Reset Form

Print Form

## 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)	Candida	ite	X	Committee			Lobby	ist	
Name of Filing Committee, Candidate or Lobbyist	George Hazuda									
Street Address	5159 Merilee Drive	2								
City Erle	State		PA		Zip Code	Zip €ode 16506				
Type of Report (Place x under report type)										
1-6 <sup>th</sup> Tuesday 2- 2 <sup>nd</sup> Friday 3-30 Day Post	t 4-6 <sup>th</sup> Tuesday 5-2 <sup>nd</sup> Friday Pre- Election Pre- Election		6-30 Day Post Election		7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election		Special 30 Day Post-Election		
Pre-Primary Pre-Primary Primary	Fre- Election .						1	<u> </u>	<u> </u>	
Date Of Election	Year	2017	Amenda Report	nent		Termina Report	tion	<u> </u>	X	
Summary of Receipts and From Date Expenditures	To Date	1/2000			For	Office Use	Only			
1/1/2018  A. Amount Brought Forward From Last Repor	+	1/2 <del>0</del> 18 34.23		* #		- A.				
B. Total Monetary Contributions and Receipts (From Schedule I)	s \$ C		]					2019FEB		
C. Total Funds Available (Sum of Lines A and B)	19.5	34.23							À.	
D. Total Expenditures (From Schedule (III)	\$						90	Ġ	14	
E. Ending Cash Balance (Subtract Line D from Line C)		34.23						U		
F. Value of In-Kind Contributions Received (From Schedule II)	\$		<u>-</u>				HOLLY	.: -:-		
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 4	.09	<u> </u>	-			42		ANIA Jbio	
Part 1- If this is a Committee report, treasurer sign	hore If this is a Cand	Affidavit S		n here		<del></del> .	<u></u>		N H S	
I swear (or affirm) that this report, including the att	ached schedules on	paper, is to the	e best of my	knowle	dge and belief t	rue, correc	t and comple	ete.	NS.	
Sworn to and subscribed before me this Syday of Ebnay 20 / 9	1	4	H	/ 10 Zy	All	V oru	<u>)                                    </u>		OF PENNS AL SEAL nder, Notan Erie Count	
Kloubert & allerce	Oli -	_	Sol	gnæure	of Person Subr Printed Nar	4420	iett.		ARI SARI	
My Commission expires 10 31 3	019	_	814	<b>,</b> 		88/-	406	2	3 1.2	
MO. DAY YE	₹.		Area Code			iytime rele	priorie realiti		MMON O	
Part II- If this is a report of a Candidate's Authorize I swear (or affirm) that to the best of my knowledge amended.	d Committee, candid e and belief this polit	date shall sign tical committe	here. e has not vic	lated a	ny provisions of	the Act of	June 3, 1937	7 (P.L. 13	Ō ♥ 35,710.320) as	
Sworn to and subscribed before me this										
day of20	- '1	-	<del>.</del>	Si	gnature of Cano	lidate				
Signature	- j.	-			Printed Name	e		<del></del>		
My Commission expires		-	Area Code			vtime Teler	hone Numb	er		
MO. DAY YR.			Area Code		Da	, anna reich	ITWINE			

### PART D

Filer Identification Number:

### **All Other Contributions**

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

Full Name of Contributor	<u> </u>	Date [MM/DD/YYYY]
GEORGE HA	ZUDA	05/05/2017
House # Street Address		Date [MM/DD/YYYY] \$
5159	MERILEE DRIVE	05/08/2017
Ghy ERIE	State Zip Gode 16506	Date [MM/DD/YYYY] \$ 2800.00
Employer Name	MOREE' ADVERTISING, INC.	Occupation PRESIDENT
Employer Mailing Address / Principal Place of Business	5159 Merilee Drive Erie, PA 16506	The company of the second
Full Name of Contributor		Date [MM/DD/YYYY] \$
GEORGE HA	ZUDA	05/15/2017
House # Street Address		Date [MM/DD/YYYY] \$
5159	MERILEE DRIVE	
City ERIE	State Zip Code 16506	Date [MM/DD/YYYY] \$
Employer Name	MOREE' ADVERTISING, INC.	Occupation PRESIDENT
Employer Mailing Address / Principal Place of Business	5159 Merilee Drive Erie, PA 16506	Proceedings (Control of Control o
Full Name of Contributor		-Date [MM/DD/YYYY] \$
House # Street Address		Date [MM/DD/YYYY] \$
City.	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address / Principal Place of Business		Fifteen was distributed in
Full Name of Contributor	<u> </u>	Date [MM/DD/YYYY] \$
House:# Street Address		Date:[MM/DD/YYYY] \$
City	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address / Principal Place of Business		

# Statement of Expenditures

Filer Ider	itification	n Number:
id face /	de Carre	4 4 4

To Whom Paid	Date [MM/DD/YYYY] \$				
JET 1400	05/08/17				
House # ONE Street Address BOSTON STORE PLACE	Description of Expenditure				
City State Zip					
ERIE PA Code 16501	RADIO ADS				
To Whom Paid WFXP 66	Date [MM/DD/YYYY] \$ 1147.50				
	05/08/17				
House # 8455 Street Address PEACH STREET	Description of Expenditure				
Gity ERIE State PA Zip Code 16509	TV ADS				
To Whom Paid GOHRS PRINTING	Date [MM/DD/YYYY] \$ 1545.82				
	05/09/17				
House # 10575 Street Address WEST MAIN ROAD	Description of Expenditure				
City NORTH EAST State PA Code 16428	POLITICAL MAILER				
Tó. Whom Paid	Date [MM/DD/YYYY] \$				
WSEE 35	05/09/17				
House# 3514 Street Address STATE STREET	Description of Expenditure				
City ERIE State PA Code 16508	TV ADS				
To Whom Paid  DESANTIS SIGNS & GRAPHICS	Date [MM/DD/YYYY] \$ 689.53				
VE OF THE STATE OF	05/10/17				
House # 540 Street Address WEST 18TH STREET	Description of Expenditure				
City ERIE State PA Zip Code 16502	YARD SIGNS				
To Whom Paid: WJET 24	Date [MM/DD/YYYY]   \$   2975.00				
	05/10/17				
House:# 8455 Street Address PEACH STREET	Description of Expenditure				
City ERIE State PA ZIP Code 16509	TV ADS				
To Whom Paid	Date [MM/DD/YYYY] \$				
WICU 12	05/12/17 1020.00				
House # 3514 Street Address STATE STREET	Description of Expenditure				
City   State   PA   Code   16508	TV ADS				
To Whom Paid   ERIE COUNTY	Date [MM/DD/YYYY] \$ 100.00				
	05/12/17 Tobasia Postription of Expenditure				
House:# 140 Street Address WEST 6TH STREET	- vescription or experiature				
City ERIE State PA Zip Code 16501	LATE FILING FEE 24 HR REPORT				

#### 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 o	f Creditor		GEORGE HA	AZUDA					4	standing Balance of Debt
House #	5	Stre	et Address		100 A	A-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	EIDEBTING	The second of the second of the second	\$	
	5159		5 (24) 5 (24)	MERILEE DRIVE			MM/DD/Y	April 17, Respublication of the Co.		
City					State	02/2	24/2015 - 05 <b>Zip</b>	/04/15		2 448 09
City			ERIE			PA	Code	16506		2,448.09
Descript	ion of Debt		LOANS TO	COMMITTEE TO ELECT GEORGE H	ΔΖΙΙΝΔ					
			EOANS TO	COMMITTEE TO ELECT GLONGE II	n200A			•	DECEMBER OF	
Name o	f Creditor		GEORGE H	AZUDA					Out	standing Balance of Debt
House #	8	Stre	et Address		# #		E DEBT INC	NO. 000-313 E. C.	S	
Ť	5159		E Valley and	MERILEE DRIVE	<u>3</u>		MM/DD/Y	M 4 C 4		
City					State		73/17 - 04/2 <b>Zip</b>			4,099.00
			ERIE			PA	Code	16506		4,099.00
Descript	ion of Debt	ii Allo	LOANS TO	COMMITTEE TO ELECT GEORGE H	AZUDA					
			LOANS TO	COMMUNITACE TO ELECT GEORGE IT	n.coda					<u></u>
Name o	f Creditor		GEORGE H	AZUDA					Out	standing Balance of Debt
House #		Stre	l et Address			DAT	E DEBT INC	URRED	S	
	5159			MERILEE DRIVE	4.	1	MM/DD/Y	YYY]		
		s 71		IVIERILEE DRIVE		05,	/05/17 - 05/	15/17		
City			ERIE	, , ,	State	PA	Zip Code	16506	2000年	11,400.00
Descript	ion of Debt	5000) 2007			Alles Maria		Loue	ur Ir		
	April Allendar		LOANS TO	COMMITTEE TO ELECT GEORGE H.	AZUDA				100 ms/ 100	
Name o	f Creditor								Out	standing Balance of Debt
House #		Stre	et Address		7.0	古典 "2"、红色麻醉	E DEBT INC	Programme and the second of th	\$	
					<u> </u>	arasa <b>l</b>	MM/DD/Y	YYY IE SE SE		
City					State		Zip			
CILY							Code			
Descript	lon of Debt 7				190 11311 11711				1. 1.77	
		Ţ							Land Woman	
Name o	f Creditor								Out	standing Balance of Debt
House #	en e sud de la cidade del cidade de la cidade de la cidade del cidade del cidade de la cidade de la cidade del cidade de la cidade de la cidade de la cidade del cidad	I ANNUTU	CARSON SERVICES					-A1021-77-78-17-27-20-50-80-80-80-80-80-80-80-80-80-80-80-80-80	No. 1, Les 1, 17	The second secon
		Stre	et Address		i i	3 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	E DEBT INC	AND SIX SHEET SECURITY.	<b>S</b>	
	opposition ( Const.)	Stre	et Address			3 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	E DEBT INC MM/DD/Y	AND SIX SHEET SECURITY.	\$	
		Stre	et Address		<u> </u>	3 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	MM/DD/Y	AND SIX SHEET SECURITY.	<b>S</b>	
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	ilon ôf Debt	Stre	et-Address		<u> </u>	3 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	MM/DD/Y	AND SIX SHEET SECURITY.		
		Stre	et-Address		<u> </u>	3 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	MM/DD/Y	AND SIX SHEET SECURITY.	<b>S</b>	
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Descript	ilon of Debt				<u> </u>		MM/DD/Y	YYY) 		standing Balance of Debt
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Descripi Name o	ilon of Debt				State	] IAD	Zip Code E DEBT ING	VYY)	Out	
Descripi Name o	ilon of Debt				<u> </u>	] IAD	Zip Code E DEBT INO MM/DD/Y	VYY)	Out	
Descript Name of House #	ilon of Debt				State	] IAD	Zip Code E DEBT ING	VYY)	Out	