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 :			Report					соми	ITTEE	✓	LOBI	BYIST				
Name of Filing C	Committee, Candid	late or L	obbyist:	F	RIEND	S OF	AARON E	BERNS	ΓINE							
Street Address:	254 STATE R	OUTE 16	58													
City:	NEW GALILE						State: PA				Zip Code: 16141					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	RE-	2. X	30 DA		POST-	3.		AMENDM REPORT		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PI ELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPORT	7.	Year 2022				NG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	ite:			-		DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
	,						МО	DAY	YE	AR	Number	Code			code	
							11		8	2022		(SEE IN	STRUCTI	ONS FOR C	ODES)	
•	Receipts and	МО	DAY YEA	\R			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	irom:		3 29	20	22 T	0	5		2	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			23,7	737.36						
B. Total Monet	ary Contributions	And Rec	eipts (From Sch	ed	ule I)	\$			28,3	340.00						
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			52,0	77.36						
D. Total Expen	ditures (From Sch	edule II	I)			\$			47,0	73.24						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			5,0	04.12						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	lule	e II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$			24,5	94.32			'			
			AF	FI	DAVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here	. If	this is	a Car	ndidate re	eport, e	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached schedul	les f	filed on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , true	
Sworn to and subs	cribed before me thi day of	s	20						s	ignature	of Perso	n Submit	ting Rep	oort		
	Signati	ıre				- -					Prin	ted Nam	e			
My Commission Ex	-										Ema	il				
	МО	D	AY Y	R				Ar	ea Cod	e	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Com	ımi	ttee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of led.	ny knowl	edge and belief th	is p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me this									s	ignature (of Candid	ate			
	day of —— ————					_					Printe	d Name				
	Signature					-										
My Commission Exp	ires										Ema	il				
	МО	D	AY Y	/R		-		Area	Code		D	aytime 1	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF AARON BERNSTINE	From:	<u>3/29/202</u>	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	140.00
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)			\$	200.00
TOTAL for the Reporting) Period	(2)	\$	200.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	21,000.00
All Other Contributions (Part D)			\$	7,000.00
TOTAL for the Reporting) Period	(3)	\$	28,000.00
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			\$	28,340.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	Name of Filing Committee or Candidate				Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng 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, Section 2.

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 AARON BERNSTINE

From: <u>3/29/2022</u> To:

DATE

5/2/2022

AMOUNT

Full Name of Contribu	МО	DAY	YEAR				
Mailing Address 526 SALEM HEIGHTS DR							\$ 200.00
City GIBSONIA		State PA	Zip Code (Plus 4) 15044	4	13	2022	

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

PAGE TOTAL \$ 200.00

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	ame of Filing Committee or Candidate Reporti					Period				
FRIENDS OF AARON BERNSTINE			From:	<u>3/2</u>	9/2022	То:	<u>5</u> ,	/2/2022		
				DA	TE		АМ	OUNT		
Full Name of Contributing Committee I'M FOR KNOWLES				МО	DAY	YEAR				
Mailing Address 16 OXFORD ST							\$	1,000.00		
City TAMAQUA	State PA	Zip Code 18252	e (Plus 4)	4	9	2022				
Full Name of Contributing Committee CITIZENS FOR KAIL				МО	DAY	YEAR				
Mailing Address PO BOX 94 City BEAVER	State	Zip Code	e (Plus 4)	4	9	2022	\$	2,000.00		
	PA	15009								
Full Name of Contributing Committee FRIENDS OF KURT MASSER				МО	DAY	YEAR				
Mailing Address 57 MOUNTAIN RD							\$	500.00		
City SHAMOKIN	State PA	Zip Code 17872	e (Plus 4)	4	14	2022				
Full Name of Contributing Committee BENNINGHOFF FOR REP				МО	DAY	YEAR				
Mailing Address 328 E LAMB ST							\$	5,000.00		
City BELLEFONTE	State PA	Zip Code 16823	e (Plus 4)	4	14	2022				
Full Name of Contributing Committee FRIENDS OF TIM O'NEAL				МО	DAY	YEAR				
Mailing Address 1328 MAPLEWOOD C	CIR						\$	2,000.00		
City WASHINGTON	State PA	Zip Code	e (Plus 4)	4	14	2022				

Full Name of Contributing Committee			мо	DAY	YEAR	
COMMITTEE TO ELECT ROB KAUFFMA	AN		140	DAI	ILAK	
Mailing Address PO BOX 1179						\$ 1,500.00
City CHAMBERSBURG	State	Zip Code (Plus 4)	4	14	2022	
	PA	17201				
Full Name of Contributing Committee		мо	DAY	YEAR		
CITIZENS FOR JASON ORTITAY	MO	DAT	TEAR			
Mailing Address 228 OSTOP RD.						\$ 500.00
City BURGETTSTOWN	State	Zip Code (Plus 4)	4	20	2022	
	PA	15021				
Full Name of Contributing Committee	·	•	мо	DAY	YEAR	
PROTECTING PA PAC						
Mailing Address PO BOX 811			,	25	2022	\$ 1,000.00
City MECHANICSBURG	State	Zip Code (Plus 4)	4	25	2022	
	PA	17055				
Full Name of Contributing Committee	NICING		мо	DAY	YEAR	
PA COMMITTEE FOR AFFORDABLE HO	DUSING		МО	DAY	YEAR	
						\$ 500.00
PA COMMITTEE FOR AFFORDABLE HO		Zip Code (Plus 4)	MO	DAY 27	YEAR 2022	\$ 500.00
PA COMMITTEE FOR AFFORDABLE HOME Mailing Address 205 GRANDVIEW A	AVE	Zip Code (Plus 4) 17011				\$ 500.00
PA COMMITTEE FOR AFFORDABLE HOME Mailing Address 205 GRANDVIEW A	AVE State		4	27	2022	\$ 500.00
PA COMMITTEE FOR AFFORDABLE HOME Mailing Address 205 GRANDVIEW A City CAMP HILL	AVE State					\$ 500.00
PA COMMITTEE FOR AFFORDABLE HO Mailing Address 205 GRANDVIEW City CAMP HILL Full Name of Contributing Committee	AVE State		4 MO	27 DAY	2022 YEAR	\$ 500.00 2,000.00
PA COMMITTEE FOR AFFORDABLE HOME Mailing Address 205 GRANDVIEW A City CAMP HILL Full Name of Contributing Committee PA LIBERTY FUND	AVE State		4	27	2022	
PA COMMITTEE FOR AFFORDABLE HO Mailing Address 205 GRANDVIEW City CAMP HILL Full Name of Contributing Committee PA LIBERTY FUND Mailing Address PO BOX 98	State PA	17011	4 MO	27 DAY	2022 YEAR	
PA COMMITTEE FOR AFFORDABLE HO Mailing Address 205 GRANDVIEW City CAMP HILL Full Name of Contributing Committee PA LIBERTY FUND Mailing Address PO BOX 98	State PA State	17011 Zip Code (Plus 4)	4 MO	27 DAY 27	2022 YEAR 2022	
PA COMMITTEE FOR AFFORDABLE HOME Mailing Address 205 GRANDVIEW A City CAMP HILL Full Name of Contributing Committee PA LIBERTY FUND Mailing Address PO BOX 98 City BETHEL	State PA State	17011 Zip Code (Plus 4)	4 MO	27 DAY	2022 YEAR	
PA COMMITTEE FOR AFFORDABLE HOME Mailing Address 205 GRANDVIEW A City CAMP HILL Full Name of Contributing Committee PA LIBERTY FUND Mailing Address PO BOX 98 City BETHEL	State PA State	17011 Zip Code (Plus 4)	4 MO	27 DAY 27	2022 YEAR 2022	
PA COMMITTEE FOR AFFORDABLE HO Mailing Address 205 GRANDVIEW City CAMP HILL Full Name of Contributing Committee PA LIBERTY FUND Mailing Address PO BOX 98 City BETHEL Full Name of Contributing Committee GAYDOS FOR PA	State PA State	17011 Zip Code (Plus 4)	4 MO	27 DAY 27	2022 YEAR 2022	\$ 2,000.00
PA COMMITTEE FOR AFFORDABLE HO Mailing Address 205 GRANDVIEW City CAMP HILL Full Name of Contributing Committee PA LIBERTY FUND Mailing Address PO BOX 98 City BETHEL Full Name of Contributing Committee GAYDOS FOR PA Mailing Address PO BOX 515	State PA State PA	17011 Zip Code (Plus 4) 19507	4 MO	27 DAY 27	2022 YEAR 2022	\$ 2,000.00

Full Name of Contributing Committee FRIENDS OF JM COX	мо	DAY	YEAR			
Mailing Address PO BOX 2250						\$ 1,000.00
City SINKING SPRING	State PA	Zip Code (Plus 4) 19608	4	29	2022	
Full Name of Contributing Committee RAPP FOR REP COMMITTEE			МО	DAY	YEAR	
Mailing Address 3780 FOLLETT RUN F	RD					\$ 1,000.00
City WARREN	State PA	Zip Code (Plus 4) 16365	4	29	2022	
Full Name of Contributing Committee FRIENDS OF DAWN KEEFER COMMITTE	E		МО	DAY	YEAR	
_						\$ 1,000.00
FRIENDS OF DAWN KEEFER COMMITTE		Zip Code (Plus 4) 17019	MO	DAY 29	YEAR 2022	\$ 1,000.00
FRIENDS OF DAWN KEEFER COMMITTE Mailing Address 430 FRANKLIN CHUR	CH RD					\$ 1,000.00
FRIENDS OF DAWN KEEFER COMMITTE Mailing Address 430 FRANKLIN CHUR City DILLSBURG Full Name of Contributing Committee	State PA		4	29	2022	\$ 1,000.00 \$ 1,000.00

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

PAGE TOTAL 21,000.00

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 C	ommittee or Candida	te			Rep	orting Pe	riod				
FRIENDS OF AA	ARON BERNSTINE				Fror	n:	<u>3/29/2</u>	<u>:022</u> To) :	<u>5/</u>	<u>2/2022</u>
						D	ATE			AMOUN	т
Full Name of Cor V MILOU MACKE						мо	DAY	YEAR			
Mailing Address	2050 DENNIS LN								\$		1,000.00
City BETHLEH	HEM	State	Zi	p Code (Plus	5 4)	4	9	2022			
		PA	18	3015							
Employer Name	PA STATE HOUSE	•	•			Occupat	tion F	REPRESI	NTATI	VE	
Employer Mailing	Address/Principal P	Place of		City			State		Zip Co	de (Plu	s 4)
business				HARRISE	BURG		PA				
Full Name of Cor						МО	DAY	YEAR			
Mailing Address	PO BOX 34								\$		500.00
City OSCEOL	A MILLS	State	Zi	p Code (Plus	5 4)	4	9	2022			
		PA	16	5666							
Employer Name	PA STATE HOUSE	•	•			Occupat	tion F	REPRESI	NTATI	VE	
Employer Mailing Business	Address/Principal P	Place of		City		<u> </u>	State		Zip Co	de (Plu	s 4)
business				HARRISE	BURG		PA				
Full Name of Cor						мо	DAY	YEAR			
Mailing Address	254 STATE ROUTE	168							\$		5,000.00
City NEW GA	LILEE	State	Zi	p Code (Plus	5 4)	4	22	2022			
		PA	16	5141							
Employer Name PA STATE HOUSE				Occupat	tion F	REPRESI	NTATI	VE			
Employer Mailing Business	Address/Principal P	Place of		City		•	State		Zip Co	de (Plu	s 4)
				 HARRISE	BURG		PA				

Full Name of Contributor ROBERT BROOKS					DAY	YEAR	
Mailing 3465 TREELINE DR				_			\$ 500.00
City MURRYSVILLE	State PA		p Code (Plus 4) 5668	4	9	2022	
Employer Name PA STATE HOUSE		•		Occupat	ion R	EPRESE	NTATIVE
Employer Mailing Address/Principal Place of Business			City	State Zip (Zip Code (Plus 4)
			HARRISBURG		PA		

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

PAGE TOTAL
\$ 7,000.00

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 Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·					•	
Enter Grand Total of Part E	on Schedule I. Detailed	d Summary Page	Section	4			ı	PAGE TOTAL
	Journal 1, Betailet	a cannual y 1 age,	2000011	••			\$	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	od	
FRIENDS OF AARON BERNSTINE	From:	3/29/2022 To :	<u>5/2/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candida	Reporting						
			From:			То:	
				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 Sci	hodulo II. In-Vir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, In-Kin	id Contributions Deta	nieu Sum	шагу Рас	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							
						om:		To:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address								\$	0.00		
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	tion				
Employer Mailing Address/Principal Pla Business	ess/Principal Place of City			State			Zip Code(Plus 4)		Description of Contribution		
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Po	eriod		
FRIENDS OF AARON BERNSTINE	From	3/29/2022	То:	<u>5/2/2022</u>

				DATE		AMOUNT
To Whom Paid DOMINO'S			МО	DAY	YEAR	
Mailing Address 162 PORTERSVILL	E RD		5	2	2022	\$ 10.48
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	1	otion of Exp		
To Whom Paid SUNOCO			МО	DAY	YEAR	
Mailing Address 25 W LINE AVE			5	2	2022	\$ 120.99
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	1	otion of Exp		
To Whom Paid THE SHELBY BAR			МО	DAY	YEAR	
Mailing Address 26 FOUNTAIN AVE			5	2	2022	\$ 35.68
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117		otion of Exp		
To Whom Paid BOOK'S MARKET			МО	DAY	YEAR	
Mailing Address 3384 PERRY HIGH	WAY		5	2	2022	\$ 39.34
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101		otion of Exp		
To Whom Paid FACEBOOK			МО	DAY	YEAR	
Mailing Address 1 HACKER WAY			5	2	2022	\$ 726.39
City MENLO PARK	State CA	Zip Code (Plus 4) 94025	Descrip ADVER	I otion of Exp TISING	penditure	

To Whom Paid MAILCHIMP Mailing Address 675 PONCE DE LEON AVE NE						PAC	∍E 15
City ATLANTA State GA Zip Code (Plus 4) 30308 Description of Expenditure COMMUNICATIONS To Whom Paid GOOGLE Mo DAY YEAR Mailing Address 10 10TH ST NE #600 4 4 4 2022 \$ City ATLANTA State GA Zip Code (Plus 4) 30309 Description of Expenditure COMMUNICATIONS To Whom Paid BPER 4 LESS AND POP MO DAY YEAR State PARKLE Zip Code (Plus 4) 11 2022 \$ State PARKLE Zip Code (Plus 4) 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE MO DAY YEAR Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE State PARKLE Zip Code (Plus 4) 12022 \$ Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE State PARKLE Zip Code (Plus 4) 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE MO DAY YEAR Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE MO DAY YEAR Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE <th></th> <th></th> <th>мо</th> <th>DAY</th> <th>YEAR</th> <th></th> <th></th>			мо	DAY	YEAR		
To Whom Paid GA 30308 COMMUNICATIONS	Mailing Address 675 PONCE DE LEON AVE NE		4	4	2022	\$	333.90
Mailing Address 10 10TH ST NE #600	AILANIA						
City ATLANTA State GA GA State GA 30309 COMMUNICATIONS To Whom Paid BEER 4 LESS AND POP Mo DAY VEAR Mo DAY VEAR City NEW CASTLE State PA State City NEW CASTLE State PA Sta			МО	DAY	YEAR		
To Whom Paid BEER 4 LESS AND POP Mailing Address 310 CASCADE GALLERIA City NEW CASTLE State PA HOUSE PA HOUS	Mailing Address 10 10TH ST NE #600		4	4	2022	\$	12.72
Mailing Address 310 CASCADE GALLERIA City NEW CASTLE State PA 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE Mailing Address 2016 W STATE ST City NEW CASTLE State PA 2ip Code (Plus 4) 16101 Description of Expenditure VOLUNTEER EXPENSE 4 11 2022 \$ City NEW CASTLE State PA 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid	AILANIA		1				
City NEW CASTLE State PA 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid SPARKLE Mailing Address 2016 W STATE ST City NEW CASTLE State PA State PA State PA 16101 Description of Expenditure VOLUNTEER EXPENSE 4 11 2022 \$ City NEW CASTLE State PA 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid			МО	DAY	YEAR		
To Whom Paid SPARKLE Mailing Address 2016 W STATE ST City NEW CASTLE State PA Zip Code (Plus 4) 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid To Whom Paid To Whom Paid	Mailing Address 310 CASCADE GALLERIA		4	11	2022	\$	77.96
SPARKLE Mo DAY YEAR Mailing Address 2016 W STATE ST 4 11 2022 \$ City NEW CASTLE PA Zip Code (Plus 4) 16101 Description of Expenditure VOLUNTEER EXPENSE To Whom Paid MO DAY YEAR	NEW CASILE		1				
City NEW CASTLE State PA In 101 PA Description of Expenditure VOLUNTEER EXPENSE To Whom Paid MO DAY YEAR			МО	DAY	YEAR		
To Whom Paid PA 16101 PA 16101 PA PA 16101 PA PA PA PA PA PA PA PA PA P	Mailing Address 2016 W STATE ST		4	11	2022	\$	27.36
MO DAY YEAR	NEW CASILE		1	-			
THOUGHT PROCESS ENTERPRISES	To Whom Paid THOUGHT PROCESS ENTERPRISES		МО	DAY	YEAR		
Mailing Address 632 LAWRENCE AVE 4 1 2022 \$	Mailing Address 632 LAWRENCE AVE		4	1	2022	\$	1,750.00
City ELLWOOD CITY State Zip Code (Plus 4) PA 16117 Description of Expenditure MAIL	ELLWOOD CITY		1	otion of Exp	penditure		
			МО	DAY	YEAR		
To Whom Paid FRIENDS OF NICK KERIN MO DAY YEAR	Mailing Address 315 E LINCOLN AVE		4	11	2022	\$	1,000.00
FRIENDS OF NICK KERIN MO DAY YEAR Mailing Address	City NEW CASTLE PA	Zip Code (Plus 4) 16101	1	otion of Exp IGN CONT			

							10	
To Whom Paid THE DATA GROUP LLC			мо	DAY	YEAR			
Mailing Address 3208 E CC	DLONIAL DR		4	13	2022	\$	350.00	
City ORLANDO	State FL	Zip Code (Plus 4) 32803		otion of Exp	penditure			
To Whom Paid REAM PRINTING COMPANY			МО	DAY	YEAR			
Mailing Address 515 FARM	BROOK LN		4	29	2022	\$	33,559.79	
City YORK	State PA	Zip Code (Plus 4) 17406	Descrip MAIL	otion of Exp	penditure	re		
To Whom Paid FRIENDS OF NICK KERIN			МО	DAY	YEAR			
Mailing Address 315 E LIN	COLN AVE		4	29	2022	\$	9,000.00	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	1	otion of Exp	penditure			
To Whom Paid RAISE THE MONEY	·		мо	DAY	YEAR			
Mailing Address PO BOX 2	6466		4	28	2022	\$	28.63	
City LITTLE ROCK	State AR	Zip Code (Plus 4) 72221		otion of Exp SSING FEE				
Enter Grand Total of Even	nditures on Page 1. Pa	uport Cover Page Item D					PAGE TOTAL	
Enter Grand Total of Expe	nultures on Page 1, Re	eport Cover Page, Item D	' -			\$	47,073.24	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate	Reportir	ing Period							
FRIENDS OF AARON BERNSTINE			From:	<u>3</u>	3/29/2022	То:		<u>5/2</u>	2/2022
					DATE				tanding nce of Debt
Name of Creditor AARON J. BERNSTINE				МО	DAY	YEAR			
Mailing Address 254 STATE ROUTE	168			5	2	2022	2	\$	19,594.32
City NEW GALILEE	State PA	Zip Code (Plu 16141	us 4)	Description of Debt UNREIMBURSED EXPENSES AND					ILEAGE
					DATE				standing nce of Debt
Name of Creditor AARON J. BERNSTINE				МО	DATE	YEAR			
	168			MO 4		YEAR 2022			
AARON J. BERNSTINE	168 State PA	Zip Code (Plu	us 4)	4 Descrip	DAY	2022		Bala	nce of Debt
AARON J. BERNSTINE Mailing Address 254 STATE ROUTE	State PA	16141		4 Descrip CAMPA	DAY 22 Ottion of Del	2022		Bala \$	nce of Debt