

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/>	Committee		Lobbyist	
Name of Filing Committee, Candidate or Lobbyist		DANERI FOR DA					
Street Address		P.O. BOX 344					
City	ERIE	State	PA	Zip Code	16512		

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date Of Election (MM/DD/YYYY)	Year	Amendment Report		Termination Report	
		<input type="checkbox"/>		<input type="checkbox"/>	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	10.21.2019	11.25.2019	<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> 2019 DEC -4 PM 3:44 ERIE COUNTY VOTER REGISTRATION </div>
A. Amount Brought Forward From Last Report	\$	14,215.90	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	- 0 -	
C. Total Funds Available (Sum of Lines A and B)	\$	14,215.90	
D. Total Expenditures (From Schedule III)	\$	100.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	14,115.90	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	- 0 -	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	- 0 -	

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 on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

2nd day of DECEMBER 20 19

Anne Styn
Signature

My Commission expires MAY 21 2020
MO. DAY YR.

John H Daneri

Signature of Person Submitting report

JOHN H. DANERI

Printed Name

814 392-6784

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

My Commission expires _____
MO. DAY YR.

Signature of Candidate

Printed Name

Area Code

Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
 Anne Styn, Notary Public
 City of Erie, Erie County
 My Commission Expires May 21, 2020
 MEMBER PENNSYLVANIA ASSOCIATION OF NOTARIES

**SCHEDULE III
Statement of Expenditures**

File Identification Number: _____

To Whom Paid	ERIE COUNTY REPUBLICAN PARTY				Date (MM/DD/YYYY)	11.1.2019	\$	100.—
House #	Street Address	City	State	Zip Code	Description of Expenditure			
	P.O. BOX 1144	ERIE	PA	16512	DONATION			

To Whom Paid					Date (MM/DD/YYYY)		\$	
House #	Street Address	City	State	Zip Code	Description of Expenditure			

To Whom Paid					Date (MM/DD/YYYY)		\$	
House #	Street Address	City	State	Zip Code	Description of Expenditure			

To Whom Paid					Date (MM/DD/YYYY)		\$	
House #	Street Address	City	State	Zip Code	Description of Expenditure			

To Whom Paid					Date (MM/DD/YYYY)		\$	
House #	Street Address	City	State	Zip Code	Description of Expenditure			

To Whom Paid					Date (MM/DD/YYYY)		\$	
House #	Street Address	City	State	Zip Code	Description of Expenditure			

To Whom Paid					Date (MM/DD/YYYY)		\$	
House #	Street Address	City	State	Zip Code	Description of Expenditure			

To Whom Paid					Date (MM/DD/YYYY)		\$	
House #	Street Address	City	State	Zip Code	Description of Expenditure			