

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	☒ COMMITTEE	☐ LOBBYIST
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Aubrea Hagerty-Haynes						
STREET ADDRESS 630 Edgevale Drive						
CITY Erie		STATE PA		ZIP CODE 16509		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION
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 REPORT		Erie County Clerk of Records		(25) Erie County	Dem	MO. DAY YEAR 11 02 2021
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR 10 19 2021 TO 11 22 2021		FOR OFFICE USE ONLY		
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>				
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>				
		AMENDMENT REPORT? YES ☐ NO ☒ TERMINATION REPORT? YES ☐ NO ☒				

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS TO THE BEST OF MY KNOWLEDGE AND BELIEF TRUE, CORRECT AND COMPLETE.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY OF December 20 21 SIGNATURE Aubrea Hagerty-Haynes MY COMMISSION EXPIRES October 18 2022 MO. DAY YR.	SIGNATURE OF PERSON SUBMITTING REPORT Aubrea Hagerty-Haynes PRINTED NAME Aubrea Hagerty-Haynes AREA CODE 814 DAYTIME TELEPHONE NUMBER 460-9922

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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.	SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____