u>7</u> To: | 10/23/2017 | | | |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | | | | |
| TOTAL for the Reporting | g 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) | | | \$ | 250.00 | | | |
| All Other Contributions (Part B) | \$ | 0.00 | | | | | |
| TOTAL for the Reporting | (2) | \$ | 250.00 | | | | |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 4,400.00 | | | |
| All Other Contributions (Part D) | | | \$ | 0.00 | | | |
| TOTAL for the Reporting | J Period | (3) | \$ | 4,400.00 | | | |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | | | | |
| TOTAL for the Reporting | g 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 | | | \$ | 4,650.00 | | | |

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 Candidate | Reporting | Period | | |
|---------------------------------------|-----------|-----------|-----|------------|
| COMMITTEE TO ELECT RYAN BIZZARRO | From: | 9/19/2017 | To: | 10/23/2017 |
| | | DATE | | AMOUNT |

| Full Name of Contributing Committee PSEA PACE | МО | DAY | YEAR | | | |
|---|--------------------|-----|------|-----------|------|--|
| Mailing Address 400 N THIRD ST F | | | | \$ 250.00 | | |
| City HARRISBURG | State PA | | | 25 | 2017 | |

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

PAGE TOTAL \$ 250.00

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 Filling Committee of Candidate | | | | Reporting Period From: To: | | | | | |
|--|-------|-------------------|---|----------------------------|------|------|----------|-------|--|
| | | | | | DATE | | AN | 4OUNT | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | \$ \$ | 0.00 | |
| City | State | Zip Code (Plus 4) | 1 | | | | | | |

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

PAGE TOTAL \$ 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 | | | | | | |
|---|--------------------|--------------------------|------------|----------|--------|------|------------|--------|
| COMMITTEE TO ELECT RYAN BIZZARRO | | | From: | 9/1 | 9/2017 | То: | 10/23/2017 | |
| | | • | | DA | TE | | AMOUNT | |
| Full Name of Contributing Committee LAWPAC | | | | МО | DAY | YEAR | | |
| Mailing Address 212 N THIRD ST STI | ≣ 200 | | | | | | \$ 1,0 | 00.00 |
| City HARRISBURG | State PA | Zip Code 17101 | e (Plus 4) | 7 | 25 | 2017 | | |
| Full Name of Contributing Committee PENNSYLVANIA AFL-CIO COPE Mailing Address | | | | | DAY | YEAR | | |
| Mailing Address 600 N SECOND ST City HARRISBURG | State PA | Zip Code 17101 | e (Plus 4) | 7 | 25 | 2017 | \$ | 500.00 |
| Full Name of Contributing Committee NFG PAPAC | | | | | DAY | YEAR | | |
| Mailing Address 1100 STATE ST City ERIE | State PA | Zip Code 16501 | e (Plus 4) | 7 | 25 | 2017 | \$ | 500.00 |
| Full Name of Contributing Committee EXELON PAC | | | | МО | DAY | YEAR | | |
| Mailing Address 101 CONNECTICUT A City WASHINGTON | State DC | Zip Code 20001 | e (Plus 4) | 7 | 25 | 2017 | \$ 5 | 500.00 |
| Full Name of Contributing Committee PAW-PAC | | | | МО | DAY | YEAR | | |
| Mailing Address 800 W HERSHEYPAR | K DR. | | | - | 3.5 | 2017 | \$ | 300.00 |
| City HERSHEY | State PA | Zip Code 17033 | e (Plus 4) | 7 | 25 | 2017 | | |

| Full Name of Contributing Committee CONSOL ENERGY, INC. PAC | NSOL ENERGY, INC. PAC | | | | | |
|---|--|-------------------|------|----|------|--------------------|
| Mailing Address 1000 CONSOL ENER | GY DR | | | | | \$ 300.00 |
| City CANONSBURG | State | Zip Code (Plus 4) | 7 | 25 | 2017 | |
| | PA | 15317 | | | | |
| Full Name of Contributing Committee FIRSTENERGY PAC | МО | DAY | YEAR | | | |
| Mailing Address 76 S. MAIN ST. | Mailing Address 76 S. MAIN ST. | | | | | \$ 300.00 |
| City AKRON | State | Zip Code (Plus 4) | 7 | 25 | 2017 | |
| | ОН | 443081890 | | | | |
| Full Name of Contributing Committee PLUMBERS UNION LOCAL 690 ELECTION | Full Name of Contributing Committee PLUMBERS UNION LOCAL 690 ELECTION POLITICAL ACTION FUND | | | | | |
| Mailing Address 2791 SOUTHAMPTON RD | | | | | | \$ 1,000.00 |
| City PHILADELPHIA | State | Zip Code (Plus 4) | 7 | 31 | 2017 | |
| PA 19154 | | | | | | |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 4,400.00

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 | me of Filing Committee or Candidate | | | Rep | orting Pe | riod | | | |
|--|-------------------------------------|-------------------|------------|---------|-----------|-------|------|---------|--------------------|
| | | | | Fror | n: | | To |): | |
| | | | | | D | ATE | | А | MOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | | |
| Employer Name | • | • | | | Occupa | tion | | • | |
| Employer Mailing Address/Principal Pla Business | ce of | | City | | • | State | | Zip Coo | de (Plus 4) |
| Enter Grand Total of Part C on Sch | edule I, Deta | iled Sumr | mary Page, | Section | on 3. | | | F \$ | 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 Co | andidate | | Report | ting Perio | bd | | | |
|--------------------------------|-----------------------|------------------|---------|------------|-----|------|----|----------|
| | | | From: | | | То: | | |
| | | | | D | ATE | | AN | 10UNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | • | | | | | | |
| Enter Grand Total of Part E or | Schedule T Detaile | d Summary Page | Section | 4 | | | PA | GE TOTAL |
| Lines Grana Fotal of Fair 2 of | r benedule 1/ betanet | z Sammary r age, | Section | •• | | | \$ | 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 Perio | d | | | | | |
|--|-----------------|-----------------------------|------------|--|--|--|--|
| COMMITTEE TO ELECT RYAN BIZZARRO | From: | <u>9/19/2017</u> To: | 10/23/2017 | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | | | | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 | | | | |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candid | ate | | Reporting | g Period | | | |
|---|---------------------|-----------------------|-----------|---------------|------|-----------|------------|
| | | | From: | | | То: | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributor Mailing Address | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| Description of Contribution: | | | | | | | |
| Enter Grand Total of Part F on S | chedule II In-Kir | nd Contributions Deta | iled Sum | mary Pag | ле Г | | PAGE TOTAL |
| Section 2. | incudic 11, 111 Kii | ia contributions beta | nea Sam | illial y I as | , | | PAGE TOTAL |
| | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | me of Filing Committee or Candidate | | | | Re | porting l | Period | | | |
|--|-------------------------------------|--|------------|---------|--------|------------|-----------|-------|---------|--------------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | | - \$ | 0.00 |
| City | State | | Zip Code(I | Plus 4) | | | | | | |
| Employer of Contributor | | | | | | Occupation | | | | |
| Employer Mailing Address/Principal Place of Business City State | | | | | | Zip 4) | Code(Plus | Descr | iptio | n of Contribution |
| Enter Grand Total of Part G on Schedule II, In-K Summary Page, Section 3. | | | Contributi | ons De | etaile | ed | | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reporting Period | | | | | |
|--|--------------------|-----------------------------------|---|--|--------|-----|------------|--|
| COMMITTEE TO ELECT RYAN BIZZARRO | | | From | 9/19 | 9/2017 | То: | 10/23/2017 | |
| | | | | DATE | | | AMOUNT | |
| To Whom Paid UNITED STATES POST OFFICE | | | | DAY | YEAR | | | |
| Mailing Address 2711 LEGION RD | | | | 8 | 2017 | \$ | 198.00 | |
| City ERIE | State PA | Zip Code (Plus 4) 16506 | Description of Expenditure POST OFFICE BOX | | | | | |
| To Whom Paid RYAN A. BIZZARRO | | | МО | DAY | YEAR | | | |
| Mailing Address 2653 W 25TH ST | | | 7 | 8 | 2017 | \$ | 171.83 | |
| City ERIE | State PA | Zip Code (Plus 4) 16506 | Description of Expenditure REIMBURSE FOR JULY 4TH PARADE SUPPLIES | | | | | |
| To Whom Paid RYAN A. BIZZARRO | | | | DAY | YEAR | | | |
| Mailing Address 2653 W 25TH ST | | | | 7 | 2017 | \$ | 144.99 | |
| City ERIE | State PA | Zip Code (Plus 4) 16506 | REIMBU | Description of Expenditure REIMBURSE FOR MEETING WITH HDCC ON 08/05/2017 | | | | |
| To Whom Paid LAW PUBLICATIONS | | | | DAY | YEAR | | | |
| Mailing Address 15000 E BELTWOOD PKY | | | | 25 | 2017 | \$ | 549.00 | |
| City ADDISON | State TX | Zip Code (Plus 4) 75001 | 1 | otion of Exp | | 1 | | |
| To Whom Paid COMMITTEE TO ELECT KATHY FATICA | | | | DAY | YEAR | | | |
| Mailing Address | | | | 25 | 2017 | \$ | 500.00 | |
| City | State | Zip Code (Plus 4) | Description of Expenditure CONTRIBUTION | | | | | |

| To Whom Paid COMMITTEE TO ELECT MARY JO CAMPBELL | | | мо | DAY | YEAR | | | |
|---|-------------------------|-----------------------------------|---|-----|------|----|------------|--|
| Mailing Address | | | | 25 | 2017 | \$ | 250.00 | |
| City | State | Zip Code (Plus 4) | Description of Expenditure CONTRIBUTION | | | | | |
| To Whom Paid DENISE BIZZARRO | | | МО | DAY | YEAR | | | |
| Mailing Address 3120 BROADLAWN DR | | | 10 | 10 | 2017 | \$ | 72.68 | |
| City ERIE | State PA | Zip Code (Plus 4) 16506 | Description of Expenditure REIMBURSE FOR MEMORIAL DAY PARADE SUPPLIES | | | | | |
| Enter Grand Total of Evn | enditures en Page 1. Re | nort Cover Bage Item D | • | | | | PAGE TOTAL | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | | 1,886.50 | |