Campaign Finance Report

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

| Filer Identificati | on | 20220 | C1094 | | | | port | | CAND | IDATE | √ | CC | OMMITTEE | | LOBI | BYIST | |
|--|----------------------|--------------|-----------|--|------------|--------|-------------|----------------|--------------------|-----------|----------|--------|--------------------|----------------|---------|-----------|-----------|
| Number : | | - Cdid | | - - - - - - - - - - - - - - | | | ed B | | CLIED | | | | | | | | |
| Name of Filing C | ommitte | e, Candida | ate or Lo | obbyist: | | JEN | INTE | ER LE | SHEK | | | | | | | | |
| Street Address: | | | | | | | | | | | | | | | | | |
| City: | _ | | | | | | | | State: | | | | Zip Code | e: 16 | 5441 | | |
| TYPE OF REPORT | 6TH TUES PRE-PRIM | | 1. | 2ND FRIDA PRIMARY | Y PRE | - | 2. X | 30 DA PRIMA | | POST- | 3. | | AMENDME REPORT? | NT | Yes | No | ~ |
| (place X to the right of | 6TH TUES | | 4. | 2ND FRIDA' ELECTION | Y PRE | ≣- | 5. | 30 DA | | POST- | 6. | | TERMINAT REPORT? | ΓΙΟΝ | Yes | No | ~ |
| report type) | ANNUAL | . REPORT | 7. | Year 2022 | | | | | NG METH CHECK O | | | | PAPER | | ✓ | DISKE | TTE |
| Name of Office S | ought by | , Candidat | :e: | | | | | | DATE (|)F ELE | CTIO | ١ | District Number | Office Code | Par | ty Code | County |
| | | | | | | | | | МО | DAY | YE | AR | 4 | STH | REP | | code |
| REPRESENTATI | VE IN TH | ie gener | AL ASS | EMBLY | | | | | 11 | | 8 | 2022 | - | (SEE INS | TRUCTI | ONS FOR O | CODES) |
| Summary of | Receipts | s and | МО | DAY | YEAR | ł | | | МО | DAY | YE | AR | FOF | R OFFIC | E USE | ONLY | |
| Expenditures | from: | | | 3 29 | 2 | 022 | Т | 0 | 5 | 5 | 2 | 2022 | | | | | |
| A. Amount Bro | ught Forv | ward Fron | ı Last R | eport | | | | \$ | • | • | • | 0.00 | | | | | |
| B. Total Moneta | ary Contr | ibutions A | And Rec | eipts (From | Sche | dul | e I) | \$ | | | 5,4 | 12.80 | | | | | |
| C. Total Funds | Available | (Sum Of | Lines A | and B) | | | | \$ | | | 5,4 | 12.80 | | | | | |
| D. Total Expend | ditures (I | From Sche | dule II | I) | | | | \$ | | | 5,44 | 12.80 | | | | | |
| E. Ending Cash | Balance | (Subtract | Line D | From Line (| C) | | | \$ | | | | 0.00 | | | | | |
| F. Value Of In- | Kind Con | tributions | Receiv | ed (From S | chedu | le I | I) | \$ | | | 30 | 0.00 | | | | | |
| G. Unpaid Debt | s And Ob | ligations | (From S | Schedule IV | ') | | | \$ | | | | 0.00 | | , | | | |
| | | | | | AFF | ID | AVI | T SE | CTION | | | | | | | | |
| PART I - If this is | s a Comm | nittee repo | ort, trea | surer sign | here. | If th | nis is | a Car | ndidate r | eport, e | candid | ate si | gn here. | | | | |
| I swear (or affirm) correct and comple | | report, incl | uding the | attached scl | hedule | s file | ed on | paper | or by elec | tronic m | edium, | are to | the best of | my know | /ledge | and beli | ef , true |
| Sworn to and subs | cribed bef | ore me this | | 20 | | | | | | | Si | gnatur | e of Person | Submitt | ing Rep | ort | |
| | _ | Signatur | ·e | | | | | _ | | | | | Printe | ed Name | | | |
| My Commission Ex | pires | | | | | | | _ | | | | | Email | | | | |
| | | МО | D | AY | YR | | | | | Ar | ea Code | 1 | Daytime | Teleph | one Nu | mber | |
| Part II- If this is | a report | of a cand | lidate's | authorized | Comn | nitte | ee, C | andid | ate shall | sign h | ere. | | | | | | |
| I swear (or affirm) No 320) as amende | | e best of m | y knowle | edge and beli | ef this | poli | itical | comm | ittee has ı | not viola | ted any | provis | ions of the | act of Ju | ine 3,1 | 937 (P.L | . 1333, |
| Sworn to and subsc | | re me this | | | | | | | | | | s | ignature of | Candida | te | | |
| | day of — | | | _ 20 | | | | _ | | | | | Printed | Name | | | |
| | : | Signature | | | | | | - | | | | | | | | | |
| My Commission Exp | ires | | | | | | | | | | | | Email | | | | |
| | _ | МО | D | AY | YR | 1 | | - | | Area | Code | | Day | time Te | lephon | e Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|-----------------|--------------|----------|
| JENNIFER LESHER | From: | <u>3/29/202</u> | <u>2</u> To: | 5/2/2022 |
| 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) | | | \$ | 800.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 800.00 |
| 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) | | | \$ | 4,642.80 |
| TOTAL for the Reporting |) Period | (3) | \$ | 4,642.80 |
| 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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 5,442.80 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | this Part to itemize onl with an aggregate value | | \$2 | |) in the | | | |
|------------------------|--|-------------------|-----|-----|----------|------|----|------------|
| Nume of Fining Comm | intec of cumulate | | | om: | renou | То | : | |
| | | L | | | DATE | | | AMOUNT |
| Full Name of Contribut | ing Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) |) | | | | | |
| | ! | I | ! | | <u> </u> | | | DAGE TOTAL |

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

| PAGE TOTAL |
|------------|
| \$ 0.00 |

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 Candidat | e | | Repo | rting Pe | eriod | | |
|---|--------------------|-----------------------------------|------|----------|--------|----------------|------------------|
| JENNIFER LESHER | | | From | n: | 3/29/2 | <u>2022</u> To | <u>5/2/2022</u> |
| | | | | | DATE | | AMOUNT |
| Full Name of Contributor SHAFFER CHIROPRATIC CENTER | | | | мо | DAY | YEAR | |
| Mailing Address 3682 W LAKE ROAD |) | | | | | | \$ 200.00 |
| City ERIE | State PA | Zip Code (Plus 4) 16505 | | 3 | 21 | 2022 | |
| Full Name of Contributor MICHAEL CAULEY | | | | мо | DAY | YEAR | |
| Mailing Address 851 EAST STREET | | | | 3 | 21 | 2022 | \$ 100.00 |
| City WATERFORD | State PA | Zip Code (Plus 4) 16441 | | 3 | | 2022 | |
| Full Name of Contributor ELIZABETH A JUHASZ | | | | МО | DAY | YEAR | |
| Mailing Address 326 EAST 6TH ST | | | | 3 | 28 | 2022 | \$ 250.00 |
| City ERIE | State PA | Zip Code (Plus 4) 16507 | | 3 | 26 | 2022 | |
| Full Name of Contributor SIR FRANK JUHASZ | | | | мо | DAY | YEAR | |
| Mailing Address 4032 DOMINION D | RIVE | | | | | | \$ 250.00 |
| City ERIE | State PA | Zip Code (Plus 4) 16510 | | 3 | 28 | 2022 | |
| | | | ı | | | | PAGE TOTAL |

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

\$ 800.00

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 | | А | MOUNT |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Scho | edule 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 | | |
|---|-------------|----------------|------|-----------|---------------|----------------------|--------------------------------|
| JENNIFER LESHER | | | Fror | m: | <u>3/29/2</u> | <u>022</u> To | : <u>5/2/2022</u> |
| | | | | D | ATE | | AMOUNT |
| Full Name of Contributor JENNIFER LESHER | | | | мо | DAY | YEAR | |
| Mailing 525 BENSON ROAD | | | | | | | \$ 2,264.16 |
| City WATERFORD | State | Zip Code (Plus | 5 4) | 5 | 2 | 2022 | |
| | PA | 16441 | | | | | |
| Employer Name | | | | Occupat | tion | | • |
| Employer Mailing Address/Principal Plac Business | e of | City | | | State | | Zip Code (Plus 4) |
| | | • | | | | | |
| Full Name of Contributor JENNIFER LESHER | | · | | мо | DAY | YEAR | |
| | | <u>'</u> | | | | | \$ 2,378.64 |
| JENNIFER LESHER Mailing 525 RENSON DOAD | State | Zip Code (Plus | s 4) | MO | DAY 28 | YEAR 2022 | \$ 2,378.64 |
| JENNIFER LESHER Mailing Address 525 BENSON ROAD | State PA | Zip Code (Plus | 5 4) | | | | \$ 2,378.64 |
| JENNIFER LESHER Mailing Address 525 BENSON ROAD | | | s 4) | | 28 | | \$ 2,378.64 |
| JENNIFER LESHER Mailing | PA | | s 4) | 4 | 28 | 2022 | \$ 2,378.64 Zip Code (Plus 4) |

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 Perio | od | | | |
|-----------------------------|-------------------------|--------------------|---------|-----------|-----|------|----|------------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | | AMOUNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | · | | | | | • | |
| Enter Grand Total of Part E | on Schedule I. Detailed | d Summary Page | Section | 4 | | | ı | PAGE TOTAL |
| | Journal 1, Betailet | a cannual y 1 age, | 200011 | •• | | | \$ | 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 | od | |
|--|-----------------|----------------------|----------|
| JENNIFER LESHER | From: | 3/29/2022 To: | 5/2/2022 |
| 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 | TF) | | |
| TOTAL for the Reporting Pe | eriod (2) | \$ | 300.00 |
| 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, | • | \$ | 300.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Ca | ndidate | | Reporting | Period | | | |
|--|------------------------------|-----------------------------------|-------------|---------------|------------------|-----|-------------------|
| JENNIFER LESHER | | | From: | <u>3/</u> | 29/2022 | To: | 5/2/2022 |
| | | • | | DATE | | | AMOUNT |
| Full Name of Contributor MOUND GROVE GOLF COURSE | | | мо | DAY | YEAR | | |
| Mailing Address 10760 DON | NATION ROAD | | 2 | 26 | 2022 | \$ | 200.00 |
| City WATERFORD | State | Zip Code (Plus 4) | Ť | | | | |
| | PA | 16441 | | | | | |
| Description of Contribution: | | | | | | | |
| Description of Contribution: Full Name of Contributor KNEADFUL THINGS BAKERY & | amp; CAFE | | МО | DAY | YEAR | | |
| Full Name of Contributor KNEADFUL THINGS BAKERY & | amp; CAFE H CENTER STREET | | MO 3 | DAY 22 | YEAR 2022 | \$ | 100.00 |
| Full Name of Contributor KNEADFUL THINGS BAKERY &a Mailing Address 425 NORTH | | Zip Code (Plus 4) | | | | \$ | 100.00 |
| Full Name of Contributor KNEADFUL THINGS BAKERY & Mailing Address 425 NORTH | H CENTER STREET | Zip Code (Plus 4) 16407 | | | | \$ | 100.00 |
| Full Name of Contributor KNEADFUL THINGS BAKERY & Mailing Address 425 NORTH City CORRY | H CENTER STREET State | | | | | \$ | 100.00 |
| Full Name of Contributor KNEADFUL THINGS BAKERY & Mailing Address 425 NORTH | State PA | 16407 | 3 | 22 | 2022 | \$ | 100.00 PAGE TOTAL |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name 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 | | | | | | Occupa | ition | | • | |
| Employer Mailing Address/Principal Plac Business | ce of | City | | State | | Zip 4) | Code(Plus | Descr | iption | of Contribution |
| Enter Grand Total of Part G on Sch Summary Page, Section 3. | edule II, I | in-Kind | Contributi | ons De | etaile | ed | | | | PAGE TOTAL 0.00 |

STATEMENT OF EXPENDITURES

| TO Whom Paid MAD M | Name of Filing Committee or C | andidate | Reporti | ng Period | | | |
|--|-------------------------------|-------------|---------|-------------|----------|-----|----------|
| MARK SLEPPY Mailing Address 7337 FOOTERRILL ROAD | JENNIFER LESHER | | From | <u>3/29</u> | 9/2022 | То: | 5/2/2022 |
| MARK SLEPPY Mailing Address 7337 FOOTERRILL ROAD | | | | DATE | | | AMOUNT |
| City ERIE State PA PA PA PA State PA PA State PA State PA | | | МО | DAY | YEAR | | |
| TO Whom Paid BRENDA SHATTO MO DAY YEAR Mailing Address 412 CAMBRIDGE RD City ERIE State PA 2ip Code (Plus 4) PA 16511 Description of Expenditure CAMPAIGN TSHIRTS AND BUTTONS To Whom Paid CLAUDIO OLIVIERI Mailing Address 309 SHELHAMMER CIR City EDINBORO State PA 2ip Code (Plus 4) PA 2ig Code (Plus 4) PA Description of Expenditure CAMPAIGN TSHIRTS AND BUTTONS To Whom Paid CLAUDIO OLIVIERI Mailing Address 309 SHELHAMMER CIR Lip Code (Plus 4) PA Description of Expenditure SIGNS, ADVERTISING, DOORKNOOKERS, BUSINESS CARDS To Whom Paid THE CORRY JOURNAL Mailing Address MO DAY YEAR MO DAY YEAR | Mailing Address 7337 FOOT | ERRILL ROAD | 4 | 4 | 2022 | \$ | 120.00 |
| BRENDA SHATTO Mailing Address 412 CAMBRIDGE RD City ERIE State PA 16511 Description of Expenditure CAMPAIGN TSHIRTS AND BUTTONS To Whom Paid CLAUDIO OLIVIERI Mailing Address 309 SHELHAMMER CIR State PA 2ip Code (Plus 4) 16511 MO DAY YEAR 4 28 2022 \$ 2,3 City EDINBORO State Zip Code (Plus 4) 16412 Description of Expenditure SIGNS, ADVERTISING, DOORKNOOKERS, BUSINESS CARDS To Whom Paid THE CORRY JOURNAL Mo DAY YEAR Address | City ERIE | | | | | | |
| City ERIE State PA 16511 Description of Expenditure CAMPAIGN TSHIRTS AND BUTTONS To Whom Paid CLAUDIO OLIVIERI Mailing Address 309 SHELHAMMER CIR State PA 16412 Description of Expenditure CAMPAIGN TSHIRTS AND BUTTONS To Whom Paid PA 16412 To Whom Paid PA The CORRY JOURNAL MO DAY YEAR Description of Expenditure SIGNS, ADVERTISING, DOORKNOOKERS, BUSINESS CARDS To Whom Paid THE CORRY JOURNAL | | | МО | DAY | YEAR | | |
| To Whom Paid CLAUDIO OLIVIERI Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR City EDINBORO State Zip Code (Plus 4) Description of Expenditure PA 16412 To Whom Paid THE CORRY JOURNAL Mo DAY YEAR A 28 2022 \$ 2,3 | Mailing Address 412 CAMBF | RIDGE RD | 4 | 6 | 2022 | \$ | 675.00 |
| CLAUDIO OLIVIERI Mailing Address 309 SHELHAMMER CIR State Zip Code (Plus 4) Description of Expenditure PA 16412 SIGNS, ADVERTISING, DOORKNOOKERS, BUSINESS CARDS To Whom Paid THE CORRY JOURNAL Mailing Address | City ERIE | | | | | | |
| City EDINBORO State PA 16412 Description of Expenditure SIGNS, ADVERTISING, DOORKNOOKERS, BUSINESS CARDS To Whom Paid THE CORRY JOURNAL Mailing Address | | | мо | DAY | YEAR | | |
| PA 16412 SIGNS, ADVERTISING, DOORKNOOKERS, BUSINESS CARDS To Whom Paid THE CORRY JOURNAL Mo DAY YEAR | Mailing Address 309 SHELH | AMMER CIR | 4 | 28 | 2022 | \$ | 2,383.64 |
| THE CORRY JOURNAL Mailing Address | City EDINBORO | | SIGNS, | , ADVERTIS | SING, DO | | KERS, |
| Mailing Address 28 WEST SOUTH STREET 5 2 2022 \$ 2,2 | | | МО | DAY | YEAR | | |
| | Mailing Address 28 WEST S | OUTH STREET | 5 | 2 | 2022 | \$ | 2,264.16 |
| City CORRY State PA Zip Code (Plus 4) Description of Expenditure CAMPAIGN ADVERTISING | City CORRY | | 1 | | | 1 | |

5,442.80