

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)	<input type="checkbox"/>	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		FRIENDS OF CHRIS ROSSELOT							
Street Address		541 E. OHIO STREET							
City	PITTSBURGH	State	PA	Zip Code	15212				

Type of Report (Place x under report type)

1- 6th Tuesday Pre-Primary	2- 2nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6th Tuesday Pre- Election	5- 2nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2nd 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)		05/21/2019	Year	2019	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date
		04/01/2019
A. Amount Brought Forward From Last Report	\$	1,228.93
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	1,312.7
C. Total Funds Available (Sum of Lines A and B)	\$	2,541.63
D. Total Expenditures (From Schedule III)	\$	1,659.25
E. Ending Cash Balance (Subtract Line D from Line C)	\$	882.38
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0
G. Unpaid Debts and Obligations (From Schedule IV)	\$	17,043.02

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MAY 01 2019

ETHICS HEARING BOARD

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

1 day of May 20 22

Brandon Shank
Signature

Aletha G. Cassidy
Signature of Person Submitting report
Aletha G. Cassidy
Printed Name

My Commission expires April 24 2022
MO. DAY YR.

814 Area Code 397-8579 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

1 day of May 20 22

Brandon Shank
Signature

Chris Rosset
Signature of Candidate
CHRIS ROSSELOT
Printed Name

My Commission expires April 24 2022
MO. DAY YR.

412 Area Code 354-0647 Daytime Telephone Number

Commonwealth of Pennsylvania - Notary Seal
 Brandon J. Havranek, Notary Public
 Allegheny County
 My commission expires April 24, 2022
 Commission number 1328226
 Member, Pennsylvania Association of Notaries

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SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	FRIENDS OF CHRIS ROSSELOT		
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	230
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	0
All Other Contributions (Part B)		\$	550
Total for the reporting period	(2)	\$	550
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	0
All Other Contributions (Part D)		\$	0
Total for the reporting period	(3)	\$	0
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	532.7
Total Monetary Contributions and Receipts during this reporting period (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)		\$	1,312.7

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:	FRIENDS OF CHRIS ROSSELOT
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Full Name of Contributor		ADAM POPE			Date [MM/DD/YYYY]	\$	250
					04/01/2019		
House #	44	Street Address	S. 27TH STREET		Date [MM/DD/YYYY]	\$	
City	PITTSBURGH	State	PA	Zip Code	15203	Date [MM/DD/YYYY]	\$
Full Name of Contributor		KARA VOLK			Date [MM/DD/YYYY]	\$	100
					04/01/2019		
House #	909	Street Address	CONSTANCE STREET		Date [MM/DD/YYYY]	\$	
City	PITTSBURGH	State	PA	Zip Code	15212	Date [MM/DD/YYYY]	\$
Full Name of Contributor		DAVID KOKOSKI			Date [MM/DD/YYYY]	\$	100
					04/04/2019		
House #	808	Street Address	CONSTANCE STREET		Date [MM/DD/YYYY]	\$	
City	PITTSBURGH	State	PA	Zip Code	15212	Date [MM/DD/YYYY]	\$
Full Name of Contributor		MARIAN KALBACKER			Date [MM/DD/YYYY]	\$	100
					04/04/2019		
House #		Street Address	P O BOX 310		Date [MM/DD/YYYY]	\$	
City	SILER CITY	State	NC	Zip Code	27344	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 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:	FRIENDS OF CHRIS ROSSELOT
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Full Name		REFUCILO WINERY							
House #	907	Street Address		WESTERN AVENUE					
City		PITTSBURGH	State	PA	Zip Code	15233	Date [MM/DD/YYYY]	\$	180.55
		04/01/2019							
Receipt Description		REFUND OF DEPOSIT OVERPAYMENT							
Full Name		CITY OF PITTSBURGH							
House #		Street Address		PUBLIC WORKS-PARKS					
City		PITTSBURGH	State	PA	Zip Code	15219	Date [MM/DD/YYYY]	\$	352.15
		04/01/2019							
Receipt Description		REFUND FOR PERMIT AT RIVERVIEW PARK CHAPEL (GENEVIEVE ROSSELOT)							
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

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:	
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the reporting period	(1)	\$	
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2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)

TOTAL for the reporting period	(2)	\$	
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3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)

TOTAL for the reporting period	(3)	\$	
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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)		\$	0
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**SCHEDULE III
Statement of Expenditures**

Filer Identification Number:	FRIENDS OF CHRIS ROSSELOT
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To Whom Paid		FEDERAL GALLEY			Date [MM/DD/YYYY]	\$	34.49
					04/02/2019		
House #	200	Street Address	CHILDRENS WAY		Description of Expenditure		
City	PITTSBURGH	State	PA	Zip Code	15212	MEETING	
To Whom Paid		VERIZON			Date [MM/DD/YYYY]	\$	180.68
					04/11/2019		
House #		Street Address	P O BOX 15124		Description of Expenditure		
City	ALBANY	State	NY	Zip Code	12212	OFFICE INTERNET SERVICE	
To Whom Paid		NATIONBUILDER.COM			Date [MM/DD/YYYY]	\$	215
					04/18/2019		
House #	520	Street Address	S GRAND AVENUE		Description of Expenditure		
City	LOS ANGELES	State	CA	Zip Code	90071	DATA ADMIN TOOL FEE	
To Whom Paid		SSB BANK			Date [MM/DD/YYYY]	\$	200
					04/19/2019		
House #	8700	Street Address	PERY HIGHWAY		Description of Expenditure		
City	PITTSBURGH	State	PA	Zip Code	15222	INTEREST	
To Whom Paid		BRUCE KLEIN			Date [MM/DD/YYYY]	\$	1,000
					04/19/2019		
House #	525	Street Address	E OHIO STREET		Description of Expenditure		
City	PITTSBURGH	State	PA	Zip Code	15212	RENT	
To Whom Paid		CALIFORNIA COFFEE BAR			Date [MM/DD/YYYY]	\$	14.33
					04/25/2019		
House #	3619	Street Address	CALIFORNIA AVENUE		Description of Expenditure		
City	PITTSBURGH	State	PA	Zip Code	15212	MEETING	
To Whom Paid		NATIONBUILDER.COM			Date [MM/DD/YYYY]	\$	14.75
					04/30/2019		
House #	520	Street Address	S GRAND AVENUE		Description of Expenditure		
City	LOS ANGELES	State	CA	Zip Code	90071	DONATION PROCESSING FEES	
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		Janelle Rosselot				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$	
1108	Voskamp Street	12/17/2018					
City	Pittsburgh	State	PA	Zip Code	15212	499.08	
Description of Debt		Food/beverages/supplies/hall cting fee for pasta dinner meet & greet with NS Democratic Committee					
Name of Creditor		Christopher Rosselot				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$	
1019	Vinial Street	11/27/2018					
City	Pittsburgh	State	PA	Zip Code	15212	48	
Description of Debt		USPS Campaign Committee PO Box					
Name of Creditor		Christopher Rosselot				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$	
1019	Vinial Street	12/24/2018					
City	Pittsburgh	State	PA	Zip Code	15212	115.5	
Description of Debt		Office supplies					
Name of Creditor		Christopher Rosselot				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$	
1019	Vinial Street	12/29/2018					
City	Pittsburgh	State	PA	Zip Code	15212	134.84	
Description of Debt		Meeting expenses re: prospective consultants and managers					
Name of Creditor		Christopher Rosselot				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$	
1019	Vinial Street	01/07/2019					
City	Pittsburgh	State	PA	Zip Code	15212	11,000	
Description of Debt		Loan to committee					
Name of Creditor		Genevieve Rosselot				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]				\$	
1019	Vinial Street	01/10/2019					
City	Pittsburgh	State	PA	Zip Code	15212	190.27	
Description of Debt		Beverages for Kick off event					

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		Christopher Rosselot				Outstanding Balance of Debt	
House #	1019	Street Address	Vinial Street		DATE DEBT INCURRED [MM/DD/YYYY]		\$ 5,000
				02/20/2019			
City	Pittsburgh		State	PA	Zip Code	15212	
Description of Debt		Candidate loan to committee					

Name of Creditor		Christopher Rosselot				Outstanding Balance of Debt	
House #	1019	Street Address	Vinial Street		DATE DEBT INCURRED [MM/DD/YYYY]		\$ 55.33
				02/24/2019			
City	Pittsburgh		State	PA	Zip Code	15212	
Description of Debt		Breakfast meeting with Democratic Committee Members					

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							