

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	<input checked="" type="checkbox"/> COMMITTEE	2.	LOBBYIST	3.
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Aubrea Hagerty-Haynes</i>								
STREET ADDRESS <i>630 Edgely Drive</i>								
CITY <i>Eni</i>			STATE <i>PA</i>		ZIP CODE <i>16509</i>			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.		PARTY	
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 ANNUAL REPORT <input checked="" type="checkbox"/>		<i>Clerk of Records</i>						
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <i>01 01 24 TO 12 31 24</i>			DATE OF ELECTION MO. DAY YEAR <i>11 02 2021</i>			
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i>			FOR OFFICE USE ONLY 2025 JAN 31 PM 4:31 ENI COUNTY VOTER REGISTRATION			
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>						
		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 <i>31</i> DAY OF <i>January</i> 20 <i>25</i> <i>Lauren E. Thayer</i> SIGNATURE MY COMMISSION EXPIRES <i>12-30-2028</i> MO. DAY YR.	SIGNATURE OF PERSON SUBMITTING REPORT <i>Aubrea Hagerty-Haynes</i> PRINTED NAME <i>AUBREA HAGERTY-HAYNES</i> DAYTIME TELEPHONE NUMBER <i>460-9922</i>

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 <i>Aubrea Hagerty-Haynes</i> PRINTED NAME AREA CODE DAYTIME TELEPHONE NUMBER