Campaign Finance Report

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

Filer Identification	on	20230	C0096				eport led B		CAN	NDIDATE COMMITTEE LOBBYIST									
Name of Filing C	ommittee, (Candida	ate or Lo	obbyist:		ERI	IC J.	MIKO	VCH										
Street Address:																			
City:									State:					Zip Code	: 16·	410			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		Р	OST-	3.		AMENDME REPORT?	Yes	No	1	\checkmark	
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FRIDAY	Y PRE	≣-	5.	30 DA		Р	OST-	6. X		TERMINAT REPORT?	ION	Yes	No		/
report type)	ANNUAL RE	EPORT	7.	Year 2023					IG MET CHECK					PAPER		\	DISKE	TTE	
Name of Office S	ought by C	andidat	:e:						DATE	0	F ELEC	СТІС	N	District Number	Office Code	Par	ty Code	Coun	
		= = - 4 . 4 .		_					МО		DAY	YI	EAR	6	СРЈ	DEN	1		
JUDGE OF THE	COURT OF	COMM	ON PLEA	AS						11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of l	•	and	МО	DAY	YEAR	Ł			МО		DAY	Y	EAR	FOR	OFFIC	E USE	ONLY		
Expenditures	from:		1	10 24	2	2023	₹ Т	0		11	2	27	2023						
A. Amount Bro	ught Forwa	rd From	Last R	eport				\$				•	0.00						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 50,000.00																			
C. Total Funds Available (Sum Of Lines A and B) \$ 50,000.00																			
D. Total Expend	ditures (Fro	m Sche	dule II	1)				\$				50,0	00.00						
E. Ending Cash Balance (Subtract Line D From Line C)						\$					0.00								
F. Value Of In-l	Kind Contril	butions	Receive	ed (From So	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Oblig	jations ((From S	chedule IV)			\$			2	237,6	571.63		•				
					AFF	·ID	AVI	T SE	CTIO	N									
PART I - If this is	a Committ	tee repo	rt, trea	surer sign l	nere.	If th	nis is	a Can	didate	re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		ort, inclu	ıding the	attached sch	nedules	s file	ed on	paper o	or by el	ectr	onic me	edium	, are to t	the best of	my know	/ledge	and beli	ef , tr	ue
Sworn to and subs	scribed before day of	: me this		20						•		S	Signature	of Person	Submitt	ing Rep	oort		_
		Signature				_		- -		•				Printe	d Name				-[
My Commission Ex		Signatur	Е							-				Email					-
	мо	5	D/	AY	YR						Are	ea Cod	de	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of	f a cand	idate's	authorized	Comr	nitte	ee, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	edge and beli	ef this	; poli	itical	commi	ittee ha	s no	ot violat	ted ar	ny provis	ions of the	act of Ju	ne 3,1	937 (P.L	1333	3,
Sworn to and subsc		me this											s	ignature of	Candida	te			-
	day of ——			_ 20				_						Printed	Name				-
	Sig	ınature				—		-											_ [
My Commission Exp	_													Email					
		мо	D/	AY	YR	ı		-			Area	Code		Day	time Te	lephor	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
ERIC J. MIKOVCH	From:	10/24/202	<u>3</u> To:	11/27/2023
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)	\$	50,000.00
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			\$	50,000.00

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	ittee or Candidate		Re	porting				
			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 Candidat	te		Reporting Period					
			From: To:					
					DATE			AMOUNT
Full Name of Contributor				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

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 Repo		Reporting					
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary 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							
			Fror	n:		To	То:		
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address City State Zip Code (Plus 4)							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	on 3.			\$	PAGE TOTAL 0.00	

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	2		Report	ing Perio	od		
ERIC J. MIKOVCH			From:		10/24/202	<u>3</u> To:	11/27/2023
				D	ATE		AMOUNT
Full Name							
ERIC J. MIKOVCH				МО	DAY	YEAR	
Mailing Address 10290 IVAREA RD							\$ 20,000.00
City CRANESVILLE	State	Zip Code (Plus 4)	10	24	2023	
	PA	16410					
Receipt Description CANDIDATE	PAID EXPENSES						
Full Name							
ERIC J. MIKOVCH				МО	DAY	YEAR	
Mailing Address 10290 IVAREA RD							\$ 30,000.00
City CRANESVILLE	State	Zip Code (Plus 4)	10	25	2023	
	PA	16410					
Receipt Description CANDIDATE	PAID EXPENSES			-			

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

PAGE TOTAL \$ 50,000.00

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 Peri	od							
ERIC J. MIKOVCH	From:	10/24/2023 To:	11/27/2023						
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 PART 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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	nme of Filing Committee or Candidate			Reporting	Period	Reporting Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address							\$	0.00	
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period				
ERIC J. MIKOVCH			From	10/24	То:	11/27/2023		
				DATE			AMOUNT	
To Whom Paid THE COMMITTEE TO ELECT E	мо	DAY	YEAR					
Mailing Address 2402 W 8TH ST			10	24	2023	\$	20,000.00	
City ERIE	State PA	Zip Code (Plus 4) 16505	1 .	Description of Expenditure CAMPAIGN CONTRIBUTION				
To Whom Paid THE COMMITTEE TO ELECT E	RIC MIKOVCH		мо	DAY	YEAR			
Mailing Address 2402 W 8	TH ST		10	25	2023	\$	30,000.00	
City ERIE	State PA	Zip Code (Plus 4) 16505	Description of Expenditu CAMPAIGN CONTRIBUT					

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

50,000.00

SCHEDULE IV 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	iling Committee or Candidate Reporting							
ERIC J. MIKOVCH			From:	<u>10</u>)/24/2023	То:		11/27/2023
					DATE			Outstanding Balance of Debt
Name of Creditor					DAY	VEAD		
ERIC J. MIKOVCH				МО	DAY	YEAR		
Mailing Address 10290 IVAREA RD				4	30	2023	\$	110,445.91
City CRANESVILLE	State	Zip Code (Plu	ıs 4)	Descrip	tion of Del	ot		
614.1126.1222	PA	16410			DATE PAID		ES	
					DATE			Outstanding Balance of Debt
Name of Creditor					- 44	\/=		
ERIC J. MIKOVCH				МО	DAY	YEAR		
Mailing Address 10290 IVAREA RD				10	6	2023	\$	40,000.00
City	State Zip Code (Plus 4)					_		
City CRANESVILLE	PA 16410				otion of Del DATE PAID		EC	
	PA	10410		CANDII	DATE PAID	EXPENS	<u> </u>	
					DATE			Outstanding Balance of Debt
Name of Creditor					- 44	\/=		
ERIC J. MIKOVCH				МО	DAY	YEAR		
Mailing Address 10290 IVAREA RD				10	11	2023	\$	28,000.00
City CRANESVILLE	State	Zip Code (Plu	ıs 4)	Descrin	tion of Del	ot		
CIONILOVILLE	PA	16410			DATE PAID		ES	
					DATE			Outstanding Balance of Debt
Name of Creditor					2006			
ERIC J. MIKOVCH				МО	DAY	YEAR		
Mailing Address 10290 IVAREA RD				10	21	2023	\$	9,225.72
City CRANESVILLE	State	Zip Code (Plu	ıs 4)	Description of Debt				
	PA	16410			DATE PAID		ES	

			DATE			Outstanding Balance of Debt		
Name of Creditor ERIC J. MIKOVCH			мо	DAY	YEAR			
Mailing Address 10290 IVAREA RD			10	24	2023	\$	20,000.00	
City CRANESVILLE	State	Zip Code (Plus 4)	Description of Debt					
GIGUNESVILLE	PA	16410	CANDIDATE PAID EXPENSES					
				DATE			Outstanding Balance of Debt	
Name of Creditor ERIC J. MIKOVCH			мо	DAY	YEAR			
Mailing Address 10290 IVAREA RD			10	25	2023	\$	30,000.00	
City CRANESVILLE	State	Zip Code (Plus 4)	Description of Debt					
GIV III ES VILLE	PA	16410	CANDIDATE PAID EXPENSES					
			ı				PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	237,671.63	