

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	83-3126011	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Committee to Elect Dan Ouellet							
Street Address		5213 Deerfield Drive							
City	Fairview	State	PA	Zip Code	16415				

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)			Year		Amendment Report		Termination Report	
			2020		<input type="checkbox"/>		<input type="checkbox"/>	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2020	12/31/2020	
A. Amount Brought Forward From Last Report	\$	2724.70	<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> 2021 JAN 29 PM 12: 00 ERIE COUNTY VOTER REGISTRATION </div>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	890.80	
C. Total Funds Available (Sum of Lines A and B)	\$	3615.50	
D. Total Expenditures (From Schedule III)	\$	0	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	3615.50	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	2000.00	

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.

Gary Selb
Signature of Person Submitting report

Gary Selb
Printed Name

814 _____ 833-3176
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.

Daniel Ouellet
Signature of Candidate

Daniel Ouellet
Printed Name

814 _____ 823-5395
Area Code Daytime Telephone Number

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number	83-3126011
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1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor

Total for the reporting period (1)	\$	0
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2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)

Contributions Received from Political Committees (Part A)	\$	
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All Other Contributions (Part B)	\$	
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Total for the reporting period (2)	\$	0
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3. Contributions Over \$250.00 (From Part C and Part D)
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Contributions Received from Political Committees (Part C)	\$	
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All Other Contributions (Part D)	\$	
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Total for the reporting period (3)	\$	0
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4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)
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Total for the reporting period (4)	\$	890.8
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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>	\$	890.8
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**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:	83-3126011
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Full Name		iHeartMEDIA					
House #	Street Address						PO Box 419499
City	Boston	State	MA	Zip Code	02241	Date [MM/DD/YYYY]	\$ 890.8
Receipt Description		Return of unused portion - prepayment for radio advertising					
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 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:	83-3126011
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Name of Creditor		Daniel Ouellet				Outstanding Balance of Debt	
House #	3224	Street Address	West 25th Street		DATE DEBT INCURRED [MM/DD/YYYY]		\$
					01/25/2019		
City	Erie		State	PA	Zip Code	16506	2,000
Description of Debt							
Loan to fund start of campaign							

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 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 JAN 29 PM 12: 01

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.

Daniel Ouellet

Signature of Candidate

1-11-2021

Date

Daniel Ouellet

Printed Name