

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20180238		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>	<b>LOBBYIST</b>	
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF BOB MERSKI								
<b>Street Address:</b> P.O. BOX 667								
<b>City:</b> ERIE				<b>State:</b> PA		<b>Zip Code:</b> 16512		
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2022	<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/> <b>DISKETTE</b> <input type="checkbox"/>		
<b>Name of Office Sought by Candidate:</b>				<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO DAY YEAR			2	STH
				11 8 2022			DEM 25	
							(SEE INSTRUCTIONS FOR CODES)	
<b>Summary of Receipts and Expenditures from:</b>		MO	DAY	YEAR	<b>TO</b>		<b>FOR OFFICE USE ONLY</b>	
		3	29	2022	5 2 2022			
<b>A. Amount Brought Forward From Last Report</b>				\$ 51,000.84				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>				\$ 8,600.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>				\$ 59,600.84				
<b>D. Total Expenditures (From Schedule III)</b>				\$ 2,216.00				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>				\$ 57,384.84				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>				\$ 0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>				\$ 37,033.13				

## AFFIDAVIT SECTION

### PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

### Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BOB MERSKI	From: <u>3/29/2022</u> To: <u>5/2/2022</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 100.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 1,000.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,000.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 7,500.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 7,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 8,600.00
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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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF BOB MERSKI	<b>Reporting Period</b>  From: <u>3/29/2022</u> To: <u>5/2/2022</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><b>DATE</b></td> <td style="width: 40%;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> IBC PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 1901 MARKET ST			3	8	2022	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191031480				

<b>Full Name of Contributing Committee</b> HIGHMARK PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> PO BOX 890089 PO BOX 890089			3	3	2022	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170890069				

<b>Full Name of Contributing Committee</b> SCIETEK PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 212 LOCUST ST			3	2	2022	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171011527				

<b>Full Name of Contributing Committee</b> DUANE MORRIS POLITICAL ACTION			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 30 S 17TH ST			3	22	2022	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191034001				

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

<b>PAGE TOTAL</b>
\$ 1,000.00



# 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF BOB MERSKI	<b>Reporting Period</b>  <b>From:</b> <u>3/29/2022</u> <b>To:</b> <u>5/2/2022</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
ASSOCIATION OF PA COLLEGE PROFESSORS				2	18	2022	
Mailing Address319 N FRONT ST							
CityHARRISBURG	StatePA	Zip Code (Plus 4)171011203					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
ERIE INSURANCE PAC				1	25	2022	
Mailing AddressPO BOX 1699							
CityERIE	StatePA	Zip Code (Plus 4)165301000					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
FRIENDS OF JOANNA MCCLINTON				3	6	2022	
Mailing AddressPO BOX 16668							
CityPHILADELPHIA	StatePA	Zip Code (Plus 4)191396668					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
LAWPAC				3	7	2022	
Mailing Address212 N 3RD ST STE 101							
CityHARRISBURG	StatePA	Zip Code (Plus 4)171011505					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
OPERATORS FOR SKILL PAC				4	25	2022	
Mailing AddressPO BOX 343							
CityHARRISBURG	StatePA	Zip Code (Plus 4)171080343					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
OPERATORS FOR SKILL PAC				4	26	2022	
Mailing AddressPO BOX 343							
CityHARRISBURG	StatePA	Zip Code (Plus 4)171080343					

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
PLUMBERS LOCAL UNION 27 PAC			4	4	2022	
Mailing Address 1040 MONTOUR WEST IND PARK						
City	CORAOPOLIS	State	PA	Zip Code (Plus 4)	151089307	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 2,500.00
PSEA PACE			3	14	2022	
Mailing Address 400 N 3RD ST P.O. BOX 1724						
City HARRISBURG	State PA	Zip Code (Plus 4) 171011346				

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

<p><b>PAGE TOTAL</b></p> <p>\$ 7,500.00</p>
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**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: <span style="float: right;">To:</span>

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

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

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF BOB MERSKI		From: <u>3/29/2022</u> To: <u>5/2/2022</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BOB MERSKI	From <u>3/29/2022</u> To: <u>5/2/2022</u>

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

**SCHEDULE IV**  
**STATEMENT OF UNPAID DEBTS**  
 Use this Section to itemize all unpaid debts and obligations  
 which are outstanding at the end of the reporting period

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