

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	Committee	<input checked="" type="checkbox"/> Lobbyist
Name of Filing Committee, Candidate or Lobbyist COM. TO RE-ELECT FIORE LEONE				
Street Address 1364 W. 32ND ST				
City ERIE	State PA	Zip Code 16508		

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

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only	
		1-31-19	5-6-19	
A. Amount Brought Forward From Last Report	\$	3017. ³¹	<p style="writing-mode: vertical-rl; transform: rotate(180deg);"> 2019 MAY -6 AM 9:34 EMERGENCY VOTER REGISTRATION </p>	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	3550. ³¹		
C. Total Funds Available (Sum of Lines A and B)	\$	6567. ³¹		
D. Total Expenditures (From Schedule III)	\$	3933. ³³		
E. Ending Cash Balance (Subtract Line D from Line C)	\$	2633. ⁹⁸		
F. Value of In-Kind Contributions Received (From Schedule II)	\$			
G. Unpaid Debts and Obligations (From Schedule IV)	\$			

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 6th day of May 2019

Lana R. Wright Signature

DIANE LEONE Signature of Person Submitting report
Printed Name

814 Area Code 864-6306 Daytime Telephone Number

Commonwealth of Pennsylvania - Notary Seal
My Commission Expires March 19, 2022

Part II- If this is a Candidate's Affiliated Committee, candidate shall sign here.

I swear (or affirm) that this report, including the attached schedules on paper, is 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 6th day of May 2019

Lana R. Wright Signature

FIORE LEONE Signature of Candidate
Printed Name

814 Area Code 864-6306 Daytime Telephone Number

Commonwealth of Pennsylvania - Notary Seal
My Commission Expires March 19, 2022
Commission number 1182495

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number	
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1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor

Total for the reporting period <i>MIKE DEDAD</i>	(1)	\$	<i>50.⁰⁰</i>
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2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)

Contributions Received from Political Committees (Part A)	\$	
All Other Contributions (Part B)	\$	<i>500.⁰⁰</i>
Total for the reporting period	(2)	\$ <i>500</i>

3. Contributions Over \$250.00 (From Part C and Part D)

Contributions Received from Political Committees (Part C)	\$	<i>2500.⁰⁰</i>
All Other Contributions (Part D)	\$	<i>500.⁰⁰</i>
Total for the reporting period	(3)	\$ <i>3000</i>

4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)

Total for the reporting period	(4)	\$	—
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Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>	\$	<i>3550.⁰⁰</i>
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PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Contributor Identification Number:									
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
NANCY ORLAND					04/12/2019				
House #		Street Address			Date [MM/DD/YYYY]		\$		
4216		TRASK AVE							
City		State	Zip Code		Date [MM/DD/YYYY]		\$		
ERIE		PA.	16508				250. ⁰⁰		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
CARL ANDERSON III					04/07/2019		250. ⁰⁰		
House #		Street Address			Date [MM/DD/YYYY]		\$		
3830		PARADE STREET							
City		State	Zip Code		Date [MM/DD/YYYY]		\$		
ERIE		PA	16504						
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address			Date [MM/DD/YYYY]		\$		
City		State	Zip Code		Date [MM/DD/YYYY]		\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address			Date [MM/DD/YYYY]		\$		
City		State	Zip Code		Date [MM/DD/YYYY]		\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address			Date [MM/DD/YYYY]		\$		
City		State	Zip Code		Date [MM/DD/YYYY]		\$		
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address			Date [MM/DD/YYYY]		\$		
City		State	Zip Code		Date [MM/DD/YYYY]		\$		

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 over \$250.00 in the reporting period.

filer Identification Number:

Full Name of Contributing Committee		NORTHWEST GOOD GOV. PAC			Date [MM/DD/YYYY]	\$	2500. ⁰⁰
House #	100	Street Address	STATE ST. SUITE 440		Date [MM/DD/YYYY]	\$	
City	ERIE	State	PA	Zip Code	16507	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$

PART D
All Other Contributions
 Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
 (Exclude contributions from political committees reported in Part C)

Identification Number: _____

Full Name of Contributor				Date [MM/DD/YYYY]		\$
THOMAS TALARICO				04/17/2019		
House #	Street Address		Date [MM/DD/YYYY]		\$	
230	WEST 6 th ST.					
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
ERIE	PA	16507			500. ⁰⁰	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						
Full Name of Contributor				Date [MM/DD/YYYY]		\$
House #	Street Address		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Date [MM/DD/YYYY]		\$	
Employer Name				Occupation		
Employer Mailing Address / Principal Place of Business						

SCHEDULE III
Statement of Expenditures

Filer Identification Number: _____

To Whom Paid		ERIE COUNTY			Date [MM/DD/YYYY]	\$	35.00
House #	140	Street Address	W. 6TH ST.		Description of Expenditure		
City	ERIE	State	PA	Zip Code	16501	VOTER DISC CK# 106	
To Whom Paid		POSTMASTER (STAMPS)			Date [MM/DD/YYYY]	\$	55.00
House #	3607	Street Address	POPLAR ST.		Description of Expenditure		
City	ERIE	State	PA	Zip Code	16508	MAILING FOR YR SIGNS CK# 107	
To Whom Paid		DE SANTIS SIGNS			Date [MM/DD/YYYY]	\$	700.00
House #	540	Street Address	WEST 18TH ST.		Description of Expenditure		
City	ERIE	State	PA	Zip Code	16502	PARTIAL PAY FOR SIGNS CK# 108	
To Whom Paid		COM. TO ELECT ERIN CONNELLY			Date [MM/DD/YYYY]	\$	50.00
House #		Street Address	JUDGE CANDIDATE		Description of Expenditure		
City		State		Zip Code		PARTY @ YACHT CLUB CK# 109	
To Whom Paid		POSTMASTER (FIORE LEONE)			Date [MM/DD/YYYY]	\$	150.00
House #	3607	Street Address	POPLAR ST.		Description of Expenditure		
City	ERIE	State	PA	Zip Code	16508	STAMPS @ 110.00 PA. CASH + REIMBURSED SELF CK# 110	
To Whom Paid		POSTMASTER			Date [MM/DD/YYYY]	\$	55.00
House #	3607	Street Address	POPLAR ST.		Description of Expenditure		
City	ERIE	State	PA	Zip Code	16508	MAILING - SIGNS ETC CK# 111	
To Whom Paid		BIROSCAK PRINTING			Date [MM/DD/YYYY]	\$	50.88
House #	1919	Street Address	PEACH ST.		Description of Expenditure		
City	ERIE	State	PA	Zip Code	16502	TICKETS FOR PARTY CK# 112	
To Whom Paid		DE SANTIS SIGNS			Date [MM/DD/YYYY]	\$	772.52
House #	540	Street Address	W. 18TH ST		Description of Expenditure		
City	ERIE	State	PA	Zip Code	16502	FINAL PAYMENT FOR SIGNS CK# 113	

**SCHEDULE III
Statement of Expenditures**

Filer Identification Number: _____

To Whom Paid		DESANTIS SIGNS (PAT DECK)			Date [MM/DD/YYYY]	\$	
House #	540	Street Address	W. 18TH ST.		04/12/2019		100.00
City	ERIE	State	PA	Zip Code	16502		
To Whom Paid		ERIE CO. DEM. PARTY			Date [MM/DD/YYYY]	\$	
House #	1305	Street Address	STATE ST.		04/14/2019		40.00
City	ERIE	State	PA	Zip Code	16501		
To Whom Paid		NUOVA AURORA			Date [MM/DD/YYYY]	\$	
House #	1518	Street Address	WALNUT ST.		04/17/2019		1329.93
City	ERIE	State	PA	Zip Code	16501		
To Whom Paid		NUOVA AURORA			Date [MM/DD/YYYY]	\$	
House #	1518	Street Address	WALNUT ST.		04/17/2019		232.00
City	ERIE	State	PA	Zip Code	16501		
To Whom Paid		C.A.M (F.V. CHANNEL)			Date [MM/DD/YYYY]	\$	
House #	142	Street Address	W. 12TH ST.		04/18/2019		50.00
City	ERIE	State	PA	Zip Code	16501		
To Whom Paid		WZTE - RADIO			Date [MM/DD/YYYY]	\$	
House #		Street Address	UNION - CITY		04/30/2019		350.00
City	ERIE	State	PA	Zip Code	16501		
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address					
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address					
City		State		Zip Code			