

Pre-Primary	Pre-Primary	Primary	Pre-Election	Pre-Election	Election	Pre-Election	Pre-Election	Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		11/08/2022	Year	2022	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2022	12/31/2022	
A. Amount Brought Forward From Last Report	\$	1747.60	<p style="text-align: center;"> 2023 JAN 25 PM 12:55 ERIE COUNTY VOTER REGISTRATION </p>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0	
C. Total Funds Available (Sum of Lines A and B)	\$	1747.60	
D. Total Expenditures (From Schedule III)	\$	4.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	1743.60	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0.00	

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

18 day of JAN 20 23

Signature of Person Submitting report

Printed Name

Area Code

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

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)	\$	0
Total for the reporting period (2)	\$	0

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)	\$	0
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>	\$	0

Committee								
House #		Street Address			Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$		
House #		Street Address			Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$		
House #		Street Address			Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$		
House #		Street Address			Date [MM/DD/YYYY]	\$		
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$		
House #		Street Address			Date [MM/DD/YYYY]	\$		
City		State		Zip Code		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]	\$
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]	\$
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]	\$
Full Name of Contributor		Date [MM/DD/YYYY]			\$
House #		Street Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$

Contributing Committee							
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code	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			
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			
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			
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			
Full Name of Contributor		Date [MM/DD/YYYY]	\$
House #	Street Address	Date [MM/DD/YYYY]	\$

				Code			
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							
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							

2. IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.01 TO \$250.00 (FROM PART F)

TOTAL for the reporting period

(2)

\$

0

3. IN-KIND CONTRIBUTION RECEIVED VALUE OVER \$250.00 (FROM PART G)

TOTAL for the reporting period

(3)

\$

0

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

City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							
Full Name of Contributor						Date [MM/DD/YYYY]	\$
House #		Street Address				Date [MM/DD/YYYY]	\$
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							
Full Name of Contributor						Date [MM/DD/YYYY]	\$
House #		Street Address				Date [MM/DD/YYYY]	\$
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							
Full Name of Contributor						Date [MM/DD/YYYY]	\$
House #		Street Address				Date [MM/DD/YYYY]	\$
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							
Full Name of Contributor						Date [MM/DD/YYYY]	\$

City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name						Occupation		
Employer Mailing Address / Principal Place of Business						Description of Contribution		
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						Description of Contribution		
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						Description of Contribution		
Full Name of Contributor						Date [MM/DD/YYYY]	\$	

To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City			State		Zip Code		
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City			State		Zip Code		
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City			State		Zip Code		
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City			State		Zip Code		
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City			State		Zip Code		
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
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					
Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City	State	Zip Code			
Description of Debt					