

COMMONWEALTH OF PENNSYLVANIA  
INDEPENDENT EXPENDITURE REPORT  
24 Hour Reporting Form

FULL NAME OF PERSON FILING <b>Heather Hart</b>		NAME OF ORGANIZATION - IF FILED ON ONE'S BEHALF <b>Friends of Dylanna</b>	
ADDRESS (NUMBER AND STREET) <b>517 Shawnee Drive</b>		DATE OF PRIMARY OR ELECTION <b>05/18/2021</b>	
CITY <b>Erie</b>	STATE <b>PA</b>	ZIP CODE <b>16505</b>	DAYTIME TELEPHONE <b>814-860-4122</b>
E-MAIL ADDRESS <b>hhart@compassionatehart.com</b>			
TYPE OF REPORT (CHECK APPROPRIATE BLOCK)			
			<input checked="" type="checkbox"/> 24 HOUR REPORT
<input type="checkbox"/> 6 <sup>TH</sup> TUESDAY PRE-PRIMARY	<input type="checkbox"/> 2 <sup>ND</sup> FRIDAY PRE-PRIMARY	<input type="checkbox"/> 30 DAY POST- PRIMARY	<input type="checkbox"/> AMENDED REPORT
<input type="checkbox"/> 6 <sup>TH</sup> TUESDAY PRE-ELECTION	<input type="checkbox"/> 2 <sup>ND</sup> FRIDAY PRE-ELECTION	<input type="checkbox"/> 30 DAY POST-ELECTION	<input type="checkbox"/> ANNUAL REPORT

NAME OF CANDIDATE OR QUESTION <b>Dylanna Grasinger</b>	<input type="checkbox"/> SUPPORTED	<input type="checkbox"/> OPPOSED
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SUMMARY OF INDEPENDENT EXPENDITURES

PAID TO - FULL NAME AND MAILING ADDRESS	PURPOSE (DESCRIPTION OF EXPENDITURE)	DATE	AMOUNT
WSEE - 3514 State Street, Erie, PA 16508	<b>Commercials</b>	05/10/21	\$2,113.00
WICU - 3514 State Street, Erie, PA 16508	<b>Commercials</b>	05/10/21	\$705.00
WJET - 8455 Peach Street, Erie, PA 16509	<b>Commercials</b>	05/10/21	\$1,225.00

IF ADDITIONAL SPACE IS NECESSARY TO REPORT EXPENDITURES, PLEASE ATTACH AN 8 1/2" X 11" SHEET OF PAPER TO THIS FORM.

I SWEAR (OR AFFIRM) THAT THIS REPORT, INCLUDING ATTACHMENTS, ARE TO THE BEST OF MY KNOWLEDGE AND BELIEF TRUE, CORRECT AND COMPLETE.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20____ _____ SIGNATURE MY COMMISSIONS EXPIRES _____ MO. DAY YR.	<b>Heather Hart</b> Digitally signed by Heather Hart Date: 2021.05.10 14:48:47 -04'00' _____ SIGNATURE OF PERSON SUBMITTING REPORT <b>Heather Hart</b> _____ PRINTED NAME <b>814</b> <b>860-4122</b> _____                      _____ AREA CODE                      DAYTIME TELEPHONE NUMBER