### **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 :	<b>on</b> 20	180238			Report		CANDI	DATE		соми	<b>ITTEE</b>	TTEE \( \square\) LOBBYIST				
Name of Filing C	Committee, Cand	lidate or L	obbyist:	F	RIEND	S OF	BOB MER	RSKI								
Street Address:	P.O. BOX 6	67														
City:	ERIE -						State:	PA			Zip Cod	de: 16	5512			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PF PRIMARY	RE-	2. <b>X</b>	30 DA		POST-	3.		AMENDM REPORT		Yes	No	<b>~</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P ELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	<b>~</b>	
report type)	ANNUAL REPOR	7.	<b>Year</b> 2022				NG METHO				PAPER		<b>/</b>	DISKE	ГТЕ	
Name of Office S	ought by Candi	date:	•		-		DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
DEDDECEMENT	VE IN THE CEN	EDAL ACC	EMPLY				МО	DAY	YE	AR	2	STH	DEN	1	25	
REPRESENTATI	VE IN THE GEN	ERAL ASS	EMBLY				11		8	2022		(SEE IN	E INSTRUCTIONS FOR CODES)			
	Receipts and	МО	DAY YEA	٩R			МО	DAY YEAR FOR OFFICE					CE USE	ONLY		
Expenditures	irom:		3 29	20	22 <b>T</b>	0	5		2	2022						
A. Amount Bro	ught Forward Fr	om Last R	eport			\$			51,0	00.84						
B. Total Moneta	ary Contribution	s And Rec	eipts (From Sch	ned	ule I)	\$			8,6	500.00						
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			59,6	500.84						
D. Total Expend	ditures (From S	chedule II	I)			\$			2,2	16.00						
E. Ending Cash	Balance (Subtr	act Line D	From Line C)			\$			57,3	84.84						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sched	lule	e II)	\$				0.00						
G. Unpaid Debt	s And Obligatio	ns (From S	Schedule IV)			\$			37,0	33.13						
			AF	FI	DAVI	T SE	CTION									
PART I - If this is	s a Committee r	eport, trea	surer sign here	e. If	this is	a Car	ndidate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple		ncluding the	e attached schedu	les 1	filed on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	f , true	
Sworn to and subs	cribed before me t day of	his	20						s	ignature	of Perso	n Submit	ting Rep	ort		
	Signa	iture	_			- -					Prin	ted Name	e			
My Commission Ex	cpires										Ema	il				
	мо	D	AY Y	'R				Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ındidate's	authorized Con	nmi	ttee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and belief th	nis p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	
Sworn to and subsc		nis								s	ignature o	of Candid	ate			
	day of ————————————————————————————————————					_					Printe	ed Name				
	Signatu	·e				-										
My Commission Exp	ires										Ema	il				
	МО	D	AY	YR		-		Area	Code		D	aytime T	elephon	e Numbe	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF BOB MERSKI	From:	3/29/202	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	100.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	1,000.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	1,000.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	7,500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	7,500.00
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			\$	8,600.00

#### **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			Rep	orting F	Period			
FRIENDS OF BOB MERSKI			Fror	m:	3/29	9/20	<u>22</u> <b>To:</b>	<u>5/2/2022</u>
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY		YEAR	
DUANE MORRIS POLITICAL ACTION  Mailing Address 30 S 17TH ST								250.00
		I-: 6 1 (-)		3		22	2022	\$ 230.00
City PHILADELPHIA	State	Zip Code (Plus	4)					
	PA	191034001						
Full Name of Contributing Committee								
SCIETEK PAC				МО	DAY		YEAR	
Mailing Address 212 LOCUST ST				3		2	2022	\$ 250.00
City HARRISBURG	State	Zip Code (Plus	4)					
	PA	171011527						
Full Name of Contributing Committee				мо	DAY		YEAR	
HIGHMARK PAC					<i></i>			
Mailing Address PO BOX 890089	PO BOX 890089			3		3	2022	\$ 250.00
City CAMP HILL	State	Zip Code (Plus	4)					
	PA	170890069						
			_					
Full Name of Contributing Committee				мо	DAY		YEAR	
IBC PAC								
Mailing Address 1901 MARKET ST	•			3		8	2022	\$ 250.00
City PHILADELPHIA	State	Zip Code (Plus	4)					
	PA	191031480						
		<u> </u>						

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

PAGE TOTAL 1,000.00

### 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	orting P	eriod			
			Fro	m:		To	<b>)</b> :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
								PAGE TOTAL

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

#### **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:	<u>3/2</u>	9/2022	То:	5/2/2022
				DA	TE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
ASSOCIATION OF PA COLLEGE PROFES	SORS						<b>\$</b> 500.00
Mailing Address 319 N FRONT ST				2	18	2022	
City HARRISBURG	State	Zip Cod	e (Plus 4)				
	PA	171011	203				
Full Name of Contributing Committee ERIE INSURANCE PAC				мо	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 1699				1	25	2022	1,000,00
City ERIE	State	Zip Cod	e (Plus 4)		23	2022	
	PA	165301	000				
Full Name of Contributing Committee	-	-		мо	DAY	YEAR	
FRIENDS OF JOANNA MCCLINTON							\$ 1,000.00
Mailing Address PO BOX 16668	Γ	I		3	6	2022	
City PHILADELPHIA	State	I -	e (Plus 4)				
	PA	191396	668		<u> </u>		
Full Name of Contributing Committee LAWPAC				мо	DAY	YEAR	\$ 500.00
Mailing Address 212 N 3RD ST STE	101			3	7	2022	300.00
City HARRISBURG	State	Zip Cod	e (Plus 4)	]	,	2022	
	PA	171011	505				
Full Name of Contributing Committee				мо	DAY	YEAR	
OPERATORS FOR SKILL PAC							<b>\$</b> 500.00
Mailing Address PO BOX 343				4	25	2022	
City HARRISBURG	State	Zip Cod	e (Plus 4)				
	PA	171080	343				
Full Name of Contributing Committee				мо	DAY	YEAR	
OPERATORS FOR SKILL PAC							<b>\$</b> 500.00
Mailing Address PO BOX 343				4	26	2022	
City HARRISBURG	State	Zip Cod	e (Plus 4)				
	PA	171080	343				

Full Name of Contributing Committee PLUMBERS LOCAL UNION 27 PAC			МО	DAY	YEAR	<b>\$</b> 1	,000.00
Mailing Address 1040 MONTOUR W	EST IND PARK		4	4	2022		,
City CORAOPOLIS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 151089307		·	2022		
			l .	J			
Full Name of Contributing Committee PSEA PACE			МО	DAY	YEAR	<b>s</b> 2	500.00
	. BOX 1724					\$ 2,	,500.00
PSEA PACE	. BOX 1724 State PA	<b>Zip Code (Plus 4)</b> 171011346	<b>MO</b> 3	<b>DAY</b>	<b>YEAR</b> 2022	\$ 2,	,500.00

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

**PAGE TOTAL \$** 7,500.00

### 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 Can	didate			Rep	orting Pe	eriod			
				Fror	n:		T	o:	
					D	ATE		АМ	10UNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	p Code (Plus	4)				İ	
Employer Name					Occupa	tion			
Employer Mailing Address/Princi	pal Place of Business		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C or	n Schedule I, Detaild	ed Sumn	mary Page,	Section	on 3.			P.#	<b>AGE TOTAL</b> 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:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>	<b>'</b>		<u> </u>			•	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	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 Perio	od	
FRIENDS OF BOB MERSKI	From:	3/29/2022 <b>To:</b>	<u>5/2/2022</u>
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)	\$	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			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

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
FRIENDS OF BOB MERSKI	From	3/29/2022	То:	5/2/2022			

				DATE		AMOUNT				
To Whom Paid				DAY	YEAR					
НВСС	МО									
Mailing Address 205 STATE ST				14	2022	\$	2,000.00			
City HARRISBURG	HARRISBURG State Zip Code (Plus 4) Description of Expenditure									
	PA	171011130	DUES							
To Whom Paid			мо	DAY	YEAR					
MARTIN LUTHER KING CENTER										
Mailing Address 312 CHESTNUT ST			1	14	2022	\$	50.00			
City ERIE State Zip Code (Plus 4)				Description of Expenditure						
	PA	165071294	MLK DINNER							
To Whom Paid			мо	DAY	YEAR					
US POSTAL SERVICES			140		ILAK					
Mailing Address 1401 STATE ST			1	30	2022	\$	166.00			
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure							
	PA	165011929	P.O. BOX RENEWAL							
							PAGE TOTAL			
Enter Grand Total of E	expenditures on Page 1, Rep	port Cover Page, Item D	).			\$	2,216.00			

## 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			Reporting Period						
FRIENDS OF BOB MERSKI From				3/29/2022 <b>To:</b>				5/2/2022	
·				DATE				Outstanding Balance of Debt	
Name of Creditor  ROBERT E MARSKI					DAY	YEAR			
Mailing Address 625 JAMES ST					2	2017	7 \$	37,000.00	
City ERIE	State	Zip Code (P	lus 4)	Description of Debt					
	PA	165091619	)	LOAN RECEIVED					
Name of Creditor NATIONAL FUND					DAY	YEAR			
Mailing Address 6363 MAIN ST				2	4	2019	\$	533.13	
City WILLIAMSVILLE	State	Zip Code (P	lus 4)	4) Description of Debt OVER PAYMENT					
	NY	142215855	;						
							PAGE TOTAL		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	37,533.13	