

Campaign Finance Report

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

Filer Identification Number : 2022C0224		Report Filed By :	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: MELISSA HART										
Street Address:										
City:			State:	Zip Code: 15015						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2022	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
GOVERNOR				MO	DAY	YEAR	-1	GOV	REP	
				11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		3	29	2022		5	2	2022		
A. Amount Brought Forward From Last Report				\$		(3,836.92)				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		0.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		(3,836.92)				
D. Total Expenditures (From Schedule III)				\$		1,553.75				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		(5,390.67)				
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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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 _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
MELISSA HART	From: <u>3/29/2022</u> To: <u>5/2/2022</u>

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)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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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	Reporting Period
	From: _____ To: _____
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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 Candidate	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor		MO	DAY	YEAR	\$	0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 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	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE 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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code (Plus 4)			
Receipt Description					

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

PAGE TOTAL
\$ 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 MELISSA HART	Reporting Period From: <u>3/29/2022</u> To: <u>5/2/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
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, Reports Cover Page, Item F.)	\$ 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
	From: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Description of Contribution:				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code(Plus 4)			
Employer of Contributor			Occupation		
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MELISSA HART	From <u>3/29/2022</u> To: <u>5/2/2022</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
COSTCO					
Mailing Address 1050 CRANBERRY SQ DR.	4	29	2022	\$	35.54
City CRANBERRY TWP.				Description of Expenditure	
State PA				FOOD FOR OFFICE OPENING	
Zip Code (Plus 4) 16066					
To Whom Paid	MO	DAY	YEAR		
COMMONWEALTH OF PA					
Mailing Address 500 NORTH OFFICE	4	25	2022	\$	40.00
City HARRISBURG				Description of Expenditure	
State PA				LATE FEES	
Zip Code (Plus 4) 17120					
To Whom Paid	MO	DAY	YEAR		
COSTCO					
Mailing Address 1050 CRANBERRY SQ. DR.				\$	267.60
City CRANBERRY TWP.				Description of Expenditure	
State PA				GAS FOR CAMPAIGN TRAVEL	
Zip Code (Plus 4) 16066					
To Whom Paid	MO	DAY	YEAR		
SHEETZ					
Mailing Address VARIOUS				\$	396.77
City				Description of Expenditure	
State PA				GAS FOR CAMPAIGN TRAVEL	
Zip Code (Plus 4)					
To Whom Paid	MO	DAY	YEAR		
MYERS LAW GROUP, LLC					
Mailing Address 17025 PERRY HWY.	4	5	2022	\$	10.00
City WARRENDALE				Description of Expenditure	
State PA				NOTARY SERVICES	
Zip Code (Plus 4) 15086					

To Whom Paid STAPLES			MO	DAY	YEAR	
Mailing Address 1675 RT. 228			4	16	2022	
City CRANBERRY TWP.	State PA	Zip Code (Plus 4) 16066	Description of Expenditure PRINTING			
To Whom Paid WEXFORD BEER			MO	DAY	YEAR	
Mailing Address 10624 PERRY HWY			4	5	2022	
City WEXFORD	State PA	Zip Code (Plus 4) 15090	Description of Expenditure BEVERAGES FOR FUNDRAISER			
To Whom Paid ANGIES BROOKSIDE			MO	DAY	YEAR	
Mailing Address 1360 EISENHOWER BLVD.			3	24	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure DINNER WHITE TRAVELING			
To Whom Paid MT. LEBANON			MO	DAY	YEAR	
Mailing Address 710 WASHINGTON RD			4	20	2022	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15228	Description of Expenditure PARKING			
To Whom Paid SOUTHERN TIER PGH.			MO	DAY	YEAR	
Mailing Address 316 N. SHORE DR.			4	20	2022	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15212	Description of Expenditure FOOD FOR CAMPAIGN MEETING			
To Whom Paid MATTY'S			MO	DAY	YEAR	
Mailing Address 74 WALTER DR.			4	11	2022	
City LEWISBURG	State PA	Zip Code (Plus 4)	Description of Expenditure DINNER WHILE TRAVELING			

To Whom Paid CADENCE CLUBHOUSE CAFE			MO	DAY	YEAR	\$	46.52
Mailing Address 9999 KUMMER RD			4	8	2022		
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101	Description of Expenditure CAMPAIGN STOP DINNER				
To Whom Paid ETENDED STATE AMERICA			MO	DAY	YEAR	\$	94.34
Mailing Address 300 N. MOREHALL RD.							
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure LODGING				
To Whom Paid NORTH HILLS COMM OUTREACH			MO	DAY	YEAR	\$	35.00
Mailing Address 1975 FERGUSON RD.			4	3	2022		
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101	Description of Expenditure EVENT				
To Whom Paid SOHO RESTAURANT			MO	DAY	YEAR	\$	50.00
Mailing Address FEDERAL ST			4	12	2022		
City PITTSBURGH	State PA	Zip Code (Plus 4) 15212	Description of Expenditure CAMPAIGN MTG				
To Whom Paid WALNUT GRILL			MO	DAY	YEAR	\$	35.96
Mailing Address 12599 PERRY HWY			4	6	2022		
City WEXFORD	State PA	Zip Code (Plus 4) 15090	Description of Expenditure DINNER MTG W/ TREASURER				
To Whom Paid EZ PASS			MO	DAY	YEAR	\$	255.00
Mailing Address 300 EAST PARK DR.							
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure TUNPIKE TOLLS				

To Whom Paid BJ'S			MO	DAY	YEAR	
Mailing Address 3805 HARTZDALE DR.			4	22	2022	\$ 39.22
City HARRISBURG	State PA	Zip Code (Plus 4) 17011	Description of Expenditure GAS			
To Whom Paid SUNOCO			MO	DAY	YEAR	
Mailing Address RTS. 309 & 378			4	13	2022	\$ 18.72
City CENTER VALLEY	State PA	Zip Code (Plus 4) 18034	Description of Expenditure GAS			
To Whom Paid SUNOCO			MO	DAY	YEAR	
Mailing Address 1101 N. CAMERON ST.			4	14	2022	\$ 24.82
City HARRISBURG	State PA	Zip Code (Plus 4) 17011	Description of Expenditure GAS			
To Whom Paid KC FUEL			MO	DAY	YEAR	
Mailing Address 7397 LINCOLN HIGHWAY			4	2	2022	\$ 18.16
City CENTRAL CITY	State PA	Zip Code (Plus 4)	Description of Expenditure GAS			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,553.75

