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 20	180238			Repo Filed		CA	NDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF BOB MERSKI																	
Street Address:	P.O. BOX 667 Street Address:																
City:	ERIE						State	e:	PA Zip Code: 16521								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	AY PRE- 2. X 30 DAY P PRIMARY					POST- 3.			AMENDM REPORT		Yes	No		/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.	30 D	AY CTION	P	POST-	6.		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPO	RT 7.	Year 2020				FILING METHOD () CHECK ONE					PAPER DISK			DISKE	TTE	
Name of Office S	ought by Candi	date:	-				DAT	ΈΟ	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
DEDDECENITATI	VE IN THE CEN	IEDAL ACC	EMDLV				МО		DAY	YI	AR	2	STH	DEN	1	25	
REPRESENTATI	VE IN THE GEN	IEKAL ASS	EMPLY					11		3	2020		(SEE IN	STRUCTI	ONS FOR (CODES))
Summary of		МО	DAY Y	EAR			МО		DAY	Y	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures	irom:		3 10	20	020	то		5		18	2020]					
A. Amount Bro	ught Forward F	rom Last R	eport			9	\$			50,6	550.16						
B. Total Moneta	ary Contribution	ns And Rec	eipts (From S	che	dule I	9	\$			2,4	433.13						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			53,0	083.29						
D. Total Expend	ditures (From S	chedule II	I)			9	\$			2,0	57.37						
E. Ending Cash	Balance (Subtr	act Line D	From Line C)				<u> </u>			51,0	25.92						
F. Value Of In-	Kind Contributi	ons Receiv	ed (From Sch	edul	e II)	9	\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From S	Schedule IV)			9	\$			37,0	33.13						
			ļ	4FF	IDAV	IT SI	ECTIO	NC									
PART I - If this is	a Committee r	eport, trea	surer sign he	re. I	f this	is a Ca	ndida	te re	eport, o	candi	date sig	gn here.					
I swear (or affirm) correct and comple		including the	attached sche	dules	filed o	n papei	r or by	electi	ronic m	edium	, are to	the best o	f my knov	wledge	and beli	ef , tru	ue
Sworn to and subs	cribed before me day of	this	20							9	Signature	e of Perso	n Submit	ting Rep	oort		_
	Sian	ature				_						Prin	ted Name	•			_
My Commission Ex	pires											Ema	il				-
	мо	D.	AY	YR					Are	ea Coo	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized Co	omm	ittee,	Candi	date s	hall :	sign h	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief	this	politica	l comr	nittee l	nas n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		nis									s	ignature (of Candida	ate			-
	day of					_						Printe	d Name				-
	Signatu	re				_											_
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -							
Name of Filing Committee or Candidate	Reporting	g Period					
FRIENDS OF BOB MERSKI	From: <u>3/10/2020</u> To: <u>5/18/2</u>						
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	J Period	(1)	\$	200.00			
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)							
Contributions Received From Political Committees (Part A)			\$	850.00			
All Other Contributions (Part B)			\$	350.00			
TOTAL for the Reporting	\$	1,200.00					
3. Contributions Received Over \$250.00 (From Part C and Part D)							
Contributions Received From Political Committees (Part C)			\$	500.00			
All Other Contributions (Part D)			\$	500.00			
TOTAL for the Reporting	J Period	(3)	\$	1,000.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	J Period	(4)	\$	33.13			
			1				
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			\$	2,433.13			

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						
FRIENDS OF BOB MERSKI			Fre	om:	3/10/20) <u>20</u> To:	<u>5/18/2020</u>				
		•			DATE			AMOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR					
COMMITTEE TO ELECT JOHN T. LOOMIS	S			1-10		12/11					
Mailing Address 5706 JONES LN							\$	100.00			
City ERIE	State	Zip Code (Plus	4)	2	9	2020					
	PA	165051126									
Full Name of Contributing Committee				мо	DAY	YEAR					
HIGHMARK PAC				М		ILAK					
Mailing Address PO BOX 890089							\$	250.00			
City CAMP HILL	State	Zip Code (Plus	4)	3	10	2020					
	PA	170890089									
Full Name of Contributing Committee LAWPAC				мо	DAY	YEAR					
Mailing Address 212 N 3RD ST S	ΓE 101						\$	250.00			
City HARRISBURG	State	Zip Code (Plus	4)	3	2	2020					
	PA	171011505									
Full Name of Contributing Committee		-		мо	DAY	YEAR					
PA INSURANCE PAC											
Mailing Address 1600 MARKET ST	STE 1720						\$	250.00			
City PHILADELPHIA	State	Zip Code (Plus	4)	4	21	2020					
	PA	191037233									
		•					Г	DAGE TOTAL			

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

PAGE TOTAL 850.00

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 Filing Committee or Candidate Rep				porting Period						
FRIENDS OF BOB MERSKI From					3/10/2	5/18/2020				
					DATE		AMOUNT			
Full Name of Contributor MARY SUSAN DELAURA				мо	DAY	YEAR				
Mailing Address 33 ACTON ST APT	2				4	2020	\$ 250.00			
City ARLINGTON	State MA	Zip Code (Plus 4)		1	1	2020				
	MA	024766012								
Full Name of Contributor MICHAEL MOROCCO				мо	DAY	YEAR				
Mailing Address 3222 STOUGH AVE							\$ 100.00			
City ERIE	State	Zip Code (Plus 4)		2	9	2020				
	PA	165082083								

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

PAGE TOTAL \$ 350.00

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							
FRIENDS OF BOB MERSKI	From:	3/10/2020	То:	<u>5/18/2020</u>				

DATE AMOUNT

Full Name of Contributing Committee AFSCME COUNCIL 13 POLITICAL & amp;	МО	DAY	YEAR			
Mailing Address 4031 EXECUTIVE PARK DR				2		\$ 500.00
City HARRISBURG	State Zip Code (Plus 4) PA 171111507				2020	

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

PAGE TOTAL \$ 500.00

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						Reporting Period					
FRIENDS OF BOB MERSKI From					m: <u>3/10/2020</u>			5/18/2020			
					D	ATE		A	MOUNT		
Full Name of Con PETER RUSSO	tributor				МО	DAY	YEAR				
Mailing 5672 BONDY DR Address					2	18	2020	\$	500.00		
City ERIE		State Zip Code (Plus 4) PA 165093055				10	2020				
Employer Name	RETIRED				Occupation INFORMATION REQUESTED						
Employer Mailing Business	Address/Principal Plac	e of	City			State		Zip Cod	e (Plus 4)		
Enter Grand To	tal of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.				AGE TOTAL 500.00		

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	Reporting Period						
FRIENDS OF BOB MERSKI	From:	3/10/2020 To:	5/18/2020				

			D	ATE		AMOUNT
Full Name NATIONAL FUEL			МО	DAY	YEAR	
Mailing Address 6363 MAIN ST City WILLIAMSVILLE	City WILLIAMSVILLE State Zip Code (Plus 4)				2020	\$ 33.13
Receipt Description		142215855				

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 33.13

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	od	
FRIENDS OF BOB MERSKI	From:	3/10/2020 To :	<u>5/18/2020</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 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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		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	Reporting Period					
					Fro	om:		То:			
					•		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor	-1		•			Occupa	ation				
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
FRIENDS OF BOB MERSKI	From	3/10/2020	То:	5/18/2020

L							
				DATE	AMOUNT		
To Whom Paid ERIE CITY MISSION			мо	DAY	YEAR		
Mailing Address 1017 FR	RENCH ST		2	25	2020	\$	130.00
City ERIE	State PA	Zip Code (Plus 4) 165012003	Description of Expenditure KNOCK OUT HOMELESSNESS TICKETS AND AD				
To Whom Paid ERIE COUNTY DEMOCRATION	C PARTY		МО	DAY	YEAR		
Mailing Address 1305 ST	TATE ST		2	7	2020	\$	100.00
City ERIE	State PA	Zip Code (Plus 4) 165011915	Description of Expenditure PETITION SIGNING PARTY				
To Whom Paid FRIENDS OF JULIE SLOMSK	KI		МО	DAY	YEAR		
Mailing Address 5510 MI	ILL ST		1	9	2020	\$	50.00
City ERIE	State PA	Zip Code (Plus 4) 165092922	Description of Expenditure CAMPAIGN CONTRIBUTION				
To Whom Paid FRIENDS OF JULIE SLOMSK	CI		МО	DAY	YEAR		
Mailing Address 5510 MI	ILL ST		5	16	2020	\$	500.00
City ERIE	State PA	Zip Code (Plus 4) 165092922	Description of Expenditure CAMPAIGN CONTRIBUTION				
To Whom Paid MILLCREEK DEMOCRATS			МО	DAY	YEAR		
Mailing Address 1526 HI	GH ST		2	7	2020	\$	100.00
City ERIE	State PA	Zip Code (Plus 4) 165091963	Description of Expenditure PETITION SIGNING PARTY				

							7.02 12
To Whom Paid NUOVA AURORA SOCIETY				DAY	YEAR		
Mailing Address 1518 WALNUT ST			2	9	2020	\$	222.00
City ERIE	State PA	Zip Code (Plus 4) 165021759	Description of Expenditure FUNDRAISER FOOD				
To Whom Paid PERRY HIGHWAY HOSE CO.			МО	DAY	YEAR		
Mailing Address 8281 OL	IVER RD		1	9	2020	\$	250.00
City ERIE	State PA	Zip Code (Plus 4) 165094623	Description of Expenditure RENTAL FEE FOR HALL				
To Whom Paid RORY'S RISTORANTE			МО	DAY	YEAR		
Mailing Address 1518 WALNUT ST			2	9	2020	\$	340.20
City ERIE	State PA	Zip Code (Plus 4) 165021759	Description of Expenditure FUNDRAISER FOOD				
To Whom Paid SOUTH SHORE PARTY RENTAL MO DAY YEAR					YEAR		
Mailing Address 100 INDUSTRIAL DR			1	20	2020	\$	365.17
City EDINBORO	State PA	Zip Code (Plus 4) 164123106	Description of Expenditure SUMMER TENT RENTAL				
Enter Grand Total of Eve	anditures on Page 1	nort Cover Page Item D					PAGE TOTAL
Enter Grand Total of Exp	enultures on Page 1, Re	port Cover Page, Item D	'-			\$	2,057.37

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Re			Reporti	Reporting Period					
FRIENDS OF BOB MERSKI			From:	<u>3</u>	3/10/2020	То:		5/18/2020	
					DATE			Outstanding Balance of Debt	
Name of Creditor ROBERT E MERSKI				МО	DAY	YEAR			
Mailing Address 625 JAMES ST				5	2	2017	⁷ \$	37,000.00	
City ERIE	State PA	Zip Code (Pl 165091619		Description of Debt LOAN RECEIVE					
					DATE			Outstanding Balance of Debt	
Name of Creditor NATIONAL FUEL				МО	DAY	YEAR			
Mailing Address 6363 MAIN ST					6	2019	\$	33.13	
City WILLIAMSVILLE	State NY	Zip Code (Pl	-	Description of Debt OVER PAYMENT					
	•	1						PAGE TOTAL	
Enter Grand Total of Unpaid Deb									