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 2019 | 90270 | | | Rep File | | | CAND | IDATE | | СОМ | ITTEE | ✓ | LOBE | SYIST | | |
|--|---------------------------------|-------------|--------------------------|----------------|-------------|-------|----------------|--------------------|----------------------|--------|------------|------------------------|----------------|----------|-----------|----------------|--|
| Name of Filing C | Committee, Candid | late or L | obbyist: | F | FRIE | END | S OF I | DEVLIN | ROBIN | SON | | | _ | | | | |
| Street Address: | PO BOX 81 | | | | | | | | | | | | | | | | |
| City: | HERSHEY | | | | | | | State: | PA | | | Zip Code: 17033 | | | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | 30 DA PRIMA | | POST- | - 3. | | AMENDMENT REPORT? | | Yes | No | ~ | | | | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY P ELECTION | RE- | - 5 | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | ~ | |
| report type) | ANNUAL REPORT | 7. X | Year 2022 | | | | | IG METH CHECK (| | | | PAPER | | / | DISKE | ГТЕ | |
| Name of Office S | Sought by Candida | nte: | • | | | | | DATE | OF ELE | CTIC | N N | District Number | Office Code | Par | ty Code | County Code | |
| | | | | | | | | МО | DAY | YI | AR | | 10000 | REP | | | |
| | | | | | | | | 1: | 1 | 8 | 2022 | | (SEE IN | STRUCTIO | ONS FOR C | ODES) | |
| | Receipts and | МО | DAY YE | AR | | | | МО | DAY | ΥI | EAR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | s trom: | | 11 29 | 20 |)22 | Т | 0 | 1 | 2 | 31 | 2022 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | 184,3 | 399.06 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From Scl | hec | dule | I) | \$ | | | 7,3 | 370.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | \$ 191,769.06 | | | | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | 17,3 | 36.15 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) | | | | \$ | | | 174,4 | 32.91 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sched | dul | e II |) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | ' | | | |
| | | | AF | 11 | IDA | ١٧٧ | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign here | e. I | f thi | is is | a Can | ndidate ı | report, | candi | date sig | jn here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | e attached schedu | lles | filed | d on | paper (| or by elec | tronic m | edium | , are to t | the best o | f my kno | wledge a | and belie | f , true | |
| Sworn to and subs | cribed before me thi | s | 20 | | | | | | | S | Signature | of Perso | n Submit | ting Rep | ort | | |
| | Signati | ire | | | | | - - | | | | | Prin | ted Name | e | | | |
| My Commission Ex | _ | | | | | | | | | | | Ema | il | | | | |
| | мо | D | AY Y | /R | | | | | Ar | ea Cod | le | Daytim | e Telepi | none Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized Con | nm | itte | e, C | andida | ate shal | l sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of ed. | my knowl | edge and belief tl | his | politi | ical | commi | ittee has | not viola | ted an | y provis | ions of the | e act of J | une 3,19 | 937 (P.L. | 1333, | |
| Sworn to and subsc | ribed before me this | | | | | | | | | | s | ignature o | of Candid | ate | | | |
| | day of | | | | | | - | | | | | Drint- | d Name | | | | |
| | Signature | | | | | | - | | | | | | | | | | |
| My Commission Exp | _ | | | | | | | | | | _ | Ema | il | _ | | | |
| | МО | D | AY | YR | | | • | | Area | Code | | Da | ytime T | elephon | e Numbe | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| - | | | | | | | | | |
|--|-----------|---------------|------------|----------|--|--|--|--|--|
| Name of Filing Committee or Candidate | Reporting | g Period | | | | | | | |
| FRIENDS OF DEVLIN ROBINSON | 11/29/202 | <u>22</u> To: | 12/31/2022 | | | | | | |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | | | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 70.00 | | | | | |
| 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) | \$ | 300.00 | | | | | | | |
| TOTAL for the Reporting |) Period | (2) | \$ | 300.00 | | | | | |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | | | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 2,500.00 | | | | | |
| All Other Contributions (Part D) | | | \$ | 4,500.00 | | | | | |
| TOTAL for the Reporting | Period | (3) | \$ | 7,000.00 | | | | | |
| 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 | | | \$ | 7,370.00 | | | | | |

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 | From: | | То | : | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributing Committee | | | МО | 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

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

FRIENDS OF DEVLIN ROBINSON

From: <u>11/29/2022</u> To:

DATE

12/31/2022

AMOUNT

| | | | | DATE | | AMOUNT |
|--|-------|-------------------|------|------|------|------------------|
| Full Name of Contributor THOMAS L. STEVENSON | | | | DAY | YEAR | |
| Mailing Address 131 MARKHAM DRIVE | | | | | | \$ 200.00 |
| City PITTSBURGH | State | Zip Code (Plus 4) | 12 | 3 | 2022 | |
| | PA | 15228 | | | | |
| Full Name of Contributor | | | мо | DAY | YEAR | |
| EARL J. BOHN | | | 1-10 | DAI | ILAK | |
| Mailing Address 7315 PERRYSVILLE AVENUE | | | | | | \$ 100.00 |
| City PITTSBURGH | State | Zip Code (Plus 4) | 12 | 3 | 2022 | |
| | PA | 15202 | | | | |

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

PAGE TOTAL \$ 300.00

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 Report | | | Reporting | g Period | | | | | |
|---|-------------------------------|---------------------------------|------------|----------|----------------|------|--------------------|--|--|
| FRIENDS OF DEVLIN ROBINSON | FRIENDS OF DEVLIN ROBINSON Fr | | | 11/2 | <u>19/2022</u> | То: | 12/31/2022 | | |
| | | | | DA | TE | | AMOUNT | | |
| Full Name of Contributing Committee MERCK PAC | | | | МО | DAY | YEAR | \$ 1,000.00 | | |
| Mailing Address 601 PENNSYLVANIA | AVE NW NORTH BUI | /E NW NORTH BUILDING SUITE 1200 | | 12 | 27 | 2022 | · | | |
| City WASHINGTON | State | Zip Code | e (Plus 4) | | | | | | |
| | DC | 20004 | | | | | | | |
| Full Name of Contributing Committee PA ACADEMY OF OPHTHALMOLOGY PAC | | | | мо | DAY | YEAR | \$ 500.00 | | |
| Mailing Address 200 NORTH THIRD S | TREET SUITE 1500 | | | 12 | 27 | 2022 | 333.33 | | |
| City HARRISBURG | State | Zip Code | (Plus 4) |] | | 2022 | | | |
| | PA | 17101 | | | | | | | |
| Full Name of Contributing Committee PA AMERICAN WATER PAC | | 3 | | мо | DAY | YEAR | \$ 1,000.00 | | |
| Mailing Address 852 WESLEY DRIVE | | | | 12 | 27 | 2022 | _, | | |
| City MECHANICSBURG | State | Zip Code | (Plus 4) |] | | | | | |
| | PA | 17055 | | | | | | | |

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

PAGE TOTAL \$ 2,500.00

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 Candidate | | | | | porting Period | | | | | |
|---|---|---|-------|----------------|-----------------------------|---------------------------------|-------------------------|------------------------|--|--|
| FRIENDS OF DEVLIN ROBINSON | | | Fror | n: | 11/29/2 | <u>022</u> To | : <u>12/</u> | 31/2022 | | |
| | | | | DA | ATE | | AMOU | NT | | |
| Full Name of Contributor | | | | . Ma | DAY | VEAD | | | | |
| BRENTWOOD BANK | | | | МО | DAY | YEAR | \$ | 2,500.00 | | |
| Mailing Address 411 MCMURRAY RO | AD SUITE 200 | | | 12 | 27 | 2022 | | | | |
| City BETHEL PARK | State | Zip Code (Plu | ıs 4) |] 12 | 27 | 2022 | | | | |
| | PA | 15102 | | | | | | | | |
| Employer Name | | | | Occupat | ion | | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code (Pl | lus 4) | | |
| Full Name of Contributor | | • | | мо | DAY | YEAR | 1. | 500.00 | | |
| COTERRA ENERGY PAC | | | | МО | DAI | ILAK | \$ | 500.00 | | |
| Mailing Address 840 GESSNER ROAD | SUITE 1400 | | | 12 | 27 | 2022 | | | | |
| City HOUSTON | State | Zip Code (Plu | ıs 4) | 1- | _, | LULL | | | | |
| | TX | 77024 | | | | | | | | |
| Employer Name | | | | | ion | | | | | |
| Employer Name | | | | Occupat | .1011 | | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | Оссирас | State | | Zip Code (Pl | lus 4) | | |
| • • | e of Business | City | | | State | VEAD | Ι | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | мо | | YEAR | Zip Code (Pl | 500.00 | | |
| Employer Mailing Address/Principal Place Full Name of Contributor | | City | | МО | State | | Ι | | | |
| Employer Mailing Address/Principal Place Full Name of Contributor MICHELE BERTOLINO | | City Zip Code (Plu | ıs 4) | | State | YEAR 2022 | Ι | | | |
| Employer Mailing Address/Principal Place Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON | W CT. | | ıs 4) | МО | State | | Ι | | | |
| Employer Mailing Address/Principal Place Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON | V CT. State | Zip Code (Plu | us 4) | МО | DAY 3 | | \$ | | | |
| Employer Mailing Address/Principal Place Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH | V CT. State PA BUTING | Zip Code (Plu | is 4) | MO 12 | DAY 3 | 2022 | \$ | 500.00 | | |
| Employer Mailing Address/Principal Place Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE | V CT. State PA BUTING | Zip Code (Plu 15236 | | MO 12 | DAY 3 | 2022 | \$ ALES | 500.00 | | |
| Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE Employer Mailing Address/Principal Place | V CT. State PA BUTING | Zip Code (Plu 15236 | | MO 12 Occupat | DAY 3 ion State PA | 2022 VP OF S | \$ ALES Zip Code (PI | 500.00 | | |
| Employer Mailing Address/Principal Place Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE Employer Mailing Address/Principal Place 1200 LEBANON RD | V CT. State PA BUTING | Zip Code (Plu 15236 | | MO 12 | DAY 3 ion State | 2022 | \$ ALES Zip Code (PI | 500.00 | | |
| Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE Employer Mailing Address/Principal Place 1200 LEBANON RD Full Name of Contributor | V CT. State PA BUTING e of Business | Zip Code (Plu 15236 | | MO 12 Occupate | DAY 3 ion State PA DAY | 2022 VP OF S YEAR | ALES Zip Code (PI 15122 | 500.00 | | |
| Employer Mailing Address/Principal Place Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE Employer Mailing Address/Principal Place 1200 LEBANON RD Full Name of Contributor JAMES E. BOLAS | V CT. State PA BUTING e of Business | Zip Code (Plu 15236 | FFLIN | MO 12 Occupat | DAY 3 ion State PA | 2022 VP OF S | ALES Zip Code (PI 15122 | 500.00 | | |
| Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE Employer Mailing Address/Principal Place 1200 LEBANON RD Full Name of Contributor JAMES E. BOLAS Mailing Address 202 BROOKSIDE BL | V CT. State PA BUTING re of Business | Zip Code (Plu 15236 City WEST MI | FFLIN | MO 12 Occupate | DAY 3 ion State PA DAY | 2022 VP OF S YEAR | ALES Zip Code (PI 15122 | 500.00 | | |
| Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE Employer Mailing Address/Principal Place 1200 LEBANON RD Full Name of Contributor JAMES E. BOLAS Mailing Address 202 BROOKSIDE BL | V CT. State PA BUTING Re of Business VD. State PA | Zip Code (Plu 15236 City WEST MI | FFLIN | MO 12 Occupate | DAY 3 ion State PA DAY 3 | 2022 VP OF S YEAR 2022 | ALES Zip Code (PI 15122 | 500.00 lus 4) | | |
| Full Name of Contributor MICHELE BERTOLINO Mailing Address 74 SPRING MEADON City PITTSBURGH Employer Name BRENTWOOD DISTRIE Employer Mailing Address/Principal Place 1200 LEBANON RD Full Name of Contributor JAMES E. BOLAS Mailing Address 202 BROOKSIDE BL City PITTSBURGH | V CT. State PA BUTING The of Business VD. State PA GROUP LLC | Zip Code (Plu 15236 City WEST MI | FFLIN | MO 12 Occupat | DAY 3 ion State PA DAY 3 | 2022 VP OF S YEAR 2022 | ALES Zip Code (PI 15122 | 500.00 Jus 4) 500.00 | | |

| Full Name of Contributor | мо | DAY | YEAR | 500.00 | | |
|---|-------|-------------------|---------|-----------|------|-------------------|
| JASON TIGANO | 1-10 | DAI | ILAK | \$ 500.00 | | |
| Mailing Address 1501 MERRICK AVE | | | 12 | 3 | 2022 | |
| City PITTSBURGH | State | Zip Code (Plus 4) |] 12 | 3 | 2022 | |
| | PA | 15226 | | | | |
| Employer Name LEVEL | | | Occupat | NT | | |
| Employer Mailing Address/Principal Place of Business City | | | | State | | Zip Code (Plus 4) |
| ONE PPG PLACE | | PITTSBURGH | | PA | | 15222 |

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

| PAGE TOTAL |
|----------------|
| \$ 4,500.00 |

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: | | |
| | | ' | | | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | 7 | |
| City | State | Zip Code (P | lus 4) | | | | | |
| Receipt Description | ' | . | | | | | <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 Per | iod | | | | | | | |
|--|---------------|------------------------------|-------------------|--|--|--|--|--|--|
| FRIENDS OF DEVLIN ROBINSON | From: | <u>11/29/2022</u> To: | <u>12/31/2022</u> | | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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 | T F) | | | | | | | | |
| 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 | | | | | Reporting Period | | | | | |
|--|----------------|-----|------------------|--------|------------------|----------------|-------|------|-----------------|------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | 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 | 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 | | | |
|---------------------------------------|------------------|------------|-----|------------|
| FRIENDS OF DEVLIN ROBINSON | From | 11/29/2022 | То: | 12/31/2022 |

| | | | | DATE | | | AMOUNT | |
|---|-------------------|----------------------------|---|----------------------------|---------------|----------|--------|--|
| To Whom Paid | | | | | | | | |
| CAREY SIRIANNI | | | МО | DAY | YEAR | | | |
| Mailing Address PO BOX 186 | | 12 | 2 | 2022 | \$ | 9,400.00 | | |
| City SEWICKLEY | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | PA | 15143 | CONSU | LTING | | | | |
| To Whom Paid PITTSBURGH AIRPORT AREA CHAMBER OF COMMERCE | | | МО | DAY | YEAR | | | |
| Mailing Address 850 BEAVER GRADE ROAD | | 12 | 2 | 2022 | \$ | 575.00 | | |
| City MOON TOWNSHIP | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | PA 15108 | | | CONTRIBUTION | | | | |
| To Whom Paid SOUTH WEST COMMUNITIES CHA | MBER OF COMMERCI | Ē | МО | DAY | YEAR | | | |
| Mailing Address 990 WASHING | TON PIKE | | 12 | 2 | 2022 | \$ | 500.00 | |
| City BRIDGEVILLE | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | PA | 15017 | CONTRIBUTION | | | | | |
| To Whom Paid TAR STORAGE | | | МО | DAY | YEAR | | | |
| Mailing Address 3054 WASHINGTON RD | | 12 | 2 | 2022 | \$ | 1,375.88 | | |
| City MCMURRAY | State | Zip Code (Plus 4) | Description of Expenditure STORAGE FEES | | | | | |
| | PA | 15317 | | | | | | |
| To Whom Paid CLEBAK CONSULTING LLC | | | МО | DAY | YEAR | | | |
| Mailing Address PO BOX 81 | | 12 | 7 | 2022 | \$ | 500.00 | | |
| City HERSHEY | State | Zip Code (Plus 4) | Descrip | Description of Expenditure | | | | |
| | PA | 17033 | CONSU | CONSULTING | | | | |
| To Whom Paid COLD SPARK MEDIA | | МО | DAY | YEAR | | | | |
| Mailing Address 307 FOURTH AVENUE 14TH FLOOR | | 12 | 15 | 2022 | \$ | 121.98 | | |
| City PITTSBURGH | State | Zip Code (Plus 4) | Descrip | l tion of Exp | ı enditure | 1 | | |
| | PA | 15222 | WEBSITE HOSTING | | | | | |

| To Whom Paid | | | МО | DAY | YEAR | | |
|---|--------------------|-------------------|--|-------------|----------|--------|------------|
| SHACOG | | | 1.10 | | l Z/III | | |
| Mailing Address 2600 OLD GREENTREE ROAD | | 12 | 15 | 2022 | \$ | 35.00 | |
| City CARNEGIE | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| | PA | 15106 | SPONSORSHIP | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| DEVLIN ROBINSON | | | 140 | | ILAK | | |
| Mailing Address 93 CALVERT ST | | | 12 | 16 | 2022 | \$ | 2,841.88 |
| City BRIDGEVILLE | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | PA | 15017 | EXPENSE REIMBURSEMENT | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | |
| HOLLY ARMS | | | 140 | | i Zaux | | |
| Mailing Address 4930 BRIGHTWOOD ROAD APT B207 | | 12 | 23 | 2022 | \$ | 145.00 | |
| City BETHEL PARK | State | Zip Code (Plus 4) | Description of Expenditure REIMBURSEMENT | | | | |
| | PA | 15102 | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | |
| COLD SPARK MEDIA | | | 140 | | 1 Z/IIX | | |
| Mailing Address 307 FOURTH AVENUE 14TH FLOOR | | | 12 | 23 | 2022 | \$ | 1,841.41 |
| City PITTSBURGH | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | PA | 15222 | HOLIDAY CARDS | | | | |
| Enton Cuand Total of Evnor ditures | n Dago 1 Donard C | over Dage Item D | | | ĺ | | PAGE TOTAL |
| Enter Grand Total of Expenditures o | m Page I, Keport C | over Page, Item D | • | | | \$ | 17,336.15 |