



Campaign Finance Report

305978

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

Filer Identification Number : 2019C0222		Report Filed By : CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>						
Name of Filing Committee, Candidate or Lobbyist: SALA, PETER J										
Street Address: 1637 WEST 24TH STREET										
City: ERIE		State: PA		Zip Code: 16502						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2019	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
JUDGE OF THE COURT OF COMMON PLEAS				MO	DAY	YEAR	6	CPJ	DEM	25
				11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	21	2019		5	6	2019		
A. Amount Brought Forward From Last Report				\$			0.00			
B. Total Monetary Contributions And Receipts (From Schedule I)				\$			0.00			
C. Total Funds Available (Sum Of Lines A and B)				\$			0.00			
D. Total Expenditures (From Schedule III)				\$			3,230.04			
E. Ending Cash Balance (Subtract Line D From Line C)				\$			(3,230.04)			
F. Value Of In-Kind Contributions Received (From Schedule II)				\$			0.00			
G. Unpaid Debts And Obligations (From Schedule IV)				\$			0.00			

2019 MAY 10 PM 11:11
 ERIE COUNTY
 VOTER REGISTRATION

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 9TH day of MAY

Commonwealth of Pennsylvania - Notary Seal
 Gregory J Kern, Notary Public
 Erie County
 My commission expires October 26, 2022
 Signature number 1084295

Signature: Peter J. Sala
 Printed Name: Peter J. Sala
 Email: pjsalaw@yahoo.com
 Area Code: 814 Daytime Telephone Number: 1897-6772

My Commission Expires: 10 MO 26 DAY 2022 YR

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 9TH day of MAY

Commonwealth of Pennsylvania - Notary Seal
 Gregory J Kern, Notary Public
 Erie County
 My commission expires October 26, 2022
 Signature number 1084295

Signature: Peter J. Sala
 Printed Name: Peter J. Sala
 Email: pjsalaw@yahoo.com
 Area Code: 814 Daytime Telephone Number: 897-6772

My Commission Expires: 10 MO 26 DAY 2022 YR

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
SALA, PETER J	From: <u>1/21/2019</u> To: <u>5/6/2019</u>

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)	\$ 0.00

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.)	\$ 0.00
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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.**

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 A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 0.00

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)

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)				

PAGE TOTAL

\$ 0.00

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

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	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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: _____ To: _____

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

PAGE TOTAL
\$ 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:	To:

Full Name	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Receipt Description				

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

PAGE TOTAL
\$ 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

Name of Filing Committee or Candidate		Reporting Period	
SALA, PETER J		From: <u>1/21/2019</u>	To: <u>5/6/2019</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
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	
Mailing Address						\$ 0.00
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:

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

Name of Filing Committee or Candidate SALA, PETER J	Reporting Period From <u>1/21/2019</u> To: <u>5/6/2019</u>
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			DATE			AMOUNT
To Whom Paid			MO	DAY	YEAR	
COUNTY OF ERIE						
Mailing Address 140 WEST 6TH STREET, 1ST FLOOR			1	25	2019	\$ 35.00
City ERIE	State PA	Zip Code (Plus 4) 16501	Description of Expenditure			
			VOTER REGISTRATION LIST			
To Whom Paid KIMKOPY PRINTING						
Mailing Address 2040 WEST 8TH STREET			1	21	2019	\$ 943.40
City ERIE	State PA	Zip Code (Plus 4) 16505	Description of Expenditure			
			SIGNS			
To Whom Paid DESANTIS SIGNS & GRAPHICS, INC.						
Mailing Address 540 W. 18TH STREET			2	4	2019	\$ 1,317.50
City ERIE	State PA	Zip Code (Plus 4) 16502	Description of Expenditure			
			SIGNS & BUTTONS			
To Whom Paid WAL-MART						
Mailing Address 5350 WEST RIDGE ROAD			3	14	2019	\$ 53.59
City ERIE	State PA	Zip Code (Plus 4) 16506	Description of Expenditure			
			INVITATIONS			
To Whom Paid LOWE'S						
Mailing Address 1930 KEYSTONE DRIVE			4	28	2019	\$ 124.83
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure			
			WOOD FOR SIGNS			

To Whom Paid OFFICE MAX			MO	DAY	YEAR	
Mailing Address 905 MILLCREEK MALL			4	26	2019	
City ERIE	State PA	Zip Code (Plus 4) 16565	Description of Expenditure ENVELOPES			
To Whom Paid AT & T			MO	DAY	YEAR	
Mailing Address 6807 PEACH ST			4	29	2019	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure PHONES			
To Whom Paid HOME DEPOT			MO	DAY	YEAR	
Mailing Address 7451 PEACH STREET			4	29	2019	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure WOOD & SCREWS FOR SIGNS			
To Whom Paid HOME DEPOT			MO	DAY	YEAR	
Mailing Address 7451 PEACH STREET			5	2	2019	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure WOOD FOR SIGNS			
To Whom Paid HOME DEPOT			MO	DAY	YEAR	
Mailing Address 7451 PEACH STREET			5	5	2019	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure WOOD FOR SIGNS			
To Whom Paid COPY KING			MO	DAY	YEAR	
Mailing Address 1162 WEST 8TH ST			3	26	2019	
City ERIE	State PA	Zip Code (Plus 4) 16502	Description of Expenditure 24x36 POSTER			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 3,230.04