

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number		Report Filled By (Mark X)	Candidate <input checked="" type="checkbox"/>	Committee <input type="checkbox"/>	Lobbyist <input type="checkbox"/>
Name of Filing Committee/Candidate or Lobbyist		ELLEN SCHAUERMAN			
Street Address		1820 MILLFAIR RD			
City	ERIE	State	PA	Zip Code	16505

Type of Report (Place x under report type)									
1- 1 st 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"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		Year		Amendment Report		Termination Report			
		11-26-19		12-31-22					

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	1-1-22	12-31-22	2023 JAN 11 PM 2:17 ERIE COUNTY VOTER REGISTRATION
A. Amount Brought Forward From Last Report	\$	- 3249.25	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	-	
C. Total Funds Available (Sum of Lines A and B)	\$	- 3249.25	
D. Total Expenditures (From Schedule II)	\$	-	
E. Ending Cash Balance (Subtract line D from line C)	\$	- 3249.25	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	-	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	-	

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 of paper, to the best of my knowledge and belief true, correct and complete.	
Sworn to and subscribed before me this	Ellen Schauerman Signature of Person Submitting report ELLEN SCHAUERMAN Printed Name
11 day of January 20 23 A. Watson Signature	814 392-3672 Area Code Daytime Telephone Number
My Commission expires 12 2 2026 MO. DAY YR.	

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	Signature of Candidate
_____ day of _____ 20____	_____
_____ Signature _____	Printed Name
My Commission expires _____ MO. DAY YR.	Area Code Daytime Telephone Number