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 :	on 2022	2C1303			Rep File			CAN	DIDATE COMMITTEE LOBBYIST							•		
Name of Filing C	Committee, Candid	late or L	obbyist:		ROB	ERT	E. M	ERSKI										
Street Address:																		
City:						State:							Zip Code: 16509					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA PRIMA		POST- 3. X AMENDMENT Yes REPORT?					Yes	ľ	lo	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	Y PRE	- 5	5.	30 DA		P	OST-	6.		TERMINAT REPORT?	TION	Yes	ľ	lo	\
report type)	ANNUAL REPORT	7.	Year 2022					IG MET CHECK					PAPER		V	DISK	ETTE	
Name of Office S	Sought by Candida	ite:	•					DATE	OI	F ELE	СТІ	ON	District Number	Office Code	Pai	ty Cod	e Cou	
	• ,							МО		DAY	١	YEAR	2	STH	DEI	М	1000	
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					:	11		8	2022	 	(SEE IN	STRUCTI	ONS FO	R CODES	5)
Summary of		МО	DAY	YEAR				МО		DAY	1	YEAR	FOI	OFFI	CE USE	ONL	1	
Expenditures	from:		5 3	20	022	T	0		6		6	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$		•			0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$					0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$					0.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$					0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II))	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	')			\$					0.00						
				AFF	IDA	VI	T SE	CTIO	Ν									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	[f thi	s is	a Car	ndidate	re	port, c	cand	lidate si	gn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached scl	hedules	filed	on p	paper	or by ele	ectr	onic m	ediu	m, are to	the best of	my knov	wledge	and be	lief , tı	rue
Sworn to and subs	cribed before me thi day of	s	20						-			Signatur	e of Person	Submit	ting Re	ort		_
	Signatu						- -		-				Print	ed Name	·			-
My Commission Ex	_								-				Email					-
	мо	D/	AY	YR			_		_	Arc	ea Co	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee	e, Ca	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and beli	ef this	politi	ical	comm	ittee ha	s no	ot viola	ted a	any provis	ions of the	act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me this											s	ignature of	Candid	ate			- $ $
	day of 						_		,				Printed	l Name				_
	Signature						-		_									_
My Commission Exp	_												Email					
	мо	D	AY	YR			•		,	Area	Code	e	Da	ytime T	elephor	ne Nun	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
ROBERT E. MERSKI	From:	5/3/202	<u>2</u> To:	6/6/2022
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)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
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	Period	(3)	\$	0.00
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			\$	0.00

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				Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Commi	ttee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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.

Name of Filing Comm	nittee or Candidate		Reporting	Period			
From: To:							
		•		DATE			AMOUNT
Full Name of Contribut	or		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
							PAGE TOTAL

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 Cai	Reporting	Period						
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary 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				Reporting Period					
Fre					rom: To:				
					ATE		AMOUNT		
				мо	DAY	YEAR	\$	0.00	
State	Zi	p Code (Plus	s 4)						
				Occupa	tion				
ce of Business		City			State		Zip	Code (Plus 4)	
dule I, Detailed	Sumn	mary Page,	Section	on 3.			\$	PAGE TOTAL 0.00	
	State ce of Business	State Zi ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: MO State Zip Code (Plus 4) Occupa	From: DATE MO DAY State Zip Code (Plus 4) Occupation ce of Business City State	State Zip Code (Plus 4) State Zip Code (Plus 4) Occupation ce of Business City State cdule I, Detailed Summary Page, Section 3.	From: To: DATE MO DAY YEAR State Zip Code (Plus 4) Occupation ce of Business City State Zip	

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				ing Peri	od			
			From:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Count Total of Dout	Fan Cahadula I Datailad	I Commence Dance C	` !	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	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	d	
ROBERT E. MERSKI	From:	<u>5/3/2022</u> To:	6/6/2022
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)	\$	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 Candidate	Reporting Period							
	From: To:							
				DATE			AMOUNT	
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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period				
					From:			То:		
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	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 Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
	From			То:					
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
Enter Grand Total of Expenditures	on Page 1 Penert C	Cover Page Item F					PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.			, .			\$	0.00		