

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20180238		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF BOB MERSKI												
<b>Street Address:</b> P.O. BOX 667												
<b>City:</b> ERIE						<b>State:</b> PA			<b>Zip Code:</b> 16512			
<b>TYPE OF REPORT</b>  (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. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2024	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	2	STH	DEM	25
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		5	14	2024		9	16	2024				
<b>A. Amount Brought Forward From Last Report</b>						\$ 34,399.71						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 25,286.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 59,685.71						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 1,290.00						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 58,395.71						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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 BOB MERSKI	From: <u>5/14/2024</u> To: <u>9/16/2024</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>	\$ 125.00
<b>All Other Contributions (Part B)</b>	\$ 3,275.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 3,400.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 13,011.00
<b>All Other Contributions (Part D)</b>	\$ 8,875.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 21,886.00

<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>	\$ 25,286.00
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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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF BOB MERSKI	<b>Reporting Period</b>  <b>From:</b> <u>5/14/2024</u> <b>To:</b> <u>9/16/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><b>DATE</b></td> <td style="width: 40%;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> HIGHMARK PAC	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b> PO BOX 890089	9	12	2024	
<b>City</b> CAMP HILL <b>State</b> PA <b>Zip Code (Plus 4)</b> 170890089				

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

<b>PAGE TOTAL</b>
\$ 125.00

## 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BOB MERSKI	From: <u>5/14/2024</u> To: <u>9/16/2024</u>

				DATE			AMOUNT
Full Name of Contributor JOHN W ALBERSTADT JR				MO	DAY	YEAR	\$ 125.00
Mailing Address 3243 GEORGINA CT				9	7	2024	
City ERIE	State PA	Zip Code (Plus 4) 165061167					
Full Name of Contributor JOHN J. BARBER				MO	DAY	YEAR	\$ 125.00
Mailing Address 4895 THOROUGHbred LOOP				9	4	2024	
City ERIE	State PA	Zip Code (Plus 4) 165066609					
Full Name of Contributor HAROLD J. BENDER				MO	DAY	YEAR	\$ 250.00
Mailing Address 551 OLD MILL RD				9	7	2024	
City ERIE	State PA	Zip Code (Plus 4) 165051034					
Full Name of Contributor GREGORY F ENGEL				MO	DAY	YEAR	\$ 250.00
Mailing Address 3222 GEORGIAN CT				9	10	2024	
City ERIE	State PA	Zip Code (Plus 4) 165061116					
Full Name of Contributor KATHLEEN A FATICA				MO	DAY	YEAR	\$ 125.00
Mailing Address 4623 SOUTHERN DR				9	1	2024	
City ERIE	State PA	Zip Code (Plus 4) 165061537					
Full Name of Contributor MICHAEL A. FETZNER				MO	DAY	YEAR	\$ 250.00
Mailing Address 120 W 10TH ST				9	1	2024	
City ERIE	State PA	Zip Code (Plus 4) 165011410					

Full Name of Contributor MICHAEL HAMMEL				MO	DAY	YEAR	\$ 250.00
Mailing Address 7671 FAIRFIELD DR				9	10	2024	
City FAIRVIEW	State PA	Zip Code (Plus 4) 164151202					
Full Name of Contributor EDWARD HESS				MO	DAY	YEAR	\$ 250.00
Mailing Address 154 KRAUS DR				8	30	2024	
City ERIE	State PA	Zip Code (Plus 4) 165111581					
Full Name of Contributor GEORGE LYONS				MO	DAY	YEAR	\$ 125.00
Mailing Address 4910 PEACH ST				8	30	2024	
City ERIE	State PA	Zip Code (Plus 4) 165092012					
Full Name of Contributor FRED RUSH				MO	DAY	YEAR	\$ 125.00
Mailing Address 413 CHERRY ST				9	10	2024	
City ERIE	State PA	Zip Code (Plus 4) 165071135					
Full Name of Contributor ERIN SEKERAK				MO	DAY	YEAR	\$ 250.00
Mailing Address 1261 TOWER LN				9	4	2024	
City ERIE	State PA	Zip Code (Plus 4) 165052535					
Full Name of Contributor ANDREW J. SISINNI				MO	DAY	YEAR	\$ 125.00
Mailing Address 1314 GROSWOLD PLZ				9	6	2024	
City ERIE	State PA	Zip Code (Plus 4) 165011743					
Full Name of Contributor BERNARD J SLOMSKI				MO	DAY	YEAR	\$ 125.00
Mailing Address 3227 REGIS DR				9	1	2024	
City ERIE	State PA	Zip Code (Plus 4) 165102612					
Full Name of Contributor DAVE SLOMSKI				MO	DAY	YEAR	\$ 125.00
Mailing Address 8012 DRIFTWOOD DR				8	30	2024	
City ERIE	State PA	Zip Code (Plus 4) 165111649					
Full Name of Contributor SAM TALARICO				MO	DAY	YEAR	\$ 125.00
Mailing Address 4120 HARVARD RD				8	30	2024	
City ERIE	State PA	Zip Code (Plus 4) 165091037					

Full Name of Contributor				MO	DAY	YEAR	\$	250.00
DAVID TULLIO								
Mailing Address				9	11	2024		
4422 UPLAND DR		State	Zip Code (Plus 4)					
City		ERIE	PA	165091655				

Full Name of Contributor				MO	DAY	YEAR	\$	150.00
MICHAEL VICTOR								
Mailing Address				9	16	2024		
4851 WOLF RD		State	Zip Code (Plus 4)					
City		ERIE	PA	165051337				

Full Name of Contributor				MO	DAY	YEAR	\$	250.00
PAUL WOJCIK								
Mailing Address				9	8	2024		
3613 ANNE MARIE DR		State	Zip Code (Plus 4)					
City		ERIE	PA	165066025				

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

**PAGE TOTAL**

\$ 3,275.00

# 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BOB MERSKI	<b>From:</b> <u>5/14/2024</u> <b>To:</b> <u>9/16/2024</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
ERIE EIRE FIGHTERS PAC				9	6	2024	
Mailing Address PO BOX 3576							
City ERIE	State PA	Zip Code (Plus 4) 165080576					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 2,000.00
ERIE INSURANCE PAC				8	13	2024	
Mailing Address PO BOX 1699							
City ERIE	State PA	Zip Code (Plus 4) 165301000					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 625.00
FRIENDS OF TEAMSTERS 397 PAC FUND				9	10	2024	
Mailing Address 1344 E 11TH ST							
City ERIE	State PA	Zip Code (Plus 4) 165031716					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
LPAC				9	9	2024	
Mailing Address 120 W 10TH ST							
City ERIE	State PA	Zip Code (Plus 4) 165011410					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA ACADEMY OF OPHTHALMOLOGY PAC				9	11	2024	
Mailing Address 200 N 3RD ST STE 1500							
City HARRISBURG	State PA	Zip Code (Plus 4) 171011590					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PENNSYLVANIA AFL-CIO				8	13	2024	
Mailing Address 600 N 2ND ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 171011092					

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
PENNSYLVANIA SOCIETY OF ANESTHESIOLOGIST PAC			9	6	2024	
Mailing Address	1400 N PROVIDENCE RD STE 1040					
City	MEDIA	State	PA	Zip Code (Plus 4)	190632079	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 886.00
SELENA FOR PA			5	17	2024	
Mailing Address	PO BOX 834					
City	ERIE	State	PA	Zip Code (Plus 4)	165120834	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
SHEET METAL WORKERS LOCAL UNION 12 PAF			9	12	2024	
Mailing Address	1200 GULF LAB RD STE 4					
City	PITTSBURGH	State	PA	Zip Code (Plus 4)	152381311	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 5,000.00
THE LH PAC			9	3	2024	
Mailing Address	1238 SAINT MARY DR					
City	ERIE	State	PA	Zip Code (Plus 4)	165092949	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
TROOPERS ASSOCIATION PAC			9	9	2024	
Mailing Address	3625 VARTAN WAY					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171109439	

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

<b>PAGE TOTAL</b>
\$ 13,011.00

**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.)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BOB MERSKI	<b>From:</b> <u>5/14/2024</u> <b>To:</b> <u>9/16/2024</u>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 500.00
MARY SUSAN DELAURA				9	14	2024	
Mailing Address 33 ACTON ST APT 2		City ARLINGTON	State MA				
Employer Name ARLINGTON SCHOOL DISTRICT				Occupation TEACHER			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
33 ACTON STAPT 2			ARLINGTON		MA	024766038	
Full Name of Contributor				MO	DAY	YEAR	\$ 375.00
ANN DITULLIO				9	4	2024	
Mailing Address 2323 EDINBORO RD UNIT GH3		City ERIE	State PA				
Employer Name NONE				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
2323 EDINBORO RDUNIT GH3			ERIE		PA	165093499	
Full Name of Contributor				MO	DAY	YEAR	\$ 1,000.00
THOMAS B. HAGEN				9	3	2024	
Mailing Address 5727 GRUBB RD		City ERIE	State PA				
Employer Name ERIE INSURANCE				Occupation CHAIRMAN			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
100 ERIE INSURANCE PL			ERIE		PA	165309000	
Full Name of Contributor				MO	DAY	YEAR	\$ 2,500.00
PHIL KATEN				9	4	2024	
Mailing Address 522 SEMINOLE DR		City ERIE	State PA				
Employer Name PLASTIKO/ MICRO MOLD				Occupation GENERAL MANAGER			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
4820 PITTSBURGH AVE			ERIE		PA	165096217	

<b>Full Name of Contributor</b> ROGER RICHARDS			<b>MO</b> 9	<b>DAY</b> 12	<b>YEAR</b> 2024	<b>\$</b> 2,500.00
<b>Mailing Address</b> 230 W 6TH ST						
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165071319				
<b>Employer Name</b> RICHARDS AND ASSOCIATES			<b>Occupation</b> ATTORNEY			
<b>Employer Mailing Address/Principal Place of Business</b> 230 W 6TH ST		<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165071319		

  

<b>Full Name of Contributor</b> GREGORY RUBINO			<b>MO</b> 9	<b>DAY</b> 1	<b>YEAR</b> 2024	<b>\$</b> 1,000.00
<b>Mailing Address</b> 4832 WOLF RD						
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165051338				
<b>Employer Name</b> PASSPORT REALTY			<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b> 240 W 11TH ST STE B050		<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165011758		

  

<b>Full Name of Contributor</b> JAMES P. WALCZAK			<b>MO</b> 8	<b>DAY</b> 31	<b>YEAR</b> 2024	<b>\$</b> 1,000.00
<b>Mailing Address</b> 11804 OLD LAKE RD						
<b>City</b> NORTH EAST	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 164283342				
<b>Employer Name</b> MACDONALD ILLIG JONES & BRI			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b> 11804 OLD LAKE RD		<b>City</b> NORTH EAST	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 164283342		

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

**PAGE TOTAL****\$** 8,875.00

## 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 BOB MERSKI		From: <u>5/14/2024</u> To: <u>9/16/2024</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: <span style="float: right;">To:</span>
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			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.						<b>PAGE TOTAL</b>  \$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BOB MERSKI	From <u>5/14/2024</u> To: <u>9/16/2024</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
CATHEDRAL PREP FOOTBALL BOOSTERS				
<b>Mailing Address</b> 250 W 10TH ST	6	20	2024	\$ 150.00
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165011412	<b>Description of Expenditure</b> JEFF BOMBA MEMORIAL TOURNAMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
COMMUNITY OF CARING				
<b>Mailing Address</b> 245 E 8TH ST	6	2	2024	\$ 150.00
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165031003	<b>Description of Expenditure</b>	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ERIE AFL-CIO COPE FUND				
<b>Mailing Address</b> 1701 STATE ST	8	14	2024	\$ 40.00
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165012222	<b>Description of Expenditure</b> PICNIC	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ERIE COUNTY DEMOCRATIC PARTY				
<b>Mailing Address</b> 1305 STATE ST	7	25	2024	\$ 50.00
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165011915	<b>Description of Expenditure</b> PICNIC	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ERIE COUNTY FEDERATION OF CLUBS				
<b>Mailing Address</b>	8	4	2024	\$ 40.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> STEAK FRY	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ERIE LIONS CLUB				
<b>Mailing Address</b> 2445 W 26TH ST	6	2	2024	\$ 100.00
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165063261	<b>Description of Expenditure</b>	

<b>To Whom Paid</b> GREAT LAKES BUILDING TRADE PAF			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 100.00
<b>Mailing Address</b> 185 PENNBRIAR DR			6	20	2024	
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165096651	<b>Description of Expenditure</b> GOLF HOLE SPONSOR			

<b>To Whom Paid</b> HOLY TRINITY CHURCH			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 300.00
<b>Mailing Address</b> 2220 REED ST			8	20	2024	
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165032138	<b>Description of Expenditure</b> ZABAWA AD			

<b>To Whom Paid</b> LEADERS OF FAITH			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 100.00
<b>Mailing Address</b> 2917 N FRONT ST			6	2	2024	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171101223	<b>Description of Expenditure</b> PA PRAYER BREAKFAST			

<b>To Whom Paid</b> MAKE A WISH FOUNDATION			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 260.00
<b>Mailing Address</b> 717 INDIANA DR			8	15	2024	
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 165054409	<b>Description of Expenditure</b> SOFTBALL TOURNAMENT SPONSOR			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 1,290.00

**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

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF BOB MERSKI	<b>Reporting Period</b>  From: <u>5/14/2024</u> To: <u>9/16/2024</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor ROBERT E MERSKI				MO	DAY	YEAR	\$ 37,000.00
Mailing Address 625 JAMES ST				5	2	2017	
City ERIE		State PA	Zip Code (Plus 4) 165091619	Description of Debt LOAN RECEIVED			
Name of Creditor NATIONAL FUEL				MO	DAY	YEAR	\$ 33.13
Mailing Address 6363 MAIN ST				2	6	2019	
City WILLIAMSVILLE		State NY	Zip Code (Plus 4) 142215855	Description of Debt OVER PAYMENT			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 37,033.13