

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	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of Mary E. Schaaf				
Street Address		5109 Watson Road				
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 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 checked="" type="checkbox"/>	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only	
		01/01/2020	01/17/2020	
A. Amount Brought Forward From Last Report	\$	2878.12		
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0		
C. Total Funds Available (Sum of Lines A and B)	\$	2878.12		
D. Total Expenditures (From Schedule III)	\$	2878.12		
E. Ending Cash Balance (Subtract Line D from Line C)	\$	0		
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0		

2020 JAN 17 PM 1:15
 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
 17th day of January 20 20
 Signature: [Signature]

My Commission expires 8 5 2020
 MO. DAY YR.

Signature of Person Submitting report: [Signature]
 Printed Name: VICKI L. TAYLOR
 Area Code: 814 Daytime Telephone Number: 440-9583

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
 17th day of January 20 20
 Signature: [Signature]

My Commission expires 8 5 2020
 MO. DAY YR.

Signature of Candidate: [Signature]
 Printed Name: MARY E. SCHAAF
 Area Code: 814 Daytime Telephone Number: 746 1049

Commonwealth of Pennsylvania - Notary Seal
 Gregory J. Grasinger, Notary Public
 Erie County
 My commission expires August 5, 2023
 Commission number 1347356
 Member, Pennsylvania Association of Notaries

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SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid	Mary Schauf				Date [MM/DD/YYYY]	\$
House #	5109	Street Address	Watson Road		01/10/2020	2878.12
City	Erve	State	PA	Zip Code	16505	
					Description of Expenditure	Reimbursement for Ad

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		

To Whom Paid					Date [MM/DD/YYYY]	\$
House #		Street Address			Description of Expenditure	
City		State		Zip Code		