Campaign Finance Report

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

Filer Identificati	ion	20220	0253		-	Repor		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
Number :				- h h i . t .		Filed	-								
Name of Filing C		·	ate or L	ODDYIST:		FRIENL	JS OF	CHELSEA	A OLIVE	ĸ					
Street Address:	РО В	OX 273									-				
City:	CORF	RY						State:	PA		Zip Co	de: 16	407		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2. X	30 DA PRIM		POST-	3.	AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRE	E- 5.	30 DA ELEC		POST-	6.	TERMIN REPORT		Yes	No	 ✓
report type)	ANNUAL	REPORT	7.	Year 2022				NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE
Name of Office S	bought by	, Candidat	e:			!		DATE O	OF ELEC	TION	District Number		Par	ty Code	County Code
DEDDECENTAT				EMDLY				мо	DAY	YEAR	4	STH	DEN	1	25
REPRESENTATI	IVE IN TH	IE GENER	AL ASS	EMBLY				11		8 2022		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of	Receipts	s and	мо	DAY	YEAR	Ł		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:			1 1	2	022	ГО	5	5	2 2022	2				
A. Amount Bro	ught Forv	ward From	n Last R	eport			\$	_		0.00)				
B. Total Monet	ary Contr	ibutions A	And Rec	eipts (Fron	n Sche	dule I)	\$;		2,440.83					
C. Total Funds	Available	e (Sum Of	Lines A	and B)			\$	5		2,440.83					
D. Total Expen	ditures (F	From Sche	edule II	I)			\$	5		0.00					
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)		\$			2,440.83					
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le II)	\$;		1,366.63					
G. Unpaid Debt	ts And Ob	ligations	(From S	Schedule IV	()		\$			0.00					
					AFF	IDAV	IT SE	CTION							
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here.	If this i	s a Ca	ndidate re	eport, ca	andidate si	gn here.				
I swear (or affirm) correct and comple		report, incl	uding the	e attached sc	hedule	s filed or	paper	or by elect	tronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	cribed befo day of	ore me this		20						Signatur	e of Perso	on Submitt	ing Rep	oort	
	_	Signatur	re.				_				Prir	nted Name	l		
My Commission E	kpires		-								Ema	ail			
		мо	D	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nittee, (Candid	late shall	sign he	r e.					
I swear (or affirm) No 320) as amende		e best of m	ıy knowle	edge and beli	ief this	political	comm	nittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subso	ribed befor day of	re me this		20						5	Signature	of Candida	ite		
							_				Print	ed Name			
		Signature					_				Ema	sil			
My Commission Exp	oires										EING				
	_	мо	D	AY	YR				Area C	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF CHELSEA OLIVER	From:	<u>1/1/202</u>	<u>2</u> To:	<u>5/2/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	805.83
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)			\$	1,135.00
TOTAL for the Reporting	g Period	(2)	\$	1,135.00
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)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	500.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	2,440.83

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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						
			Fro	om:		То	:			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							
							Γ	PAGE TOTAL		

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

0.00

\$

Use this Part to ite	emize all other 0.01 to \$250.	1 TO \$250.00 r contribution 00 in the repo	s wi ortin	th an g peri	aggrega iod.		
Name of Filing Committee or Candidat	e		Repo	orting Po	eriod		
FRIENDS OF CHELSEA OLIVER			Fron	n:	<u>1/1/2</u>	<u>2022</u> То	5/2/2022
					DATE		AMOUNT
Full Name of Contributor Sara Bartko				мо	DAY	YEAR	
Mailing Address 5701 Timbercreek	Drive						\$ 150.00
City Erie	State PA	Zip Code (Plus 4) 16509		3	17	2022	
Full Name of Contributor Mary Jo Campbell	·			мо	DAY	YEAR	
Mailing Address 5431 Linden Avenu	e						\$ 100.00
City Edinboro	State PA	Zip Code (Plus 4) 16412		4	30	2022	
Full Name of Contributor Richard Oliver				мо	DAY	YEAR	
Mailing Address 938 Woodside Aver	nue						\$ 140.00
City Ellwood City	State PA	Zip Code (Plus 4)		4	30	2022	
Full Name of Contributor Cynthia Purvis				мо	DAY	YEAR	
Mailing Address 101 West 34th Stre	et						\$ 100.00
City Erie	State PA	Zip Code (Plus 4) 16508		4	30	2022	
Full Name of Contributor Mandi Johnson				мо	DAY	YEAR	
Mailing Address 47 E. Smith St							\$ 55.00
City Corry	State PA	Zip Code (Plus 4) 16407		4	28	2022	

Full Name of Contributor Kelly Filburn			мо	DAY	YEAR	
Mailing Address 6046 Box	ker Drive					\$ 130.00
City Bethel Park	State PA	Zip Code (Plus 4) 15102	4	26	2022	
Full Name of Contributor Jesy Littlejohn		мо	DAY	YEAR		
Mailing Address 9070 Ste	ebbing Way					\$ 85.00
City Laurel	State MD	Zip Code (Plus 4) 20724	4	23	2022	
Full Name of Contributor Susan Murawski			мо	DAY	YEAR	
Mailing Address 9211 Pal	ng Address 9211 Palmer Road					\$ 100.00
City North East	State PA	Zip Code (Plus 4) 16428	- 3	23	2022	
Full Name of Contributor Margaret Watts			мо	DAY	YEAR	
Margaret Watts	prrest Drive		мо			\$ 50.00
Margaret Watts	orrest Drive State PA	Zip Code (Plus 4) 16412	мо 4	DAY 15	YEAR 2022	\$ 50.00
Margaret Watts Mailing Address 12663 Fo	State					\$ 50.00
Margaret Watts Mailing Address 12663 Fo City Edinboro Full Name of Contributor Margaret Watts Mailing Address	State		4	15	2022	\$ 50.00 \$ 30.00
Margaret Watts Mailing Address 12663 Fo City Edinboro Full Name of Contributor Margaret Watts Mailing Address	State PA		4	15	2022	
Margaret Watts Mailing Address 12663 Fo City Edinboro Full Name of Contributor Margaret Watts Mailing Address 12663 Fo	PA PA prrest Drive	16412 Zip Code (Plus 4)	- 4 MO	15 DAY	2022 YEAR	
Margaret Watts Mailing Address 12663 Fd City Edinboro Full Name of Contributor Mailing Address 12663 Fd City Edinboro	PA PA prrest Drive	16412 Zip Code (Plus 4)	но 4 4	15 DAY 20 DAY	2022 YEAR 2022	
Margaret Watts Mailing Address 12663 Fd City Edinboro Full Name of Contributor Mailing Address 12663 Fd City Edinboro	State PA orrest Drive State PA	16412 Zip Code (Plus 4)	но 4 4	15 DAY 20	2022 YEAR 2022	\$ 30.00

Full Name of Contributor Sara Provencio				DAY	YEAR	
Mailing Address 322 E. Sou City Corry	Ith Street State PA	Zip Code (Plus 4) 16407	4	14	2022	\$ 95.00
Enter Grand Total of Pa	rt A on Schedule I, I	Detailed Summary Page, S	Section 2	. <u>.</u>		\$ PAGE TOTAL 1,135.00

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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 Report				ting Period							
FRIENDS OF CHELSEA OLIVER			From:	<u>1/</u>	<u>1/2022</u>	То:	5/2/2022				
						DATE AMOUNT					
Full Name of Contributing Comm THE CENTER FOR FREETHOUGH	мо	DAY	YEAR								
Mailing Address 1821 JEFFER	SON PLACE NW						\$	500.00			
City WASHINGTON	State DC	Zip Cod 20036	e (Plus 4)	4	20	2022					
				ſ	P	AGE TOTAL					
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	500.00			

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	Reporting Period	
	From:	То:

				D	ATE		АМО	UNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip	Code (Plus 4)					
Employer Name	·			Occupat	tion		·	
Employer Mailing Address/Princ Business	ipal Place of		City	·	State		Zip Code ((Plus 4)
Enter Grand Total of Part C o	on Schedule I, Detail	ed Sumn	ary Page, Secti	on 3.			PAG	E TOTAL
						4	5	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		Reporting Period						
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description				I					
Enter Grand Total of Part E c	n Schedule I. Detailer	l Summary Page	Section	4				PAGE TOT	AL
	in Schedule I, Detailet	i Summaly Paye,	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		
FRIENDS OF CHELSEA OLIVER	From:	<u>1/1/2022</u> то:	<u>5/2/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	1,366.63
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, 1		\$	1,366.63

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Reporting Period					
			From:			То:			
				DATE		АМО	UNT		
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate						Reporting Period						
FRIENDS OF CHELSEA OLIVER						From: <u>1/1/20</u>			<u>22</u> To:	<u>5/2/2022</u>		
								DATE		AMOUNT		
Full Name of Contributor Chelsea Oliver						мо		DAY	YEAR			
Mailing Address 611 1/2 S. Center Street							Τ			\$ 213.70		
City Corry	State PA		Zip Code(Plus 4) 16407			ź	2	25	2022			
Employer of Contributor Self-emplo	yed		•			Occup	atior	n M	Iarketing			
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zi 4		de(Plus	Description of Contribution			
611 1/2 S. Center Street	er Street Corry PA					-	, 5407		e hosting			
Full Name of Contributor Chelsea Oliver						мо		DAY	YEAR			
Mailing Address 611 1/2 S. Center S	treet						Τ			\$ 21.20		
City Corry	State PA		Zip Code(I 16407	Plus 4)		3	3	17	2022			
Employer of Contributor Self-emplo	yed					Occupation Marketing						
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip Code(Plus 4)			Descri	Description of Contribution		
611 1/2 S. Center Street		Corry		PA		16407			Website domain			
Full Name of Contributor Chelsea Oliver						мо		DAY	YEAR			
Mailing Address 611 1/2 S. Center Street							Т			\$ 21.20		
City Corry	State PA	Zip Code(Plus 4) 16407			3	3	17	2022				
Employer of Contributor Self-emplo	yed					Occupation Marketing						
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip Code(Plus 4)			Description of Contribution			
611 1/2 S. Center Street Corry PA						16407 Website domain			e domain			

								15			
Full Name of Contributor Chelsea Oliver							YEAR				
Mailing Address 611 1/2 S. Center S											
-						28	2022	\$ 23.20			
City Corry	State	· ·		Plus 4)	3	20	2022				
	PA		16407								
Employer of Contributor Self-employed					Occupation Marketing						
Employer Mailing Address/Principal Place of City Business				State	Zip 4)	Code(Plus	Descri	ption of Contribution			
611 1/2 S. Center Street		Corry		PA	164	07	Stamp	S			
Full Name of Contributor Chelsea Oliver						MO DAY					
Mailing Address 611 1/2 S. Center S	street										
	-				- 3	23	2022	\$ 100.00			
City Corry	State PA		Zip Code(I	Plus 4)							
	PA		16407								
Employer of Contributor Self-emplo	yed				Occupation Marketing						
Employer Mailing Address/Principal Place of City State Business				State		Zip Code(Plus 4) Description of Contributi					
611 1/2 S. Center Street					164	16407 Filing fee					
Full Name of Contributor		-									
Chelsea Oliver					мо	DAY	YEAR				
Mailing Address 611 1/2 S. Center S	Street							\$ 60.88			
City Corry	State		Zip Code(I	Plus 4)	3	7	2022				
,	PA		16407								
Employer of Contributor Self-emplo	yed		I		Occupat	tion	l 1arketing				
Employer Mailing Address/Principal Pla	ce of	City		State	Zip 4)	Code(Plus	Description of Contribution				
Business 611 1/2 S. Center Street		Corry		РА	1 64	07	Banner				
Full Name of Contributor		1		-	мо	DAY	YEAR				
Chelsea Oliver											
Mailing Address 611 1/2 S. Center S	street							\$ 4.33			
City Corry State		Zip Code(I		Plus 4)	3	16	2022				
	PA		16407								
Employer of Contributor Self-emplo	yed		1		Occupat	tion	l 1arketing	1			
Employer Mailing Address/Principal Pla	ce of	City		State	Zip 4)	Zip Code(Plus Description of Contributio					
Business 611 1/2 S. Center Street		Corry		PA	-	4) 16407 Certified mail					
							1				

Full Name of Contributor Chelsea Oliver					мо	DAY	YEAR						
Mailing Address 611 1/2 S. Center S	Street							\$ 4.33					
City Corry	State		Zip Code(Plus 4)	3	16	2022						
City Corry	PA		16407	,									
					0								
Employer of Contributor Self-employed						Occupation Marketing							
Employer Mailing Address/Principal Place of C Business				State	Zip 4)	Code(Plus	Descri	ption of Contribution					
611 1/2 S. Center Street	nter Street Corry PA			РА	164	07	Certifie	ed mail					
Full Name of Contributor Chelsea Oliver					мо	MO DAY							
Mailing Address 611 1/2 S. Center S	Street												
	-				3	30	2022	\$ 74.20					
City Corry	State PA		Zip Code(Plus 4)	5	50	2022						
			16407										
Employer of Contributor Self-employed					Occupation Marketing								
Employer Mailing Address/Principal Place of City Gusiness				State	Zip 4)	Code(Plus	Descri	ption of Contribution					
611 1/2 S. Center Street	Corry P			РА	164	07	rds						
Full Name of Contributor		•											
Chelsea Oliver					мо	DAY	YEAR						
Mailing Address 611 1/2 S. Center S	Street							\$ 160.00					
City Corry	State		Zip Code(Plus 4)	3	30	2022						
	PA		16407										
Employer of Contributor Self-emplo	yed		1		Occupat	cion N	l 1arketing						
Employer Mailing Address/Principal Pla	ce of	City		State		Code(Plus	Description of Contribution						
Business 611 1/2 S. Center Street		Corry		РА	4) 164	07	Stamps						
Full Name of Contributor Chelsea Oliver		1		1	мо	DAY	YEAR						
Mailing Address 611 1/2 S. Center S	Street												
			Zip Code(Plus 4)			4	2022	\$ 50.15					
City Corry	State PA		16407	Pius 4)	4								
Employer of Contributor Self-emplo	oyed		1		Occupat	ion	l 1arketing	I					
Employer Mailing Address/Principal Pla Business	ce of	City		State	Zip 4)	Zip Code(Plus Description of Contribution							
611 1/2 S. Center Street		Corry		РА	-	16407 Mail supplies							
				I			1						

Full Name of Contributor Chelsea Oliver	мо	DAY	YEAR								
Mailing Address 611 1/2 S. Center Street								\$ 50.00			
City Corry	State		Zip Code(Plus 4)	- 4	15	2022				
City Corry	PA		16407								
Employer of Contributor Self-employed					Occupation Marketing						
Employer Mailing Address/Principal Place of City Business				State	Zip (4)	Code(Plus	Descri	ption of Contribution			
611 1/2 S. Center Street		Corry		РА	164	07	CAM T	V			
Full Name of Contributor Chelsea Oliver						DAY	YEAR				
Mailing Address 611 1/2 S Contor	Street										
611 1/2 S. Center					- 4	18	2022	\$ 30.00			
City Corry	State		Zip Code(Plus 4)	4	10	2022				
	PA		16407								
Employer of Contributor Self-emp	loyed				Occupation Marketing						
Employer Mailing Address/Principal Place of City Business			ity State			Code(Plus	Descri	ption of Contribution			
611 1/2 S. Center Street		Corry			4) 164	07	Campa	ign t-shirt			
Full Name of Contributor Chelsea Oliver					мо	DAY	YEAR				
Mailing Address 611 1/2 S. Center	Street							\$ 200.00			
	State		Zip Code(Plue 4)	4	20	2022	¥ 200.00			
City Corry	PA		16407	rius 4)							
Employer of Contributor Self-emp	loyed				Occupat	ion N	l 1arketing				
Employer Mailing Address/Principal P	ace of	City		State		Code(Plus	Description of Contribution				
Business 611 1/2 S. Center Street		Corry		РА	4) 164	07	ErieDems dinner tickets				
Full Name of Contributor Chelsea Oliver		1		1	мо	DAY	YEAR				
Mailing Address 611 1/2 S Center	Street										
611 1/2 S. Center Street					3	29	2022	\$ 338.44			
City Corry	State PA		Zip Code(16407	Plus 4)	5	25	2022				
Employer of Contributor Self-emp	loyed		1		Occupat	ion N	l 1arketing	l			
Employer Mailing Address/Principal P	ace of	City		State		Zip Code(Plus Description of Contribution					
Business 611 1/2 S. Center Street		Corry		РА	-	4)16407Literature items					
		1					•				

Full Name of Contributor Chelsea Oliver						DAY	YEAR		
Mailing Address 611 1/2 S. Center Street								\$	15.00
City Corry	State	StateZip Code(Plus 4)PA16407		Plus 4)	4	28	2022		
	ΡΑ								
Employer of Contributor Self-employed					Occupat	ion N	larketing		
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Description of Contribution		
611 1/2 S. Center Street Corry PA				PA	164	07	NWPA Pride		
Enter Grand Total of Part G or Summary Page, Section 3.	n Schedule II, I	n-Kind (Contributi	ons Detail	ed				PAGE TOTAL 1,366.63
							I		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
	From			To:			
			DATE		AMOUNT		
To Whom Paid	мо	DAY	YEAR				
Mailing Address				\$	0.00		
City	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure		
Enter Grand Total of Expenditures					PAGE TOTAL		
	· ·			\$	0.00		