

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	1. <input checked="" type="checkbox"/> COMMITTEE	2. <input type="checkbox"/> LOBBYIST	3. <input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <u>Aubrea Hagerty-Haynes</u>								
STREET ADDRESS <u>630 Edgewale Drive</u>								
CITY <u>Erie</u>				STATE <u>PA</u>	ZIP CODE <u>16509</u>			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE <u>Erie County Clerk of Records</u>		DISTRICT NO. <u>(25) Erie County</u>	PARTY <u>Dem</u>	DATE OF ELECTION		
						MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY		1.				<u>11</u>	<u>02</u>	<u>2002</u>
2ND FRIDAY PRE-PRIMARY		2.						
30 DAY POST-PRIMARY		3.						
6TH TUESDAY PRE-ELECTION		4.						
2ND FRIDAY PRE-ELECTION		5.						
30 DAY POST-ELECTION		6.						
ANNUAL REPORT		7. <input checked="" type="checkbox"/>						

  

DATES OF REPORTING PERIOD		TO				
MO.	DAY	YEAR	MO.	DAY	YEAR	
<u>01</u>	<u>01</u>	<u>23</u>		<u>12</u>	<u>31</u>	<u>23</u>

  

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	<input checked="" type="checkbox"/>
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>

**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 <u>31<sup>st</sup></u> DAY OF <u>January</u> <u>Amy L. Watson</u> SIGNATURE MY COMMISSION EXPIRES <u>12/02/2002</u> MO. DAY YEAR	SIGNATURE OF PERSON SUBMITTING REPORT <u>Aubrea Hagerty-Haynes</u> PRINTED NAME <u>814</u> <u>460-9922</u> AREA CODE DAYTIME TELEPHONE NUMBER

**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 _____