



Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	274-88-1432	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of Dylanna							
Street Address		517 Shawnee Drive							
City	Erie	State	PA	Zip Code	16505				

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)	05/18/2021	Year	2021	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>
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Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only					
	January 1, 2021	May 3, 2021						
A. Amount Brought Forward From Last Report	\$	0	<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> 2021 MAY -5 PM 4: 28 ERIE COUNTY VOTER REGISTRATION </div>					
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	34,246.00						
C. Total Funds Available (Sum of Lines A and B)	\$	34,246.00						
D. Total Expenditures (From Schedule III)	\$	29775.30						
E. Ending Cash Balance (Subtract Line D from Line C)	\$	4,470.70						
F. Value of In-Kind Contributions Received (From Schedule II)	\$	578.60						
G. Unpaid Debts and Obligations (From Schedule IV)	\$	3,900.80						

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 _____ day of _____ 20____.

Signature	}	<i>Heather Hart</i> Signature of Person Submitting report Heather Hart Printed Name
My Commission expires _____ MO. DAY YR.		814 Area Code 860-4122 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	}	 Signature of Candidate Dylanna Grasinger Printed Name
My Commission expires _____ MO. DAY YR.		330 Area Code 571-1116 Daytime Telephone Number

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number	274-88-1432	
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period	(1)	\$ 270.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)		\$ 100.00
All Other Contributions (Part B)		\$ 3376.00
Total for the reporting period	(2)	\$ 3476.00
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)		\$ 500.00
All Other Contributions (Part D)		\$ 30,000.00
Total for the reporting period	(3)	\$ 30,500.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$ 0
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>		\$ 34246.00

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.

Filer Identification Number	274-88-1432
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							Amount		
Full Name of Contributing Committee					Friends to Elect Lori Pickens		Date [MM/DD/YYYY]	\$	100
							03/23/2021		
House #	1331	Street Address			West 25th Street		Date [MM/DD/YYYY]	\$	
City	Erle	State	PA	Zip Code	16502		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 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.)

Filer Identification Number:		274-88-1432					
Full Name of Contributor		Nanda Chuwan				Date [MM/DD/YYYY]	\$
						03/23/2021	101
House #	5937	Street Address		Cobblestone Drive		Date [MM/DD/YYYY]	\$
City	Erie	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Monica Westfall				Date [MM/DD/YYYY]	\$
						03/30/2021	100
House #	3910	Street Address		Greenway Drive		Date [MM/DD/YYYY]	\$
						04/25/2021	125
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$
Full Name of Contributor		MaiLien Sicari				Date [MM/DD/YYYY]	\$
						03/29/2021	150
House #	5214	Street Address		Jason Drive		Date [MM/DD/YYYY]	\$
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Abigail Grasinger				Date [MM/DD/YYYY]	\$
						03/22/2021	200
House #	10364	Street Address		Barton Road		Date [MM/DD/YYYY]	\$
City	Waterford	State	PA	Zip Code	16441	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Mark Day				Date [MM/DD/YYYY]	\$
						03/20/2021	100
House #	4341	Street Address		Riverview Road Lot 48		Date [MM/DD/YYYY]	\$
City	Peninsula	State	OH	Zip Code	44264	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Steven Irbacher				Date [MM/DD/YYYY]	\$
						04/04/2021	250
House #	1330	Street Address		Terrace Drive		Date [MM/DD/YYYY]	\$
City	Pittsburgh	State	PA	Zip Code	15228	Date [MM/DD/YYYY]	\$

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.)

Filer Identification Number:		274-88-1432					
Full Name of Contributor		Diane and Greg Morosky				Date [MM/DD/YYYY]	\$
						04/20/2021	250
House #	6710	Street Address		Knollwood Drive		Date [MM/DD/YYYY]	\$
City	Fairview	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Jane and Howard Levin				Date [MM/DD/YYYY]	\$
						04/20/2021	250
House #	100	Street Address		Lord Road		Date [MM/DD/YYYY]	\$
City	Fairview	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Julie Petrie				Date [MM/DD/YYYY]	\$
						04/22/2021	100
House #	1105	Street Address		20th Street S		Date [MM/DD/YYYY]	\$
City	Arlington	State	VA	Zip Code	22202	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Rose Nouri				Date [MM/DD/YYYY]	\$
						04/28/2021	150
House #	808	Street Address		Pasadena Drive		Date [MM/DD/YYYY]	\$
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Nick and Sally Marinelli				Date [MM/DD/YYYY]	\$
						04/28/2021	100
House #	816	Street Address		Parkside Drive		Date [MM/DD/YYYY]	\$
City	Erie	State	PA	Zip Code	16511	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Saba Berhane				Date [MM/DD/YYYY]	\$
						04/02/2021	100
House #	2312	Street Address		Brooke Grove Road		Date [MM/DD/YYYY]	\$
City	Mitchville	State	MD	Zip Code	20721	Date [MM/DD/YYYY]	\$

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.)

Filer Identification Number:	274-88-1432
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Full Name of Contributor					Date [MM/DD/YYYY]	\$	250
Matthew Parini					03/31/2021		
House #	1420	Street Address	Sumner Drive		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	250
John Melaragno					03/29/2021		
House #	850	Street Address	Bonaventure Drive		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	250
Richard Cowell					03/31/2021		
House #	5682	Street Address	East Lake Road		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16511	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	100
Dlane Chido					04/17/2021		
House #	215	Street Address	Beverly Drive		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	100
Patricia Stubber					04/15/2021		
House #	5915	Street Address	East Lake Road		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16511	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	200
Jayne Hynes					04/18/2021		
House #	900	Street Address	Persimmon Court		Date [MM/DD/YYYY]	\$	
City	Fairview	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	\$

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.)

Filer Identification Number:	274-88-1432
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Full Name of Contributor					Elizabeth and Tim McCormick		Date [MM/DD/YYYY]	\$	150
							04/28/2021		
House #	7210	Street Address			Pinegate Road		Date [MM/DD/YYYY]	\$	
City	Falrveiw	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Mary Harsh		Date [MM/DD/YYYY]	\$	100
							04/26/2021		
House #	7223	Street Address			Springside Drive		Date [MM/DD/YYYY]	\$	
City	Fairview	State	PA	Zip Code	16415	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]	\$		
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:	274-88-1432
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Full Name of Contributing Committee					Friends of Robert Yates		Date [MM/DD/YYYY]	\$	\$500
							03/16/2021		
House #	5075	Street Address			Tramarlac Lane		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	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)

Filer Identification Number:	274-88-1432
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Full Name of Contributor		Bruce Kern				Date [MM/DD/YYYY]	\$	500
						03/30/2021		
House #	1091	Street Address		Dutch Road		Date [MM/DD/YYYY]	\$	
City	Fairview	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	\$	
Employer Name		Curtze Food Service				Occupation	Owner	
Employer Mailing Address / Principal Place of Business		1717 East 12th Street Erie, PA 16511						
Full Name of Contributor		Robert Shlaudecker				Date [MM/DD/YYYY]	\$	500
						03/31/2021		
House #	225	Street Address		Rosemont Avenue		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$	
Employer Name		Self-Employed				Occupation	Psychologist	
Employer Mailing Address / Principal Place of Business		N/A						
Full Name of Contributor		Natalie Kohler				Date [MM/DD/YYYY]	\$	500
						03/31/2021		
House #	331	Street Address		Superior Drive		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$	
Employer Name		Erie Public School District				Occupation	Administrative Assistant	
Employer Mailing Address / Principal Place of Business		1480 West 21st Street Erie, PA 16502						
Full Name of Contributor		James Grasinger				Date [MM/DD/YYYY]	\$	1,000
						03/21/2021		
House #	8221	Street Address		Briercrest Drive		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$	
Employer Name		Hovls Interlor				Occupation	Sales	
Employer Mailing Address / Principal Place of Business		280 Chesnut Street Meadville, PA 16335						

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)

Filer Identification Number:	274-88-1432
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Full Name of Contributor		Judy Alstadt			Date [MM/DD/YYYY]	\$	1,000
					03/21/2021		
House #	229	Street Address	Rosement Avenue		Date [MM/DD/YYYY]	\$	5,000
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
						04/06/2021	
						04/15/2021	15,000
Employer Name		N/A			Occupation	Retired	
Employer Mailing Address / Principal Place of Business		N/A					
Full Name of Contributor		Judy Alstadt			Date [MM/DD/YYYY]	\$	5,000
					04/16/2021		
House #	229	Street Address	Rosement Avenue		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$
Employer Name		N/A			Occupation	Retired	
Employer Mailing Address / Principal Place of Business		N/A					
Full Name of Contributor		Bassam Dabbah			Date [MM/DD/YYYY]	\$	500
					05/03/2021		
House #	360	Street Address	Young Road		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$
Employer Name		USCRI Erie			Occupation	Program Coordinator	
Employer Mailing Address / Principal Place of Business		517 East 26th Street Erie PA 16504					
Full Name of Contributor		Gene Placidi			Date [MM/DD/YYYY]	\$	500
					03/28/2021		
House #	4113	Street Address	Vassar Druve		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	\$
Employer Name		Melaragno, Placidi, and Parini			Occupation	Attorney	
Employer Mailing Address / Principal Place of Business		502 West 7th Street Erie, PA 16502					

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)

Filer Identification Number:	274-88-1432
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Full Name of Contributor					Date [MM/DD/YYYY]		\$	500.00
Devl Subedi					03/21/2021			
House #	Street Address		Date [MM/DD/YYYY]		\$			
5758	Mill Street							
City	State	Zip Code	Date [MM/DD/YYYY]		\$			
Erie	PA	16509						
Employer Name			Occupation					
Age In Place Home Care			Manager					
Employer Mailing Address / Principal Place of Business			1062 Brown Ave, Erie, PA 16502					
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								

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.

Filer Identification Number:	274-88-1432
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Full Name							
House #		Street Address					
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description							
Full Name							
House #		Street Address					
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description							
Full Name							
House #		Street Address					
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description							
Full Name							
House #		Street Address					
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description							
Full Name							
House #		Street Address					
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description							
Full Name							
House #		Street Address					
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Receipt Description							

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**

Filer Identification Number:	274-88-1432
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the reporting period	(1)	\$

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the reporting period	(2)	\$ 500.00

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the reporting period	(3)	\$

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, Report Cover Page, Item F)	\$
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SCHEDULE II
PART F
In-Kind Contributions Received
VALUE OF \$50.01 TO \$250

Filer Identification Number:	274-88-1432
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Full Name of Contributor					Date [MM/DD/YYYY]		\$
Matt Mead					03/23/2021		250.00
House #	1821	Street Address			Date [MM/DD/YYYY]		\$
		Oxford Street			03/29/2021		250.00
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	
						\$	
Description of Contribution							
Photography sessions							

Full Name of Contributor					Date [MM/DD/YYYY]		\$
Dylanna Grasinger					03/17/2021		78.60
House #	517	Street Address			Date [MM/DD/YYYY]		\$
		Shawnee Drive					
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	
						\$	
Description of Contribution							
Campaign Buttons							

Full Name of Contributor					Date [MM/DD/YYYY]		\$
House #		Street Address			Date [MM/DD/YYYY]		\$
City		State		Zip Code		Date [MM/DD/YYYY]	
						\$	
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]		\$
House #		Street Address			Date [MM/DD/YYYY]		\$
City		State		Zip Code		Date [MM/DD/YYYY]	
						\$	
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]		\$
House #		Street Address			Date [MM/DD/YYYY]		\$
City		State		Zip Code		Date [MM/DD/YYYY]	
						\$	
Description of Contribution							

SCHEDULE II
Part G

In-Kind Contributions Received
VALUE OVER \$250

Filer Identification Number:	274-88-1432
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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					Description of Contribution		

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					Description of Contribution		

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					Description of Contribution		

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					Description of Contribution		

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	274-88-1432
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To Whom Paid		Anthony Angelone			Date [MM/DD/YYYY]		\$		144.80	
					03/30/2021					
House #	522	Street Address		Colorado Drive			Description of Expenditure			
City	Erie	State	PA	Zip Code	16505		County map			
To Whom Paid		Dylanna Grasinger			Date [MM/DD/YYYY]		\$		500.00	
					04/27/2021					
House #	517	Street Address		Shawnee Drive			Description of Expenditure			
City	Erie	State	PA	Zip Code	16505		Reimbursement for website			
To Whom Paid		Dylanna Grasinger			Date [MM/DD/YYYY]		\$		705.22	
					04/27/2021					
House #	517	Street Address		Shawnee Drive			Description of Expenditure			
City	Erie	State	PA	Zip Code	16505		Reimbursement for t-shirts			
To Whom Paid		Dylanna Grasinger			Date [MM/DD/YYYY]		\$		150.00	
					04/27/2021					
House #	517	Street Address		Shawnee Drive			Description of Expenditure			
City	Erie	State	PA	Zip Code	16505		Reimbursement for event			
To Whom Paid		US Postmaster			Date [MM/DD/YYYY]		\$		3506.14	
					04/7/2021					
House #	4721	Street Address		Hinckley Industrial Parkway			Description of Expenditure			
City	Cleveland	State	OH	Zip Code	44109		Postage for 1st mailing			
To Whom Paid		Pony Express			Date [MM/DD/YYYY]		\$		14.32	
					04/07/2021					
House #	1903	Street Address		West 8th Street			Description of Expenditure			
City	Erie	State	PA	Zip Code	16505		Fed Ex Fee			
To Whom Paid		Northern Ohio Printing			Date [MM/DD/YYYY]		\$		1294.00	
					04/10/2021					
House #	4721	Street Address		Hinckley Industrial Parkway			Description of Expenditure			
City	Cleveland	State	OH	Zip Code	44109		Door hangers printed			
To Whom Paid		Northern Ohio Printing			Date [MM/DD/YYYY]		\$		2061.00	
					04/14/2021					
House #	4721	Street Address		Hinckley Industrial Parkway			Description of Expenditure			
City	Cleveland	State	OH	Zip Code	44109		1st and 2nd mailers and 1st mailer addresses			

**SCHEDULE III
Statement of Expenditures**

Filer Identification Number:	274-88-1432
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To Whom Paid		WJET			Date [MM/DD/YYYY]	\$	3825.00
					04/16/2021		
House #	8455	Street Address	Peach Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16509	Commercials	
To Whom Paid		WICU			Date [MM/DD/YYYY]	\$	2452.00
					04/19/2021		
House #	3514	Street Address	State Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16508	Commercials	
To Whom Paid		WSEE			Date [MM/DD/YYYY]	\$	4270.00
					04/19/2021		
House #	3514	Street Address	State Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16508	Commercials	
To Whom Paid		R Frank Media			Date [MM/DD/YYYY]	\$	3000.00
					04/23/2021		
House #	1940	Street Address	West 8th Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16505	Commercial Production	
To Whom Paid		WICU			Date [MM/DD/YYYY]	\$	848.70
					04/30/2021		
House #	3514	Street Address	State Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16508	Commercials	
To Whom Paid		WSEE			Date [MM/DD/YYYY]	\$	1587.22
					04/30/2021		
House #	3514	Street Address	State Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16508	Commercials	
To Whom Paid		WJET			Date [MM/DD/YYYY]	\$	2791.00
					04/30/2021		
House #	8455	Street Address	Peach Street		Description of Expenditure		
City	Erie	State	PA	Zip Code	16505	Commercials	
To Whom Paid		US Postmaster			Date [MM/DD/YYYY]	\$	2571.83
					05/01/2021		
House #	4721	Street Address	Hinckley Industrial Parkway		Description of Expenditure		
City	Cleveland	State	OH	Zip Code	44109	Postage for second mailing	

**SCHEDULE III
Statement of Expenditures**

Filer Identification Number:	274-88-1432
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To Whom Paid		Paypal			Date [MM/DD/YYYY]	\$	54.07
					05/01/2021		
House #	2211	Street Address	North First Street		Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131	Paypal fees	
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			

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.

Filer Identification Number:	274-88-1432
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Name of Creditor		Dylanna Gragliner				Outstanding Balance of Debt	
House #	517	Street Address		Shawnee Drive		DATE DEBT INCURRED [MM/DD/YYYY]	
City		Erie	State	PA	Zip Code	16505	\$ 3,900.80
Description of Debt		Election Signs					
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]	
City			State		Zip Code		\$
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]	
City			State		Zip Code		\$
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]	
City			State		Zip Code		\$
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]	
City			State		Zip Code		\$
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]	
City			State		Zip Code		\$
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]	
City			State		Zip Code		\$
Description of Debt							



April 6, 2020

Temporary Waiver of Notarization Requirement for Campaign Finance Reports and Statements

Summary:

The Pennsylvania Department of State requested, and Governor Wolf granted, a temporary waiver of the notarization requirement in the Campaign Finance Reporting Law for campaign finance reports and campaign finance statements filed by political committees, candidates for public office, and contributing lobbyists. Independent expenditures that are required to be filed by the 2nd Friday Pre-Primary Report (Cycle 2) deadline, are covered by the waiver. In the event that a special election reporting deadline falls within Cycle 2, the notarized cover page requirement will also be waived.

The following alternative filing process is in effect in the meantime:

- Filers must sign and date their report or statement cover sheet. Their signature acknowledges, by unsworn statement subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities, that the statements contained in the filed report or statement are accurate. The Pennsylvania Electronic Transactions Act allows either a physical signature or a typed name to comply with the Act's requirements.
- For filers who file on paper, the department will accept emailed reports for the duration of the emergency. This complies with statewide quarantine requirements; relieves filers of the need to travel to post offices, private delivery services offices or the department's drop box in Harrisburg; and eliminates paper documents that would otherwise require processing in person at the department. Instead, documents will be reviewed remotely and processed by department staff who are currently teleworking. Please email the reports to: RA-stcampaignfinance@pa.gov



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement

210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)

www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

2021 MAY -5 PM 4: 28

ERIE COUNTY
VOTER REGISTRATION

Unsworn Statement in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per the temporary waiver granted by the Governor on April 6, 2020, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements In lieu of full reports (form DSEB-503), and Independent Expenditure Reports (form DSEB-505) need not be notarized. (See Temporary Waiver of Notarization Requirement for Campaign Finance Reports and Statements). Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports and only so long as the waiver referenced above is in effect.** This form must be signed by hand or by typing your name where a signature is required. If you type your name, you understand that's your electronic signature and will constitute the legal equivalent of your signature on this form.

Name of Filing Committee, Candidate, or Lobbyist			
Friends of Dylanna			
Reporting Cycle Name			
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input checked="" type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 9 30-Day Post Special Election

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

By signing or typing my name below, I hereby declare under the penalty of perjury, pursuant to 18 Pa.C.S. § 4904, that the information contained in the accompanying Campaign Finance Report is to the best of my knowledge and belief true, correct and complete.

Heather Hart

05/05/2021

Signature of Treasurer, Candidate, or Lobbyist

Date

Heather Hart

Printed Name



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement

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2021 MAY -5 PM 4: 28

ERIE COUNTY
VOTER REGISTRATION

Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

By signing or typing my name below, I hereby declare under the penalty of perjury, pursuant to 18 Pa.C.S. § 4904, that the information contained in the accompanying Campaign Finance Report is to the best of my knowledge and belief true, correct and complete.

05/05/2021

Signature of Candidate

Date

Dylanna Grasinger

Printed Name