### **Campaign Finance Report**

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

Filer Identification 20190060 Number :						port ed B		CAND	DATE			<b>ITTEE</b>	<b>√</b>	LOB	BYIST		
Name of Filing C	Committee, Can	didate or L	obbyist:		SAL	.A, P	ETE F	RIENDS	OF								
Street Address:	731 FREN	CH ST, 2NI	) FL														
City:	ERIE -							State:	PA	PA		<b>Zip Code:</b> 16501-2104					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST- 3. <b>X</b>			AMENDMENT REPORT?		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	POST- 6.			ATION ?	Yes	No		<b>/</b>
report type)	ANNUAL REPO	<b>PRT</b> 7.	<b>Year</b> 2019					IG METH CHECK O				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	ought by Cand	idate:	-					DATE C	)F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR	6	СРЈ	DEI	1	25	
JUDGE OF THE	COURT OF CO	MMON PLE	AS					11		5	2019		(SEE IN	STRUCTI	ONS FOR (	CODES)	)
Summary of Receipts and MO DAY YEAR MO DAY YEAR FOR OFFICE USE								ONLY									
Expenditures	s trom:		5 7	20	019	Т	0	6	5	10	2019						
A. Amount Bro	ught Forward I	rom Last F	leport				\$	-		8,7	87.23						
B. Total Moneta	ary Contributio	ns And Red	eipts (From S	Sche	dule	e I)	\$			6	500.00						
C. Total Funds	Available (Sun	of Lines A	and B)				\$			9,3	87.23						
D. Total Expend	ditures (From	Schedule II	I)				\$			8,9	35.77						
E. Ending Cash	Balance (Subt	ract Line D	From Line C)				\$			4	51.46	]					
F. Value Of In-	Kind Contribut	ions Receiv	ed (From Sch	edul	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligation	ons (From	Schedule IV)				\$				0.00						
			ŀ	٩FF	ID/	AVI	T SE	CTION									
PART I - If this is	s a Committee	report, trea	surer sign he	re. 1	If th	nis is	a Can	ididate r	eport, o	candio	date sig	jn here.					
I swear (or affirm) correct and comple		including th	e attached sche	dules	file	d on	paper o	or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , tru	ue.
Sworn to and subs	cribed before me day of	this	20							s	ignature	of Perso	n Submit	ting Re <sub>l</sub>	oort		
	Sigi	nature					- -					Prin	ted Name	•			
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Ar	ea Cod	e	Daytin	ie Teleph	one Nu	mber		
Part II- If this is	a report of a	andidate's	authorized Co	omn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief	this	polit	tical	commi	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		this									s	ignature (	of Candid	ate			-
	day of						_					Drinto	ed Name				_ [
	Signati	ıre					-					FIIICE	u Haille				
My Commission Exp	_	<del>.</del>										Ema	il				_
	МО	D	AY	YR			-		Area	Code		D	aytime T	elephor	ne Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
SALA, PETE FRIENDS OF	From:	<u>5/7/201</u>	<u>9</u> То:	6/10/2019
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)			\$	600.00
TOTAL for the Reporting	) Period	(2)	\$	600.00
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	) 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			\$	600.00

#### **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			
		F	rom:		То	<b>!</b>	
		•		DATE			AMOUNT
Full Name of Contributing Com	mittee		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.

### 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)

State   PA	Name of Filing Com	mittee or Candidate		Reporting Period					
No	SALA, PETE FRIEND	OS OF		From:	<u>5/7/</u>	2019 <b>T</b> o	6/10/2019		
Mo			I		DATE	AMOUNT			
State	Full Name of Contribu	tor		МО	DAY	YEAR			
State   PA   16509	JOHN ORLANDO			140	אלו	ILAK			
PA	Mailing Address 1	327 GREENFIELD DRIVE					<b>\$</b> 100.00		
MO	City ERIE	State	Zip Code (Plus 4)	5	20	2019			
Mo		PA	16509						
## Address	Full Name of Contribu	Full Name of Contributor							
State   PA   16507   PA   16507   PA   PA   16507   PA   PA   16507   PA   PA   PA   PA   PA   PA   PA   P	AL MONSCHEIN			140	אלו	ILAK			
PA	Mailing Address 9	33 W FRONT ST					<b>\$</b> 100.00		
Mo	City ERIE	State	Zip Code (Plus 4)	5	20	2019			
### ### ##############################		PA	16507						
### ### ##############################	Full Name of Contribu	tor		МО	DAY	YEAR			
State   Zip Code (Plus 4)   5   24   2019	TED SIMON								
PA	Mailing Address 1	600 MARKET ST					<b>\$</b> 200.00		
MO   DAY   YEAR	City PHILADELPHIA	State	Zip Code (Plus 4)	5	24	2019			
## ANCE NOLAN  ### State		PA	19103						
ANCE NOLAN  Mailing Address 1253 W 10TH ST  Sity ERIE State Zip Code (Plus 4) 5 24 2019  Full Name of Contributor  MARILYNN STADTMILLER  Mo DAY YEAR  Mailing Address 1354 W 36TH ST  Sity ERIE State Zip Code (Plus 4) 5 24 2019  Full Name of Contributor  Marilynn STADTMILLER  Mo DAY YEAR  \$ 100.00	Full Name of Contribu	tor		МО	DAY	VFΔR			
State   Zip Code (Plus 4)   5   24   2019	LANCE NOLAN			1.0	5711	12/11			
PA   16507	Mailing Address 1	253 W 10TH ST					<b>\$</b> 100.00		
Full Name of Contributor MARILYNN STADTMILLER Mo DAY  YEAR Mailing Address 1354 W 36TH ST Sity ERIE State Zip Code (Plus 4) 5 24 2019 PA 16508  ** 100.00	City ERIE	State	Zip Code (Plus 4)	5	24	2019			
MO DAY   YEAR		PA	16507						
MARILYNN STADTMILLER	Full Name of Contribu	tor		MO	DAY	VEAD			
State         Zip Code (Plus 4)         5         24         2019           PA         16508	MARILYNN STADTMIL	LER		NO	<i>D</i> A1	ILAR			
PA 16508	Mailing Address 1354 W 36TH ST					<b>\$</b> 100.00			
	City ERIE	State	Zip Code (Plus 4)	5	24	2019			
PAGE TOTAL		PA	16508						
		<u> </u>					PAGE TOTAL		

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

7/1/2025 7:49:54 AM

600.00

#### **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		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0	00
Mailing Address							<b>+</b>	0.	00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0	0

### 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					
				Fron	n:		1	o:			
					D	ATE			АМО	UNT	
Full Name of Contributor					МО	DAY	YEAR	ł	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City		•	State		Ziı	p Code (	Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	umm	ary Page,	Section	on 3.				PAG	E TOTAL	
								\$		0.0	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:			То:		
					ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	lus 4)					
Receipt Description	'	<b>,</b>		<u> </u>		_ <b>!</b>	•	
			· ··	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	i Summary Page, S	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	d	
SALA, PETE FRIENDS OF	From:	<u>5/7/2019</u> <b>To:</b>	6/10/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Can	didate		Reporting Period					
			From:			To	·	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zij	p Code(Plus 4)	Descr	iptio	n of Contribution	on
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.					-					0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
SALA, PETE FRIENDS OF	From	<u>5/7/2019</u>	То:	6/10/2019		

					DATE		AMOUNT
To Whom Paid				мо	DAY	YEAR	
DESANTIS SIGN	NS & GRAPHICS, INC.			1-10			
Mailing Address	540 W. 18TH STREE	ET .		6	10	2019	\$ 136.74
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	16502	ADVERT	TISING		
To Whom Paid				мо	DAY	YEAR	
KELLY PRINTING	G & GRAPHICS			М		ILAK	
Mailing Address	2022 FILMORE AVE	NUE, STE 16		6	10	2019	\$ 581.78
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	16506	ADVER1	TISING		
To Whom Paid				мо	DAY	YEAR	
ECBA				1-10		. LA	
Mailing Address	429 WEST 6TH ST			6	10	2019	\$ 100.00
City ERIE	State Zip Code (Plus 4)				tion of Exp	enditure	
		PA	16507	ADVERT	ΓISING		
To Whom Paid				мо	DAY	YEAR	
SENIOR CITIZE	NS NEWS			М		ILAK	
Mailing Address	PO BOX 3056			6	10	2019	\$ 480.00
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	16508	ADVERT	ΓISING		
To Whom Paid				мо	DAY	YEAR	
WICU				М		ILAK	
Mailing Address	3514 STATE ST			5	14	2019	\$ 3,157.75
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	16508	ADVERT	ΓISING		
To Whom Paid				мо	DAY	YEAR	 
WSEE				МО		ILAR	
Mailing Address	3514 STATE ST			5	14	2019	\$ 1,300.50
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA 16508			ADVERT	ΓISING		
		•	-	-			

To Whom Paid				МО	DAY	YEAR		
WJET-TV24								
Mailing Address 8455 PEACH ST				5	16	2019	\$	3,179.00
City	ERIE	State	Zip Code (Plus 4)	Description of Expenditure ADVERTISING			ı	
		PA	16509					
								PAGE TOTAL
nter	Grand Total of Expenditures	on Page 1, Rep	oort Cover Page, Item D				\$	
Enter	Grand Total of Expenditures	on Page 1, Rep	oort Cover Page, Item D				\$	
Enter	Grand Total of Expenditures	on Page 1, Rep	oort Cover Page, Item D				\$	
Enter	Grand Total of Expenditures	on Page 1, Rep	oort Cover Page, Item D				\$	8,935.77
Enter	Grand Total of Expenditures	on Page 1, Rep	oort Cover Page, Item D				\$	
Enter	Grand Total of Expenditures	on Page 1, Rep	oort Cover Page, Item D				\$	