Campaign Finance Report

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

Filer Identificati Number :	ion 2022(0223			Repor Filed		CANDI	DATE	co	OMMITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candida	ate or Lo	obbyist:			-	G FOR PE	NNSYL	VANIA						
Street Address:	PO BOX 140														
City:	MARTINS CRE	EK					State: PA Zip Cod					ode: 18063-0140			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2. X	30 DA PRIM		POST-	3.		AMENDMENT REPORT?		No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5.	30 D/ ELEC		POST-	6.	TERMI REPOR	NATION T?	Yes	No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2022				NG METHO CHECK O			PAPER	1	\checkmark	DISKE	TTE	
Name of Office Sought by Candidate:							DATE O	F ELEC	TION	Distric		Par	ty Code	County Code	
	2						мо	DAY	YEAR	Tunio	GOV	LIB		coue	
GOVERNOR							11		8 20	22	(SEE IN	STRUCTI	ONS FOR	CODES)	
Summary of	Receipts and	мо	DAY	YEAR	1		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY		
Expenditures	s from:		4 1	2	022 1	0	4	3	0 20)22					
A. Amount Bro	ught Forward From	1 Last R	eport			\$			23.	70					
B. Total Monet	ary Contributions A	And Reco	eipts (Fron	n Sche	dule I)	\$			238.	80					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			262.	50					
D. Total Expen	ditures (From Sche	dule II	[)			\$			0.	00					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$			262.	50					
F. Value Of In-	Kind Contributions	Receive	ed (From S	Schedu	le II)	\$			0.	00					
G. Unpaid Deb	ts And Obligations	(From S	chedule I\	/)		\$			972.	91					
				AFF	IDAV	T SE	CTION								
PART I - If this is	s a Committee repo	ort, trea	surer sign	here.	If this i	s a Cai	ndidate re	eport, ca	andidate	sign here	•				
I swear (or affirm correct and compl) that this report, incluent etc.	uding the	attached so	chedules	s filed on	paper	or by elect	ronic me	dium, are	to the best	of my knov	vledge	and beli	ef , true	
Sworn to and subs	scribed before me this day of		20						Signa	ture of Pers	on Submitt	ing Rep	oort		
	Signatur	·9				_				Pri	nted Name	1			
My Commission E	-	C .								Em	ail				
	мо	DA	AY	YR				Are	a Code	Dayti	me Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	l Comn	nittee, (Candid	ate shall	sign he	re.						
I swear (or affirm) No 320) as amende) that to the best of m ed.	ıy knowle	edge and bel	ief this	political	comm	ittee has n	ot violato	ed any pro	ovisions of t	he act of Ju	une 3,1	937 (P.L	. 1333,	
Sworn to and subso	cribed before me this day of		20							Signature	of Candida	ate			
						_				Prin	ted Name				
My Commission Exp	Signature bires					_				Em	ail				
	мо	DA	AY	YR		-		Area C	ode		Daytime To	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** HACKENBURG FOR PENNSYLVANIA From: <u>4/1/2022</u> **To:** <u>4/30/2022</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 47.40 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 191.40 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 191.40 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 238.80 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				orting I	Period			
				From: To:				
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

PART B 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 Filing Committee or Candida	te		Rep	orting Pe	eriod						
HACKENBURG FOR PENNSYLVANIA					rom: <u>4/1/2022</u> To: <u>4/30/2</u>						
DATE								AMOUNT			
Full Name of Contributor Richard Ravotti				мо	DAY	YEAR					
Mailing Address 199 Sunset Drive							\$	95.70			
City Leechburg	State	Zip Code (Plus 4)	4	12	2022					
	PA	15656									
Full Name of Contributor Ross Sylvester				мо	DAY	YEAR					
Mailing Address 308 Riota Way							\$	95.70			
City Pittsburgh	State	Zip Code (Plus 4)	4	15	2022					
	PA	15210									
								PAGE TOTAL			
Enter Grand Total of Part A on	Schedule I, Detaile	ed Summary Pag	le, Se	ection 2			\$	191.40			

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			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

PART D 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			Repo	orting Pe	riod			
	From				From: To:			
				D/	ATE		A	MOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Sectio	on 3.			P. \$	AGE TOTAL 0.00

PART E **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			Report	ing Peric	d			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus 4)					
Receipt Description	·							
		_	.				PAGE TOT	AL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$	0.00

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 Period		
HACKENBURG FOR PENNSYLVANIA	From:	<u>4/1/2022</u> то:	<u>4/30/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period				
F						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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,		PAGE TOTA	L
						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				porting F	Period		
	Fro	m:		То:			
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
	From			То:			
				DATE			AMOUNT
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Enter Grand Total of Exponditures	on Page 1. Penert (Cover Bage Item [`				PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			ng Period				
HACKENBURG FOR PENNSYLVANIA			From:		<u>4/1/2022</u>	То:	<u>4/30</u>	<u>)/2022</u>
					DATE		Outsta Balance	nding e of Debt
Name of Creditor Matt Hackenburg				мо	DAY	YEAR		
Mailing Address 10210 Gravel Hill R	d.			4	30	2022	\$	972.91
City Bangor	State PA	Zip Code (F 18013	Plus 4)	Campai website	t ion of Deb gn expend hosting, b ition cards	itures fo oumper s		registration, nd
Fater Crand Tatal of Upmaid Date							P	AGE TOTAL
Enter Grand Total of Unpaid Deb	ts on Page :	т, керогт Cover Ра	ige, Item	I G.			\$	972.91