

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	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Tyler James Titus					
Street Address		4243 Fargo Street					
City	Erie	State	PA	Zip Code	16510		

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

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only	
	6/6/17	10/23/2017		
A. Amount Brought Forward From Last Report	\$	0		
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	1114.00		
C. Total Funds Available (Sum of Lines A and B)	\$	1114.00		
D. Total Expenditures (From Schedule III)	\$	834.60		
E. Ending Cash Balance (Subtract Line D from Line C)	\$	279.40		
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0		

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.

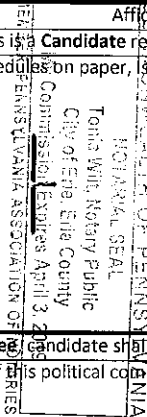
Sworn to and subscribed before me this 27 day of Oct, 2017

Sonia Wilt
Signature

My Commission expires 4-3-19
MO. DAY YR.

Tyler James Titus
Signature of Person Submitting report
Tyler James Titus
Printed Name

814 431-4553
Area Code Daytime Telephone Number



Part II- If this is a report of a **Candidate's Authorized Committee**, candidate 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)	\$	565. ⁰⁰
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	249
All Other Contributions (Part B)		\$	300
Total for the reporting period	(2)	\$	549. ⁰⁰
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)	\$	
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	1,114. ⁰⁰ / _{xx}
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>		\$	

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						Amount	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	249.00
PSEAPACE PA State Education Association's Political Action Committee for Education					10-10-2017		
House #	Street Address	City	State	Zip Code	Date [MM/DD/YYYY]	\$	
400	North 3rd Street, PO Box 1724	Harrisburg	PA	17105			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
Street Address					Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
Street Address					Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
Street Address					Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
Street Address					Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
Street Address					Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
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:	
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Full Name of Contributor		Stephanne Sedor			Date [MM/DD/YYYY]	\$	100. ⁰⁰
House #	164	Street Address	Lakewood Ave		Date [MM/DD/YYYY]	\$	
City	Pittsburgh	State	PA	Zip Code	15229	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Kyle Hannon			Date [MM/DD/YYYY]	\$	100. ⁰⁰
House #	620	Street Address	Marne Rd		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16511	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Michael Tkach			Date [MM/DD/YYYY]	\$	100. ⁰⁰
House #	626	Street Address	Cherry Street		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16502	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:	
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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]		\$
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:	
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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									
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, INTREST 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:	
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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
PART F
In-Kind Contributions Received
VALUE OF \$50.01 TO \$250

Filer Identification Number:	
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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]	\$	
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							

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:	
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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:	
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To Whom Paid		Bumblebee Boutique			Date [MM/DD/YYYY]	\$	300.00
House #	3774	Street Address	Faircrest Drive		Description of Expenditure		
City	Fairview	State	PA	Zip Code	16415	T-shirts	
To Whom Paid		Vistaprint Netherlands BV			Date [MM/DD/YYYY]	\$	201.38
House #	95	Street Address	Hayden Ave		Description of Expenditure		
City	Lexington	State	MA	Zip Code	02421	Magnets & Cards	
To Whom Paid		Bumblebee Boutique			Date [MM/DD/YYYY]	\$	90.00
House #	3774	Street Address	Faircrest Drive		Description of Expenditure		
City	Fairview	State	PA	Zip Code	16415	T-shirts	
To Whom Paid		Vistaprint Netherlands BV			Date [MM/DD/YYYY]	\$	126.22
House #	95	Street Address	Hayden Ave Hayden Ave		Description of Expenditure		
City	Lexington	State	MA	Zip Code	02421	Magnets	
To Whom Paid		Michael Mahler, Erie Gray News			Date [MM/DD/YYYY]	\$	117.00
House #	115	Street Address	West 7th		Description of Expenditure		
City	Erie	State	PA	Zip Code	16502	Advertisement	
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:	
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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							

PENNSYLVANIA CAMPAIGN FINANCE REPORT

This Report must be typed or printed legibly in blue or black ink.

INSTRUCTIONS

This form is intended for the use of candidates, political committees and contributing lobbyists who are required to disclose contributions and expenditures. Candidates must file separate reports when they make expenditures or receive contributions on their own behalf and separate from their campaign committee. A candidate's report discloses contributions received and expenditures made individually by the candidate. A contributing lobbyist's report discloses only expenditures the lobbyist personally made to influence the outcome of a candidate's election.

Candidates and their authorized political committees file reports in the office where their nomination documents are filed. If the candidate's reports are filed with the Secretary of the Commonwealth, a copy of the reports filed by the candidate and the authorized committee must be filed with the County Board of Elections in the county in which the candidate resides.

REPORT COVER PAGE

The Report Cover Page identifies the filer, the type of report and what reporting period is covered. It also summarizes the detailed contribution and expenditure sections from the body of the report.

Filer Identification Number - This number is assigned by the Bureau of Commissions, Elections and Legislation to candidates and committees who register and file with the Secretary of the Commonwealth. A candidate's filer identification number is assigned by the Bureau when the candidate files nomination petitions. A political committee or lobbyist filer identification number is assigned when the committee or lobbyist files registration documents in the Bureau.

Report Filed By - Please indicate which type of filer you are by checking the appropriate box on the cover page.

Name of Filing Committee, Candidate or Lobbyist, Street Address, City, State, Zip Code - Please enter appropriate name and address.

Type of Report - Please place an "X" by the applicable report type.

Amendment Report - Check "Yes" only if the report is being filed to correct, add to, or in some way change a report that has already been filed.

Termination Report - Check "Yes" only if the filer has no cash balance, no unpaid debts or obligations, and wishes to cease operation. Contributing lobbyists may file a termination report if they do not anticipate making further contributions to influence the outcome of a candidate's election.

Filing Method - Indicate whether the complete report is filed on paper, or if the report is filed by diskette accompanied by the signed and notarized cover sheet.

Name of Office Sought - If filed by a candidate or candidate's committee, indicate office sought.

Date of Election - If this is a pre- or post-primary election report, indicate the date of the primary or election.

District Number - If filed by a candidate or candidate's committee, indicate district in which candidate is seeking office.

Office Code, Party Code and County Code - If filed by candidate or candidate's committee, refer to code charts at the back of this report form. Enter the corresponding code letters for the office sought and the political party of the candidate; enter the corresponding code number for the county of residence of the candidate. Candidates for local offices who file only with the County Board of Elections should enter Office Code OTI for Other Offices.

Summary of Receipts and Expenditures - Enter the appropriate dates of the reporting period covered.

Amount Brought Forward From Last Report (Item A) - The balance, if any, as of the first day of the reporting period. For committees, it is the amount reported as the ending cash balance on the previous report filed, if any.

Items B through G - See detailed instructions on each corresponding schedule.

Affidavit Section - Must be sworn to by the filer acknowledging the accuracy of the report (Part I). On reports filed by a candidate's authorized committee, the candidate must sign an additional affidavit (Part II).

Page Number - Calculate the total number of pages in the completed report and indicate on top of cover page. Subsequent pages should be numbered consecutively.

Reports Filed on Diskette: The cover page must accompany all filings, including diskette filings. Diskette filings must also meet the technical specifications of the Department. These specifications are available at www.dos.state.pa.us or by contacting the Bureau.

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page - provides a summary of all monetary contributions and receipts during the reporting period.

Item 1: Unitemized Contributions and Receipts represents the total amount of contributions and receipts of \$50.00 or less in the aggregate *per contributor* received during the reporting period. Items 2, 3 and 4: Enter the total for each section from the corresponding schedules in the report: (Part A, Part B, Part C, Part D and Part E).

Enter the total from Schedule I on the Report Cover Page, Item B.

Definition of Contribution: Any payment, gift, subscription, assessment, contract, payment for services, dues, loan, forbearance, advance or deposit of money or any valuable thing, to a candidate or political committee made for the purpose of influencing any election in this Commonwealth or for paying debts incurred by or for a candidate or committee before or after any election. "Contribution" shall also include the purchase of tickets for events such as dinners, luncheons, rallies and other fund-raising events; the granting of discounts or rebates by television and radio stations and newspapers not extended on an equal basis to all candidates for the same office; and any payments provided for the benefit of any candidate, including any payments for the services of any person serving as an agent of a candidate or committee by a person other than the candidate or committee or a person whose expenditures the candidate or committee must report under the act. The word "contribution" includes any receipt or use of anything of value received by a political committee from another political committee and also includes any return on investments by a political committee. (See 25 P.S. §3241)

Instructions for Reporting Contributions

The *aggregate* total of contributions from an individual contributor within a reporting period determines which part of the report form should be used to disclose a contribution or receipt. The form is designed to list the dates and amounts of as many as three separate contributions from the same source in one line item.

Contributions and receipts of \$50 or less, per contributor, during the reporting period, need not be itemized on the report. The total amount of all unitemized contributions should appear on **Schedule I, Contributions and Receipts Detailed Summary Page, Line 1**. A record must be kept of the receipt dates of contributions and the names and addresses of each person from whom a contribution of over \$10 has been received.

Contributions and receipts over \$50 to \$250 - report the name of the contributor, mailing address, amount and date received on **Schedule I, Part A, "Contributions Received from Political Committees,"** or **Part B "All Other Contributions."**

Contributions and receipts over \$250 - report the name of the contributor, mailing address, occupation, employer's name and address, amount and date received on **Schedule I, Part C, "Contributions Received from Political Committees,"** or **Part D, "All Other Contributions."**

Receipts - Use **Part E, "Other Receipts"** to report all *other* monetary receipts or income; e.g. refunds received, interest income, returned checks and prior expenditures that were returned to the filer during the reporting period.

Address - In all Parts, a complete address, including zip code, must be provided. Space is provided for the Zip Code Plus Four. The State block should be completed with the U.S. Postal Service's standard two-letter abbreviation, such as PA for Pennsylvania.

Date - all date blocks in the report must be completed with eight digits. For instance, March 24, 2000 would appear as 03 24 2000.

Total - of each Part should be transferred to the appropriate section on the **Schedule I, "Contributions and Receipts Detailed Summary Page"** (Page 2 of the report form).

Occupation and Employer - Part D, which lists individuals who have contributed over \$250, also requires the occupation and name and address of the employer of the contributor. Report the principal place of business of any contributor who is self-employed.

SCHEDULE II

IN-KIND CONTRIBUTIONS RECEIVED

Detailed Summary Page - provides a summary of all in-kind contributions and valuable things received during the reporting period.

Item 1: Unitemized In-Kind Contributions Received represents the total value of in-kind contributions of \$50.00 or less, in the aggregate per contributor, received during the reporting period.

Items 2 and 3: Enter the total for each section from the corresponding schedules in the report (Part F and Part G).

Enter the page total on Page 1, Report Cover Page, Item F.

Part F and Part G - Use these Parts to itemize in-kind contributions from individuals or political committees according to the dollar value of the contribution. The form is designed to list the dates and amounts of as many as three separate in-kind contributions from the same source in one line item. The amount is equal to the current market value of the item or service contributed.

Totals of Parts F and G should be transferred to the appropriate section on the *Schedule II Detailed Summary Page*.

SCHEDULE III

EXPENDITURES

Definition of Expenditure: The payment, distribution, loan or advancement of money or any valuable thing by a candidate, political committee or other person for the purpose of influencing the outcome of an election; the payment, distribution, loan, advance or transfer of money or other valuable thing between or among political committees; the providing of a service or other valuable thing for the purpose of influencing the outcome of a nomination or election of any person to any public office to be voted for in this Commonwealth; or the payment or providing of money or other valuable thing by any person other than a candidate or political committee, to compensate any person for services rendered to a candidate or political committee. (See 25 P.S. §3241)

Instructions for Reporting Expenditures

Pursuant to state law, the Statement of Expenditures requires the filer to report the purposes for which funds were expended, the name and address of the entity to whom the expenditure was made, and the amount and date of each expenditure.

Vouchers for all expenditures over \$25.00 must be retained by the candidate or committee treasurer and shall be available for public inspection or copying. Filers are not required to submit vouchers with reports; however, vouchers must be retained for a period of three years.

Transactions between a candidate and his/her committee should be recorded on both the candidate's and committee's reports. For example, if a candidate contributes to or loans the committee money, the amount should appear on the candidate's report as an expenditure and on the committee's report as a receipt. A loan must also be reported by the recipient on the Statement of Unpaid Debts (Schedule IV).

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

All unpaid debts and obligations which are outstanding at the end of the reporting period must be reported. If a debt is incurred in one reporting period and not repaid, every report filed must continue to show the outstanding debt, even though there was no activity during the current reporting period.

A debt owed to an individual may be forgiven. A copy of the letter of forgiveness from the individual to the committee must accompany the report filed by the committee in the reporting period in which the debt was forgiven. A debt that is forgiven is considered a contribution to the committee. Such contributions from corporations or unincorporated associations are prohibited by the Election Code.

REPORT FILING DEADLINES

Sixth Tuesday Pre-Election - Reporting period closes 50 days prior to election day. Filed only by candidates for Statewide office and political committees/lobbyists supporting such candidates.

Second Friday Pre-Election - Reporting period closes 15 days prior to election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Thirty Day Post-Election - Reporting period closes 20 days after election day. File 30 days after election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Annual Report - Reporting period closes December 31. File by January 31 of the year following the reporting period. Filed by all candidates for nomination or election, political committees and contributing lobbyists.

Political committees required to file pre-election reports must also file post-election reports.

Postmarks - are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the U.S. Postal Service no later than the day prior to the filing deadline.

Late filing fee - A late filing fee of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the report is overdue, plus an additional fee of \$10.00 for the first six days that a report is overdue will be assessed.

County Code Table:

01 Adams	24 Elk	47 Montour
02 Allegheny	25 Erie	48 Northampton
03 Armstrong	26 Fayette	49 Northumberland
04 Beaver	27 Franklin	50 Perry
05 Bedford	28 Forest	51 Philadelphia
06 Berks	29 Fulton	52 Pike
07 Blair	30 Greene	53 Potter
08 Bradford	31 Huntingdon	54 Schuylkill
09 Bucks	32 Indiana	55 Snyder
10 Butler	33 Jefferson	56 Somerset
11 Cambria	34 Juniata	57 Sullivan
12 Cameron	35 Lackawanna	58 Susquehanna
13 Carbon	36 Lancaster	59 Tioga
14 Centre	37 Lawrence	60 Union
15 Chester	38 Lebanon	61 Venango
16 Clarion	39 Lehigh	62 Warren
17 Clearfield	40 Luzerne	63 Washington
18 Clinton	41 Lycoming	64 Wayne
19 Columbia	42 McKean	65 Westmoreland
20 Crawford	43 Mercer	66 Wyoming
21 Cumberland	44 Mifflin	67 York
22 Dauphin	45 Monroe	
23 Delaware	46 Montgomery	

Party Code Table:

REP	Republican Party
DEM	Democratic Party
CST	Constitutional Party
LIB	Libertarian Party
REF	Reform Party
OTH	Other

Office Code Table:

GOV	Governor
LTG	Lieutenant Governor
ATG	Attorney General
AUD	Auditor General
TRE	State Treasurer
SPM	Justice of the Supreme Court
SPR	Judge of the Superior Court
CCJ	Judge of the Commonwealth Court
STS	Senator in the General Assembly
STH	Representative in the General Assembly
CPJ	Judge of the Court of Common Pleas
MCJ	Judge of the Municipal Court
TCJ	Judge of the Traffic Court
OTH	Other (Candidates for local offices who file only with the County Board of Elections)



Contributions

Merchant Account ID: ZU6GB9FLX2QK6

PayPal ID: tylerituslpc@gmail.com

7/1/2017 - 9/30/2017

Statement for 01 July 2017 to 30 September 2017

Tyler Titus Campaign
4243 Fargo Street
16510 Erie

Balance Summary (7/1/2017 - 9/30/2017)

	Available beginning	Available ending	Withheld beginning	Withheld ending
USD	0.00	838.02	0.00	0.00



Merchant Account ID: ZU6GB9FLX2QK6

PayPal ID: tylerituslpc@gmail.com

7/1/2017 - 9/30/2017

Activity Summary (7/1/2017 - 9/30/2017)

	USD
Beginning Available Balance	0.00
Payments received	865.00
Payments sent	0.00
Withdrawals and Debits	0.00
Deposits and Credits	0.00
Fees	-26.98
Ending Available Balance	838.02



Merchant Account ID: ZU6GB9FLX2QK6

PayPal ID: tyleritusipc@gmail.com

7/1/2017 - 9/30/2017

Payments received

Description	USD
General payment	865.00
Total	865.00

Fees

Description	USD
Payment Fee	-26.98
Total	-26.98



Merchant Account ID: ZU6GB9FLX2QK6

PayPal ID: tylertituslpc@gmail.com

7/1/2017 - 9/30/2017

Transaction History - USD

Date	Description	Name \ Email	Gross	Fee	Net
9/5/2017	General Payment ID: 71V872142E489011C	Kalyn Dersch goaloflosing@yahoo.com	10.00	0.00	10.00
9/10/2017	General Payment ID: 71772492SW823413V	Stephanie Sedor stephsedor@gmail.com	100.00	0.00	100.00
9/11/2017	General Payment ID: 29L73882LK010091X	Michael Tkach mtkach@neo.ir.com	100.00	-3.20	96.80
9/11/2017	General Payment ID: 0J357285M29764335	Michael G Thomas kongming.man@gmail.com	30.00	0.00	30.00
9/13/2017	General Payment ID: 11S88622C7966292J	Quantum Balance Erie Lois@quantumbalanceerie.com	25.00	-1.03	23.97
9/13/2017	General Payment ID: 56U732392R925420P	Michael Mahler mahler@eriegaynews.com	15.00	-0.74	14.26
9/13/2017	General Payment ID: 4GS72491PT246810Y	Margo Wolfe margolwolfe@gmail.com	30.00	0.00	30.00
9/13/2017	General Payment ID: 5A10201742611720G	Lindsay Kezlarian sq107@hotmail.com	15.00	-0.74	14.26
9/13/2017	General Payment ID: 41V75181NC527345E	Mary ann Daniels Danielsma@verizon.net	25.00	-1.03	23.97
9/13/2017	General Payment ID: 85629811AD389171H	Patricia Wilt leo1665@yahoo.com	15.00	-0.74	14.26
9/13/2017	General Payment ID: 9G762769GN2031910	Julie Patterson patterson_julie@yahoo.com	20.00	-0.88	19.12
9/13/2017	General Payment ID: 28L158868E8157436	D. Jason Bishop dvectorb@gmail.com	15.00	-0.74	14.26
9/13/2017	General Payment ID: 2FM478762Y577462S	Rob Mahrt rob.mahrt@gmail.com	20.00	-0.88	19.12
9/13/2017	General Payment ID: 8YR44329KN084071C	Kyle Hannon khannon1969@gmail.com	100.00	-3.20	96.80
9/13/2017	General Payment ID: 7T9041901S048433C	Tyler Cauvel tylercauvel@gmail.com	20.00	-0.88	19.12
9/13/2017	General Payment ID: 2BT19285VJ201790E	Daye Pope dayepope@gmail.com	30.00	-1.17	28.83
9/13/2017	General Payment ID: 0E10187719265702L	Dale Allgeier daleallgeier@outlook.com	20.00	-0.88	19.12
9/13/2017	General Payment ID: 2SN08606AN673645X	Michael Grasso michael.p.grasso@gmail.com	50.00	-1.75	48.25
9/14/2017	General Payment ID: 9CD123173R7165926	Caitlin Cybulski hecate337@gmail.com	15.00	-0.74	14.26



Merchant Account ID: ZU6GB9FLX2QK6

PayPal ID: tylertituspc@gmail.com

7/1/2017 - 9/30/2017

Transaction History - USD

Date	Description	Name \ Email	Gross	Fee	Net
9/14/2017	General Payment ID: 8NT000726V1457214	Ann Partridge angelsamantha@hotmail.com	20.00	-0.88	19.12
9/14/2017	General Payment ID: 9B3012085R9985058	JENNIFER FOX jenfox1984@yahoo.com	20.00	-0.88	19.12
9/14/2017	General Payment ID: 0SJ4084001857142L	Tatiana Bogatova tania.bogatova@gmail.com	40.00	-1.46	38.54
9/14/2017	General Payment ID: 0S322836NN901482S	KEITH DESANTIS keirakristinedesantis@gmail.com	15.00	-0.74	14.26
9/14/2017	General Payment ID: 75K43189HM407945U	Kim Peebles kppeebles@aol.com	15.00	-0.74	14.26
9/17/2017	General Payment ID: 88L78175G2670703N	Kyle Rodney warwagon89xj@yahoo.com	25.00	-1.03	23.97
9/18/2017	General Payment ID: 6N767951PP5622008	Molly Wolf Molly1019@yahoo.com	15.00	0.00	15.00
9/19/2017	General Payment ID: 54H54681WG699012A	Friends of Brad Ford, Inc. friends@bradforderie.com	25.00	-1.03	23.97
9/21/2017	General Payment ID: 02G84018651078617	Cara Holley holleyfamily16354@gmail.com	15.00	-0.74	14.26
9/21/2017	General Payment ID: 7HB494900Y541323X	Barbara Lindstrom barbaralindstrom@ymail.com	20.00	-0.88	19.12

To report an unauthorized transaction or other error NOT involving your debit card: call (402-938-3614) or write to us (Attn: Error Resolution Department, P.O. Box 45950, Omaha, NE 68145-0950).

To report an unauthorized transaction or other error concerning your debit card: call (402-938-3614), fax (303-395-2855) or write to us (PayPal Debit Card Department, P.O. Box 45950, Omaha, NE 68145-0950).

To cancel a pre-authorized or recurring payment or determine whether a pre-authorized or recurring transfer has been made: call us at 1-877-896-6383 (please note that only calls pertaining to pre-authorized or recurring payments will be accepted at this number).

Erie Gay News
 1115 W 7th St
 Erie, PA 16502
 (814)456-9833
 info@eriegaynews.com
 http://www.eriegaynews.com



INVOICE

BILL TO

Tyler James Titus
 4243 Fargo Street,
 Erie, PA 16510

INVOICE # 1897

DATE 09/13/2017

DUE DATE 09/26/2017

TERMS Next Deadline

ACTIVITY	QTY	RATE	AMOUNT
Ad:Quarter Page ad Quarter Page Ad (3 1/2" tall by 2 7/8" wide) in October & November 2017 Erie Gay News (issue # 263 & 264).	2	65.00	130.00

** Please get us any ad changes or cancellations by no later than Friday, September 15. The expected distribution date is Tuesday, September 26.

10% Prepay discount is already included in this invoice, due by Friday, September 15. All checks should be made payable to "EGC Coalition".

Quarter Page Ad (3 1/2" tall by 2 7/8" wide) in October & November
 2017 Erie Gay News (issue # 263 & 264).

SUBTOTAL	130.00
DISCOUNT 10%	-13.00
TOTAL	117.00
PAYMENT	117.00
BALANCE DUE	\$0.00

INVOICE

PAID

Bumblebee Boutique

Bethany Masterson
3774 Faircrest Dr
Fairview, PA 16415
United States

Phone: 814-873-8397
Beth_masterson521@yahoo.com
www.facebook.com/ilovebumblebeeboutique/

Invoice #: 0070
Invoice Date: Oct 6, 2017
Due date: Oct 6, 2017

Amount due:
\$0.00

Bill To:

tylertituslpc@gmail.com

Description	Quantity	Price	Amount
Titus for School Board T-shirts Large	15	\$10.00	\$150.00
Titus for School Board T-shirts Medium	10	\$10.00	\$100.00
Titus for School Board T-shirts Small	5	\$10.00	\$50.00
		Subtotal	\$300.00
		Total	\$300.00
		Amount paid	-\$300.00
		Amount due	\$0.00 USD

Expenditures

Showing payments sent. Show all transactions.

Date	Type	Name	Payment	Gross	Fee	Net	Actions
Oct 14, 2017	Purchase from	Vistaprint Netherlands B.V.		Completed	-\$201.38 USD	\$0.00	-\$201.38
Oct 10, 2017	Payment to	Bumblebee By Bethany		Completed	-\$90.00 USD	\$0.00	-\$90.00
Oct 6, 2017	Purchase from	Vistaprint Netherlands B.V.		Completed	-\$126.22 USD	\$0.00	-\$126.22
Oct 6, 2017	Payment to	Bumblebee By Bethany		Completed	-\$300.00 USD	\$0.00	-\$300.00
Oct 4, 2017	Debit Card purchase to	INT*IN *MICHAEL MAHLER 814-4569833 PA		Completed	-\$117.00 USD	\$0.00	-\$117.00

834.60