Campaign Finance Report

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

Filer Identificat	ion 2	0220052				Repo Filed		:	CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing (Committee, Car	ndidate o	r Lobby	/ist:		СОММ	ITTE	EE T	O ELECT	L JOE (CANC	CILLA						
Street Address:	9 E DIVIS	ION ST																
City:	NORTH EA	ST							State:	PA			Zip Co	de: 16	e: 16428			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.) FRIDA MARY	Y PRE-	· 2.) DA RIMA		POST- 3. X			AMENDN REPORT		Yes	No	\checkmark	
(place X to the right of	e X to PRE-ELECTION ELECTION) da .ect		POST- 6.			TERMIN REPORT		Yes	🔨 No			
report type)	report type) ANNUAL REPORT 7. Year 2022 FILIN								G METHO CHECK O				PAPER		\checkmark	DISKE	TTE	
Name of Office Sought by Candidate:									DATE O	F ELE	CTIC	ON	District Number	Office Code	Pai	ty Code	County Code	
									мо	DAY	Y	EAR	4	STH	REF)	25	
REPRESENTATIVE IN THE GENERAL ASSEMBLY								Ī	11		8	2022		(SEE IN	STRUCTI	ONS FOR (CODES)	
Summary of		d MO	0	YAQ	YEAR				мо	DAY	Y	EAR	FC	OR OFFIC	CE USE	ONLY		
Expenditures	s from:		5	3	20	022	то		6		6	2022						
A. Amount Bro	ught Forward	From Last	t Repo	rt				\$				155.33						
B. Total Monet	ary Contributio	ons And R	eceipt	s (Fron	1 Sche	dule I))	\$		100.00								
C. Total Funds Available (Sum Of Lines A and B) \$											255.33							
D. Total Expen	ditures (From	Schedule	III)					\$				255.33						
E. Ending Cash	Balance (Subt	ract Line	D From	n Line	C)			\$				0.00						
F. Value Of In-	Kind Contribut	ions Rece	eived (From S	chedul	e II)		\$				776.00	4					
G. Unpaid Deb	ts And Obligati	ons (Fror	n Sche	dule IV	/)			\$				0.00			•			
					AFF	IDAV	ΊΤ S	SE	CTION									
PART I - If this i				-						• •			-	£ 1				
I swear (or affirm correct and compl		, including	the atta	icnea sc	neaules	s filea o	n pap	per o	or by elect	ronic m	eaiun	i, are to	the best o	от ту кпоч	vieage	and bell	er, true	
Sworn to and subs	scribed before me day of 	e this	20								5	Signatur	e of Perso	n Submitt	ting Re	port		
	Sig	nature					_						Prin	ited Name				
My Commission E	xpires												Ema	il				
	МО		DAY		YR					Ar	ea Co	de	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a	candidate	e's auth	norized	Comm	nittee,	Can	dida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amend		of my kno	wledge	and beli	ef this	politica	il co	mmi	ttee has n	ot viola	ted a	ny provis	ions of th	e act of Ju	une 3,1	937 (P.L	. 1333,	
Sworn to and subso	cribed before me day of	this										s	ignature	of Candida	ate			
			20										Printe	ed Name				
My Commission Exp	Signat	ure								Email								
													-					
	МО		DAY		YR					Area	Code		D	aytime To	elephor	ne Numb	er	

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Dementin	- Donio d							
	Name of Filing Committee or Candidate Reporting Period								
COMMITTEE TO ELECT JOE CANCILLA	From:	<u>5/3/202</u>	<u>2</u> To:	<u>6/6/2022</u>					
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)	\$	100.00							
TOTAL for the Reporting	\$	100.00							
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	g Period	(3)	\$	0.00					
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			\$	100.00					

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 Candidat	Name of Filing Committee or Candidate							
						:		
					DATE			AMOUNT
Full Name of Contributing Committee				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, Sec							\$	0.00

PART B 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	ite		Rep	porting P	eriod				
COMMITTEE TO ELECT JOE CANCILL	A		Fro	m:	<u>5/3/2</u>	<u>2022</u> То	o: <u>6/6/2022</u>		
					DATE			AMOUNT	
Full Name of Contributor VIRGINIA KOFORD				мо	DAY	YEAR			
Mailing Address 2401 WATERWHE	EL DRIVE						\$	100.00	
City WINSTON SALEM	State	Zip Code (Plus 4)	5	6	2022			
	NC	27103							
								PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I, I	Detailed Summary Pag	je, So	ection 2			\$	100.00	

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		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00
Mailing Address							7 *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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	Rep	orting Pe	riod						
Fr						Т	То:		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 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	Name of Filing Committee or Candidate			ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	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

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
COMMITTEE TO ELECT JOE CANCILLA	From:	<u>5/3/2022</u> то:	<u>6/6/2022</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)	\$	776.00
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, 3		\$	776.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period	·			
F						То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

PAGE 10

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

Name of Filing Committee or Candidate					porting	Period				
COMMITTEE TO ELECT JOE CANCILLA					om:	<u>5/3/202</u>	2 <u>2</u> To:		<u>6/6/2022</u>	
						DATE		AMOUNT		
Full Name of Contributor ELIZABETH CANCILLA		мо	DAY	YEAR						
Mailing Address 542 ORCHARD BEACH RD					5	10	2022	\$	776.00	
City NORTH EAST	State PA		Zip Code(Plus 4) 16428							
Employer of Contributor UPMC HAM	L OT				Occupation REGIST				JRSE	
Employer Mailing Address/Principal Plac	e of Business	Cit	у	State	e Zip	e Zip Code(Plus 4)		Description of Contribut		
201 STATE STREET` ERIE					PA 16550 A			ADVERTISING		
Enter Grand Total of Part G on Sch	Contributions De	etaile	ed				PAGE TOTAL			
Summary Page, Section 3.			_				776.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
COMMITTEE TO ELECT JOE CANCILLA	From	<u>5/3</u>	<u>3/2022</u>	То:	<u>6/6/2022</u>		
		AMOUNT					
To Whom Paid C&C Printing			мо	DAY	YEAR		
Mailing Address 23 S. LAKE STREET			5	4	2022	\$	205.00
City NORTH EAST	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	16428	MAILERS				
To Whom Paid Valones Brooklyn Grocery			мо	DAY	YEAR		
Mailing Address 201 S. lake Street			5	17	2022	\$	50.33
City NORTH EAST	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I	
	PA	16428	FOOD				
							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, keport C	over Page, Item L).			\$	255.33