

# 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 :		20220253		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF CHELSEA OLIVER													
Street Address: PO BOX 273													
City: CORRY						State: PA				Zip Code: 16407			
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	✓	No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	✓	No		
	ANNUAL REPORT	7. X	Year 2023	FILING METHOD ( ) CHECK ONE				PAPER	✓	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	DEM 25				
						11	7	2023	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		1	1	2023		12	31	2023					
A. Amount Brought Forward From Last Report						\$ 23,710.95							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 0.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 23,710.95							
D. Total Expenditures (From Schedule III)						\$ 23,710.95							
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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF CHELSEA OLIVER	From: <u>1/1/2023</u> To: <u>12/31/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 0.00
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<div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>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.</div>	
Name of Filing Committee or Candidate	Reporting Period
	From: To:
DATEAMOUNT	

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

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

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

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

<b>PAGE TOTAL</b>
\$ 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	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF CHELSEA OLIVER		From: <u>1/1/2023</u> To: <u>12/31/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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	\$ 0.00
Mailing Address						
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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF CHELSEA OLIVER	From <u>1/1/2023</u> To: <u>12/31/2023</u>

DATE				AMOUNT
<b>To Whom Paid</b> Vantiv, LLC	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8500 Governors Hill Drive	1	2	2023	\$ 50.00
<b>City</b> Symmes Township	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Description of Expenditure</b> Fees	
<b>To Whom Paid</b> Vantiv, LLC	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8500 Governors Hill Drive	1	15	2023	\$ 100.00
<b>City</b> Symmes Township	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Description of Expenditure</b> Fees	
<b>To Whom Paid</b> Vantiv, LLC	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8500 Governors Hill Drive	1	31	2023	\$ 75.00
<b>City</b> Symmes Township	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Description of Expenditure</b> Fees	
<b>To Whom Paid</b> Vantiv, LLC	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8500 Governors Hill Drive	2	1	2023	\$ 20.00
<b>City</b> Symmes Township	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Description of Expenditure</b> Fees	
<b>To Whom Paid</b> Vantiv, LLC	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 8500 Governors Hill Drive	2	15	2023	\$ 100.00
<b>City</b> Symmes Township	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 45249	<b>Description of Expenditure</b> Fees	

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 25.00
Mailing Address 8500 Governors Hill Drive			2	28	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fee			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 100.00
Mailing Address 8500 Governors Hill Drive			3	1	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 50.00
Mailing Address 8500 Governors Hill Drive			3	15	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 25.00
Mailing Address 8500 Governors Hill Drive			3	31	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 75.00
Mailing Address 8500 Governors Hill Drive			4	1	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 0.93
Mailing Address 8500 Governors Hill Drive			1	2	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 1.24
Mailing Address 8500 Governors Hill Drive			1	10	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 0.80
Mailing Address 8500 Governors Hill Drive			2	9	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 50.00
Mailing Address 8500 Governors Hill Drive			4	15	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 100.00
Mailing Address 8500 Governors Hill Drive			3	15	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 200.00
Mailing Address 8500 Governors Hill Drive			5	1	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Vantiv, LLC			MO	DAY	YEAR	\$ 400.00
Mailing Address 8500 Governors Hill Drive			5	15	2023	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 1,024.64
Mailing Address 525 20th Street			1	31	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 3,000.00
Mailing Address 525 20th Street			2	28	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 525 20th Street			3	31	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 320.98
Mailing Address 525 20th Street			3	15	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 151.53
Mailing Address 525 20th Street			1	8	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 12.38
Mailing Address 525 20th Street			1	12	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 268.55
Mailing Address 525 20th Street			2	24	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 31.92
Mailing Address 525 20th Street			3	20	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 150.00
Mailing Address 525 20th Street			4	15	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 1,700.00
Mailing Address 525 20th Street			4	30	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 3,300.00
Mailing Address 525 20th Street			5	15	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 3,000.00
Mailing Address 525 20th Street			5	31	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 525 20th Street			6	15	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid Gusto			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 525 20th Street			6	30	2023	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll			

To Whom Paid USPS			MO	DAY	YEAR	\$ 41.74
Mailing Address 101 S Center St			1	5	2023	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Postage			

To Whom Paid South Shore Wine Company			MO	DAY	YEAR	\$ 25.00
Mailing Address 1120 Freeport Rd			3	15	2023	
City North East	State PA	Zip Code (Plus 4) 16428	Description of Expenditure Event supplies			

To Whom Paid Library Bar & Grill			MO	DAY	YEAR	\$ 25.00
Mailing Address 203 N Center St			3	15	2023	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Event			

To Whom Paid Edinboro Hotel Bar			MO	DAY	YEAR	\$ 28.83
Mailing Address 100 Meadville St			3	15	2023	
City Edinboro	State PA	Zip Code (Plus 4) 16412	Description of Expenditure Event			



To Whom Paid Walmart			MO	DAY	YEAR	\$ 25.00
Mailing Address 961 E Columbus Ave			3	15	2023	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Gift Card			

To Whom Paid Walmart			MO	DAY	YEAR	\$ 28.26
Mailing Address 961 E Columbus Ave			3	15	2023	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Prints			

To Whom Paid Walmart			MO	DAY	YEAR	\$ 28.83
Mailing Address 961 E Columbus Ave			3	20	2023	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Supplies			

To Whom Paid Walmart			MO	DAY	YEAR	\$ 17.01
Mailing Address 961 E Columbus Ave			4	15	2023	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Office supplies			

To Whom Paid Full Circle Winery			MO	DAY	YEAR	\$ 245.00
Mailing Address 12 Main St E			3	16	2023	
City Girard	State PA	Zip Code (Plus 4) 16417	Description of Expenditure Event			

To Whom Paid Chelcie Alcorn			MO	DAY	YEAR	\$ 1,400.00
Mailing Address 5051 Eastwind Lane			12	6	2023	
City Erie	State PA	Zip Code (Plus 4) 16506	Description of Expenditure Consulting Fee			

<b>To Whom Paid</b> Chelcie Alcorn			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 5051 Eastwind Lane			12	6	2023	
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506	<b>Description of Expenditure</b> Reimbursement			
<b>To Whom Paid</b> Chelcie Alcorn			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 5051 Eastwind Lane			12	6	2023	
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506	<b>Description of Expenditure</b> Reimbursement			
<b>To Whom Paid</b> Chelcie Alcorn			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 5051 Eastwind Lane			12	6	2023	
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506	<b>Description of Expenditure</b> Reimbursement			
<b>To Whom Paid</b> Chelcie Alcorn			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 5051 Eastwind Lane			12	6	2023	
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506	<b>Description of Expenditure</b> Reimbursement			
<b>To Whom Paid</b> Your Daily Serving			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 51 W Congress St			3	15	2023	
<b>City</b> Corry	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16407	<b>Description of Expenditure</b> Food			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 23,710.95

