

Commonwealth of Pennsylvania - Campaign Finance Report

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

File/Identification Number	Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/> Committee	Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Brian Shank			
Street Address	412 Cambridge Rd			
City	Erie	State	PA	Zip Code
				16511

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		11/2/2021	Year	2021	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date
		01/01/2021
A. Amount Brought Forward from Last Report	\$	132.02
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	1575.00
C. Total Funds Available (Sum of Lines A and B)	\$	1707.02
D. Total Expenditures (From Schedule II)	\$	947.70
E. Ending Cash Balance (Subtract Line D from Line C)	\$	759.32
F. Value of In-Kind Contributions Received (From Schedule II)	\$	650
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0

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2021 MAY -7 PM 4: 24
 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 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 _____

My Commission expires _____ MO. _____ DAY _____ YR.

Signature of Person Submitting report
 Brian Shank
 Printed Name

814 _____ 873-3612
 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 _____

SCHEDULE I
Contributions and Receipts

Detailed Summary Page

Filer Identification Number:		
1. Unitemized Contributions and Receipts \$50.00 or Less per Contributor		
Total for the reporting period (1)	\$	800
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)	\$	775.00
Total for the reporting period (2)	\$	1575
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)	\$	
All Other Contributions (Part D)	\$	
Total for the reporting period (3)	\$	0
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 (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)		\$ 1575

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.)

Full Name of Contributor										Date (MM/DD/YYYY)	Amount
Patrick Kennedy										4/18/2021	125
House #	Street Address									Date (MM/DD/YYYY)	
	4264 E Lake Rd										
City	Erie			State	PA	Zip Code	16511		Date (MM/DD/YYYY)		
Full Name of Contributor										Date (MM/DD/YYYY)	Amount
Shawn Kennedy										4/19/2021	125
House #	Street Address									Date (MM/DD/YYYY)	
	716 East 24th St 2nd floor										
City	Erie			State	PA	Zip Code	16503		Date (MM/DD/YYYY)		
Full Name of Contributor										Date (MM/DD/YYYY)	Amount
Eunice Anne Dovey										4/7/2021	100
House #	Street Address									Date (MM/DD/YYYY)	
	1142 Sherman Dr										
City	Lake city			State	PA	Zip Code	16423		Date (MM/DD/YYYY)		
Full Name of Contributor										Date (MM/DD/YYYY)	Amount
glenda henderson										01/30/2021	150
House #	Street Address									Date (MM/DD/YYYY)	
	7 Woodside Dr										
City	Erie			State	PA	Zip Code	16426		Date (MM/DD/YYYY)		
Full Name of Contributor										Date (MM/DD/YYYY)	Amount
richard reeves										02/16/2021	100
House #	Street Address									Date (MM/DD/YYYY)	
	3002 loveland ave										
City	Erie			State	PA	Zip Code	16506		Date (MM/DD/YYYY)		
Full Name of Contributor										Date (MM/DD/YYYY)	Amount
brendt norrod										04/26/2021	100
House #	Street Address									Date (MM/DD/YYYY)	
	17525 Hara Creek Road										
City	corry			State	pa	Zip Code	16407		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.)

File Identification Number

Table with columns: Full Name of Contributor, House #, Street Address, City, State, Zip Code, Date (MM/DD/YYYY), and Amount. Includes entries for James Scheuer with amounts of 25, 25, and 25.

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

File Number	
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1. UNVALUED IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the reporting period (1)	\$ 650

2. IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.01 TO \$250.00 PER CONTRIBUTOR	
TOTAL for the reporting period (2)	\$

3. IN-KIND CONTRIBUTIONS 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)	\$ 650
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SCHEDULE III Statement of Expenditures

Transmittal Number:	
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To Whom Paid	Amazon	Date (MM/DD/YYYY)	4/20/2021	190.77
House #	Street Address	Description of Expenditure		
	410 terry ave north	yard sign stakes		
City	seattle	State	WA	Zip Code 98109
To Whom Paid	best of signs	Date (MM/DD/YYYY)	04/19/2021	463.30
House #	Street Address	Description of Expenditure		
	10 troyburn ct	signs		
City	greer	State	SC	Zip Code 29650
To Whom Paid	magnets on the cheap	Date (MM/DD/YYYY)	01/30/2021	140.53
House #	Street Address	Description of Expenditure		
	11525A stonehollow dr	car magnets		
City	austin	State	TX	Zip Code 78758
To Whom Paid	uprinting	Date (MM/DD/YYYY)	02/19/2021	125.67
House #	Street Address	Description of Expenditure		
	8000 haskell ave	business card magnets		
City	van nuys	State	CA	Zip Code 91406
To Whom Paid	walmart	Date (MM/DD/YYYY)	03/17/2021	27.43
House #	Street Address	Description of Expenditure		
	5741 buffalo rd	office supplies		
City	harborcreek	State	pa	Zip Code 16421
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



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 -7 PM 4:25

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			
Brian Shank			
Reporting Cycle Name			
<input type="checkbox"/> Cycle 1 5 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.

Signature of Treasurer, Candidate, or Lobbyist

5/7/21
Date

Brian Shank

Printed Name