Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification 20180052 Report Filed By: CANDIDATE COMMITTEE V LOBBYIST								SYIST								
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		ENE	RGY	VOI	CES PAC								
Street Address:	2200 GEORGE	TOWNE	DR, STE 5	500												
City:	SEWICKLEY							State:	PA			Zip Cod	ie: 15	5143-8	753	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY							3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	Ē- 5	5. 30 DAY POST- 6. ELECTION						TERMINATION Yes REPORT?				\
report type)	ANNUAL REPORT	7.	Year 2022					NG METH CHECK O				PAPER		\	DISKE	TTE
Name of Office S	me of Office Sought by Candidate:							N	District Number	Office Code	Par	ty Code	County			
								МО	DAY	YI	AR			·		
								11		8	2022		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	irom:		3 29	2	022	Т	<u> </u>	5	5	2	2022					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			1,0	37.49					
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.01					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			1,0	37.50					
D. Total Expen	ditures (From Sch	edule II	I)				\$				0.00					
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$			1,0	37.50					
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00					
				AFF	IDA	VI	ΓSE	CTION								
	s a Committee rep	•							•							
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedules	s filed	lon	paper	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed before me this day of	ì	20							9	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu						- -					Prin	ted Name	e		
My Commission Ex	Signatu opires	ie										Ema	il			
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	none Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has ı	not viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	. 1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of 						_					Printe	d Name			
	Signature						-									
My Commission Exp	_											Ema	il			
	МО	D	AY	YR	1		•		Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
ENERGY VOICES PAC	From:	<u>3/29/202</u>	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)	_		\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting) Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.01
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.01

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Fining Committee of Candidate					Reporting Period From: To:					
					DATE		AN	4OUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$ \$	0.00		
City	State	Zip Code (Plus 4)	1							

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate					Reporting Period					
			Fror	From: To:						
				D	ATE			AMOUN	IT	
				МО	DAY	YEAR	2			
Mailing Address								\$	0.00	
State	Zip (Code (Plus	5 4)							
				Occupa	tion					
e of		City			State		Zip	Code (Plu	us 4)	
dule I, Detailed Su	umma	ry Page,	Section	on 3.			\$	PAGE T	0.00	
	e of	e of	e of City	State Zip Code (Plus 4)	From: MO State Zip Code (Plus 4) Occupation	State Zip Code (Plus 4) Occupation October 1	State Zip Code (Plus 4) Occupation City State	State Zip Code (Plus 4) Occupation Occupation City State Zip Odule I, Detailed Summary Page, Section 3.	State Zip Code (Plus 4) Occupation Occupation Occupation Occupation PAGE 1	

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting F	Period	
ENERGY VOICES PAC	From:	3/29/2022 To:	5/2/2022
		DATE	AMOUNT

			D.	ATE		AMOUNT
Full Name Fidelity Investments			мо	DAY	YEAR	
Mailing Address 450 N Federal Highway, Ste 200				2	2022	\$ 0.01
City Ft. Lauderdale	State FL	Zip Code (Plus 4) 33301	5	2	2022	
Receipt Description Bank Interes	t					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$0.01

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
ENERGY VOICES PAC	From:	3/29/2022 To:	<u>5/2/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period				
	Fr					To:	То:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	ame of Filing Committee or Candidate				Re	porting F	Period				
					Fro	om:		To:	:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	tion		•		
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Name of Filing Committee or Candidate					Reporting Period					
	From			То:							
				DATE			AMOUNT				
To Whom Paid			МО	DAY	YEAR						
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure						
-							PAGE TOTAL				
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00				