### **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 2019	00033			Rep File			CAND	IDATE		СОМ	4ITTEE	✓	LOBE	YIST	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	Ī	RIDO	GE,	DAVE	COMMI	TTEE T	O ELE	СТ		_			
Street Address:	2525 W 26TH	ST														
City:	ERIE							State:	PA			Zip Cod	<b>ie:</b> 16	5506		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	. 2	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY   ELECTION	PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2020					IG METH CHECK O				PAPER	DISKE	ГТЕ		
Name of Office S	- Sought by Candida	te:						DATE (	OF ELE	СТІО	N	District Number	Office Code	Pari	ty Code	County Code
								мо	DAY	YE	AR			DEM		
								11		3	2020		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY YE	AR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	rrom:		5 19	20	020	Т	0	6	5	22	2020					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			1,1	63.99					
B. Total Moneta	ary Contributions	And Rec	eipts (From So	hec	dule	I)	\$			33,6	38.01					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			34,8	302.00					
D. Total Expend	ditures (From Sch	edule II	I)				\$			34,8	02.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$				0.00					
F. Value Of In-	Kind Contributions	Receiv	ed (From Sche	dul	e II)	)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			'		
			А	FF:	IDA	VI	T SE	CTION								
PART I - If this is	a Committee rep	ort, trea	surer sign her	e. I	f thi	is is	a Can	didate r	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and comple	that this report, inclete.	uding the	attached sched	ules	filed	l on	paper o	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me this day of	•	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	re					-		-			Prin	ted Nam	e		
My Commission Ex	xpires						_					Ema	il			
	МО	D	AY	YR					Ar	ea Cod	e	Daytim	e Telepi	none Nui	nber	
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief t	this	politi	ical	commi	ittee has ı	not viola	ted an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature o	of Candid	ate		
	<u> </u>						-					Printe	d Name			
My Commission Exp	Signature						-					Ema	il			
, ссолон Ехр																
	МО	D	AY	ΥR					Area	Code		Da	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
RIDGE, DAVE COMMITTEE TO ELECT	From:	<u>5/19/202</u>	<u>0</u> To:	6/22/2020
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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	y 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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	33,638.01
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			\$	33,638.01

#### **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 Candidat	e	R	eporting	Period			
		Fi	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.

### 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	Name of Filing Committee of Candidate			Reporting Period					
			Fron	m:		To	<b>o</b> :		
		•			DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							

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				
			From:			То:		
				DA	TE		,	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							<b>-</b>   \$	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	<b>o</b> :	
				D	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							1	
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page	Section	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 Candi	idate		Report	ing Perio	d			
RIDGE, DAVE COMMITTEE TO ELE	ЕСТ		From:		5/19/202	<u>20</u> To:		6/22/2020
				D	ATE			AMOUNT
<b>Full Name</b> DAVID G. RIDGE				мо	DAY	YEAR	\$	33,626.01
Mailing Address 6324 LONGWOO	DD DRIVE			5	31	2020		
City ERIE	State	Zip Code (	Plus 4)					
	PA	16505						
Receipt Description FORGIVEN	ESS OF DEBT TO CA	MPAIGN						
Full Name PNC BANK				мо	DAY	YEAR	\$	12.00
Mailing Address 902 STATE STR	EET			5	4	2020	$\exists$	
City ERIE	State	Zip Code (	Plus 4)	) 3	4	2020	'	
	PA	16501						
Receipt Description REFUND/A	DJUSTMENT FOR SE	RVICE CHARGES			•		•	
						ſ		PAGE TOTAL
Enter Grand Total of Part E on So	chedule I, Detailed	Summary Page,	Section	4.			\$	33,638.01

#### **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	
RIDGE, DAVE COMMITTEE TO ELECT	From:	<u>5/19/2020</u> <b>To:</b>	<u>6/22/2020</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 Candid	ate		Reportin	g 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 on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	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			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	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 Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
RIDGE, DAVE COMMITTEE TO ELECT	From	5/19/2020	То:	<u>6/22/2020</u>

					DATE			AMOUNT
To Whom Paid				МО	DAY	YEAR		
PNC BANK								
Mailing Address	901 STATE ST			1	2	2020	\$	14.00
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	BANK S	ERVICE CH	HARGE		
To Whom Paid				мо	DAY	YEAR		
TRI STATE SENI	OR NEWS			МО		ILAK		
Mailing Address	PO BOX 3056			2	1	2020	\$	270.00
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	ADVERT	ΓISING			
To Whom Paid				мо	DAY	YEAR		
PNC BANK				MO	DAT	TEAR		
Mailing Address	901 STATE ST			2	3	2020	\$	2.00
City ERIE		State Zip Code (Plus 4)				enditure		
		PA	16501	BANK S	ERVICE CH	HARGE		
To Whom Paid					DAY	YEAR		
PNC BANK				МО	DAY	TEAK		
Mailing Address	901 STATE ST			3	2	2020	\$	2.00
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	BANK S	ERVICE CH	HARGE		
To Whom Paid				мо	DAY	YEAR		
PNC BANK				MO	DAI	ILAK		
Mailing Address	901 STATE ST			4	2	2020	\$	2.00
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	BANK S	ERVICE CH	HARGE		
To Whom Paid					DAY	VEAD		
DAVID G. RIDGI				МО	DAY	YEAR		
Mailing Address	6324 LONGWOOD [	OR		4	11	2020	\$	873.99
City ERIE State Zip Code (Plus 4)				Descrip	l tion of Exp	enditure	<u> </u>	
		PA	16505		L REPAYME		EBT	
		1	1	1	,	5. 5.		

To Whom Paid					DAY	YEAR		
PNC BANK				МО		ILAK		
Mailing Address 901 STATE ST				5	1	2020	\$	12.00
City ERIE		State	Zip Code (Plus 4)	Description of Expenditure				
		PA	16501	BANK SERVICE CHARGE				
To Whom Paid				мо	DAY	YEAR		
DAVID G. RIDGE				1.10		12/11		
Mailing Address 6324 LONGWOOD DR				5	31	2020	\$	33,626.01
City ERIE		State	Zip Code (Plus 4)	Description of Expenditure				
		PA 16505 FORGIVENESS OF UNPAI					DEBT	
								PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								34,802.00