



Reset Form

Print Form

# Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	83-3083064	Report Filed By ( Mark X)	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	Friends of Connie Cruz							
Street Address	4420 Dale Drive							
City	Erie	State	PA	Zip Code	16511			

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> 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)	11/05/2019	Year	2021		Amendment Report	<input type="checkbox"/>	Termination Report	<input checked="" type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date
	01/01/2021	12/31/2021
A. Amount Brought Forward From Last Report	\$	2935.84
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0
C. Total Funds Available (Sum of Lines A and B)	\$	0
D. Total Expenditures (From Schedule III)	\$	0
E. Ending Cash Balance (Subtract Line D from Line C)	\$	0
F. Value of In-Kind Contributions Received (From Schedule II)	\$	2935.84
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0

For Office Use Only

ERIE COUNTY

JAN 11 2021

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

11th day of January 20 2022

*Michelle Gonda*  
Signature

*Jose L. Cruz*  
Signature of Person Submitting report  
Jose L. Cruz  
Printed Name

My Commission expires 5 26 23

814 Area Code 323-2466 Daytime Telephone Number

Commonwealth of Pennsylvania - Notary Seal  
MICHELLE GONDA - Notary Public  
Erie County

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. Commission Number 1290868

Sworn to and subscribed before me this

11th day of January 20 2022

*Michelle Gonda*  
Signature

*Connie Cruz*  
Signature of Candidate  
Connie Cruz  
Printed Name

My Commission expires 5 26 23

814 Area Code 572-6169 Daytime Telephone Number

Commonwealth of Pennsylvania - Notary Seal  
MICHELLE GONDA - Notary Public  
Erie County  
My Commission Expires May 26, 2023  
Commission Number 1290868

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:	83-3083064 Friends of Connie Cruz
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
TOTAL for the reporting period	(1)	\$ 0

<b>2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>		
TOTAL for the reporting period	(2)	\$ 0

<b>3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)</b>		
TOTAL for the reporting period	(3)	\$ 2935.84

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)		\$ 2935.84
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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:	83-3083064	Friends of Connie Cruz
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Full Name of Contributor		US Bankruptcy Court			Date [MM/DD/YYYY]	\$	2935.84
House #	17	Street Address	S Park Row B160		Date [MM/DD/YYYY]	\$	
City	ERIE	State	PA	Zip Code	16501	Date [MM/DD/YYYY]	\$
Employer Name		Discharged on			Occupation		
Employer Mailing Address / Principal Place of Business		McCarthy Printing					
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							

January 11, 2022

To Whom It May Concern:

I, Connie Cruz, candidate for supervisor during the year 2019 filed bankruptcy in 2020 which was discharged on January 13, 2021, case number 20-10702-TPA. The forgiveness included debt owed to McCarty Printing in the amount of \$2,935.84.

Due to the bankruptcy the Candidate Committee of Friends for Connie Cruz no longer has debt, therefore I am submitting my termination Campaign Finance Report.

Signed by:

Connie Cruz

1/11/2022

Date