

Commonwealth of Pennsylvania

Campaign Finance Report

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

Filer Identification Number : 20220209		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF ELECT JOE KUJAWA										
Street Address: 5431 HENDERSON RD.										
City: ERIE			State: PA	Zip Code: 16509						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7. X	Year 2022	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
				MO	DAY	YEAR	REP			
				11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		11	29	2022	TO	1	2	2023		
A. Amount Brought Forward From Last Report				\$		8,845.55				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		106.04				
C. Total Funds Available (Sum Of Lines A and B)				\$		8,951.59				
D. Total Expenditures (From Schedule III)				\$		8,951.59				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		0.00				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00				

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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF ELECT JOE KUJAWA	From: <u>11/29/2022</u> To: <u>1/2/2023</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 86.04

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)	\$ 20.00

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.)	\$ 106.04
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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.**

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

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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 Candidate	Reporting Period
	From: To:

			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$ 0.00

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: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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	Reporting Period
	From: _____ To: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 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.

PAGE 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 FRIENDS OF ELECT JOE KUJAWA	Reporting Period From: <u>11/29/2022</u> To: <u>1/2/2023</u>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	
ENGEL-ONEILL							
Mailing Address 2124 WEST 21ST ST.				12	7	2022	\$ 20.00
City ERIE	State PA	Zip Code (Plus 4) 16502					
Receipt Description REFUND - OVERPAYMENT							

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

PAGE TOTAL
\$ 20.00

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 FRIENDS OF ELECT JOE KUJAWA	Reporting Period From: <u>11/29/2022</u> To: <u>1/2/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
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: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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.				PAGE TOTAL \$ 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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF ELECT JOE KUJAWA	From <u>11/29/2022</u> To: <u>1/2/2023</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
JOE KUJAWA	11	10	2022	\$ 3,000.00
Mailing Address 5431 HENDERSON RD.				
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure REIMBURSEMENT FOR LOAN TO COMMITTEE	
To Whom Paid COLONY PUB & GRILLE	11	9	2022	\$ 1,732.90
Mailing Address 3014 W. 12TH ST.				
City ERIE	State PA	Zip Code (Plus 4) 16506	Description of Expenditure VICTORY PARTY	
To Whom Paid JOE KUJAWA	12	2	2022	\$ 61.06
Mailing Address 5431 HENDERSON RD.				
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure CAMPAIGN DEBT PAYOFF	
To Whom Paid KRISTI MATHELS	11	10	2022	\$ 210.55
Mailing Address 5149 HENDERSON RD.				
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure DESSERT FOR VICTORY PARTY	
To Whom Paid SUE'S NOTARY SERVICE	12	3	2022	\$ 22.00
Mailing Address 1353 WEST 38TH ST.				
City ERIE	State PA	Zip Code (Plus 4) 16508	Description of Expenditure NOTARY WORK	

To Whom Paid USPS			MO	DAY	YEAR	
Mailing Address 2108 E. 38TH ST.			12	3	2022	
City ERIE	State PA	Zip Code (Plus 4) 165159998	Description of Expenditure POSTAGE - CERTIFIED MAIL			
To Whom Paid COUNTRY FAIR #56			MO	DAY	YEAR	
Mailing Address 4753 BUFFALO RD			12	16	2022	
City ERIE	State PA	Zip Code (Plus 4)	Description of Expenditure GIFT CARDS			
To Whom Paid WAL-MART			MO	DAY	YEAR	
Mailing Address 5741 BUFFALO RD.			12	16	2022	
City HARBORCREEK	State PA	Zip Code (Plus 4) 16421	Description of Expenditure GIFT CARDS			
To Whom Paid WOMEN'S CARE CENTER OF ERIE COUNTY, INC.			MO	DAY	YEAR	
Mailing Address 4408 PEACH ST. SUITE 202			12	20	2022	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure DONATION			
To Whom Paid PEOPLE FOR LIFE			MO	DAY	YEAR	
Mailing Address 1625 W. 26TH ST.			12	16	2022	
City ERIE	State PA	Zip Code (Plus 4) 16506	Description of Expenditure DONATION			
To Whom Paid WAL-MART			MO	DAY	YEAR	
Mailing Address 1825 DOWNS DR.			12	20	2022	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure GIFT CARDS			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 8,951.59

