### **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 :	on 202	2C1553			Repoi			CAND	DATE	🔻	<b>/</b>	ОММІТТІ	E	LOB	BYIS	ST	
Name of Filing C	ommittee, Candi	date or L	obbyist:		PACE,	MICH	IAE	L P		_							
Street Address:																	
City:	_						9	State:				Zip Co	de: 1	6441			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 I PRII			POST-	3.		AMENDI REPORT		Yes		No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. <b>X</b>	30 E			POST-	6.		TERMIN. REPORT		Yes		No	<b>\</b>
report type)	ANNUAL REPOR	Г 7.	<b>Year</b> 2022					G METH				PAPER		<b>/</b>	DIS	KETTE	
Name of Office S	ought by Candid	ate:	-					DATE C	F ELE	СТ	ION	District Number	Office Code	Pa	rty Co	ode Cou	
DEDDECEMENT	VE IN THE CENE	DAL ACC	EMBLY				Ī	мо	DAY		YEAR	2	STH	RE	P	25	
REPRESENTATI	VE IN THE GENE	KAL ASS	EMDLT					11		8	202	2	(SEE IN	ISTRUCT	ONS F	OR CODE	S)
Summary of		МО	DAY	YEAR			I	МО	DAY		YEAR	FC	R OFFI	CE USE	ON	LY	
Expenditures	irom:		6 6	20	022	го		10	)	24	202	2					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				(127.00	)					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$				0.0	0					
C. Total Funds	Available (Sum C	)f Lines A	and B)				\$				(127.00	)					
D. Total Expend	ditures (From Sc	nedule II	I)				\$			10	0,268.00	)					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$		(	(10,	,395.00	)					
F. Value Of In-	Kind Contribution	ıs Receiv	ed (From S	chedul	le II)		\$				0.00	)					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	/)			\$				0.00			'			
				AFF	IDAV	IT S	EC	CTION									
PART I - If this is			_									_					
I swear (or affirm) correct and complete	that this report, in ete.	cluding the	e attached sc	hedules	filed or	ı pape	er o	r by elect	tronic m	nedi	um, are to	the best o	f my kno	wledge	and	belief , t	rue
Sworn to and subs	cribed before me th day of	is	20								Signatu	re of Perso	n Submit	ting Re	port		_
	Signat	ure				_						Prin	ted Nam	e			_
My Commission Ex	cpires					_						Ema	il				
	мо	D	AY	YR					Ar	rea (	Code	Daytin	ne Telep	hone Nu	ımbe	r	
Part II- If this is	a report of a car	ididate's	authorized	Comm	nittee,	Candi	ida	te shall	sign h	ere							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and beli	ief this	politica	l com	mit	tee has r	ot viola	ated	any prov	isions of th	e act of I	lune 3,1	.937	(P.L. 13	33,
Sworn to and subsc	ribed before me thi	\$	20									Signature	of Candic	late			_
						_						Printe	ed Name				-
My Commission Exp	Signature					_						Ema	il				-
						_											_
	МО	D	AY	YR					Area	Coc	de	D	aytime 1	Telepho	ne Nu	ımber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
PACE, MICHAEL P	From:	6/6/202	<u>2</u> To:	10/24/2022
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)	\$	0.00
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			\$	0.00

#### **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							
		1	From:		То	:				
		•		DATE			AMOUNT			
Full Name of Contributing Committee			МО	DAY	YEAR					
Mailing Address		_				\$	0.00			
City	State	Zip Code (Plus 4)								

PAGE TOTAL
0.00

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

## 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						
			Fro	m:		To	<b>)</b> :		
		_			DATE			AMOUNT	
Full Name of Contributor				МО	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 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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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				Repo	orting Pe	riod					
				Fron	n:		1	Го:			
					D	ATE			AN	MOUNT	
Full Name of Contributor					МО	DAY	YEAR	2	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		Zi	ip Cod	e (Plus 4)	)
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	umm	ary Page,	Section	on 3.				P	AGE TOTA	<b>L</b>
								\$		C	0.00

## 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 Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Perio	od	
PACE, MICHAEL P	From:	<u>6/6/2022</u> <b>To:</b>	10/24/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
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 Car			Reporting Period					
	ame of Contributor  g Address  State  Zip Code (Plus 4		From:		То:			
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
PACE, MICHAEL P	From	6/6/2022	То:	10/24/2022	
		DATE		AMOUNT	

To Whom Paid Google  Mailing Address  City Mountain View State CA 94043  To Whom Paid  Midget Financial  Mailing Address  City Erie State Zip Code (Plus 4) PA 16514  To Whom Paid  Committee To Elect Michael Pace  Mailing Address  City Waterford State Zip Code (Plus 4) PA 16441	web don	DAY  2 ion of Expension  DAY	YEAR 2022 enditure	\$	<b>AMOUNT</b> 48.00
Mailing Address  City Mountain View State Zip Code (Plus 4) CA 94043  To Whom Paid  Mailing Address  City Erie State Zip Code (Plus 4) PA 16514  To Whom Paid  Committee To Elect Michael Pace  Mailing Address  City Waterford State Zip Code (Plus 4) PA 16441	7  Descript web don  MO  7	2 ion of Expension	2022 enditure	\$	48.00
Mailing Address  City Mountain View  State CA 94043  To Whom Paid  Mailing Address  City Erie State Zip Code (Plus 4) PA 16514  To Whom Paid  Committee To Elect Michael Pace  Mailing Address  City Waterford State Zip Code (Plus 4) 16441	Descript web don	nain	enditure	\$	48.00
City Mountain View  State CA  94043  To Whom Paid  Widget Financial  Mailing Address  City Erie  State PA  16514  To Whom Paid  Committee To Elect Michael Pace  Mailing Address  City Waterford  State PA  16441	Descript web don	nain	enditure	\$	48.00
CA 94043  To Whom Paid  Widget Financial  Mailing Address  City Erie State Zip Code (Plus 4) PA 16514  To Whom Paid  Committee To Elect Michael Pace  Mailing Address  City Waterford State Zip Code (Plus 4) PA 16441	web don	DAY			
Fo Whom Paid Widget Financial Mailing Address City Erie State Zip Code (Plus 4) PA 16514  Fo Whom Paid Committee To Elect Michael Pace Mailing Address City Waterford State Zip Code (Plus 4) PA 16441	<b>MO</b> 7	DAY	YEAR		
Mailing Address  City Erie State Zip Code (Plus 4) PA 16514  To Whom Paid Committee To Elect Michael Pace  Mailing Address  City Waterford State Zip Code (Plus 4) PA 16441	7		YEAR		
Mailing Address  City Erie State Zip Code (Plus 4) PA 16514  To Whom Paid Committee To Elect Michael Pace  Mailing Address  City Waterford State Zip Code (Plus 4) PA 16441	7				
State PA 16514  To Whom Paid Committee To Elect Michael Pace Mailing Address  City Waterford State PA 16441		16			
PA 16514  To Whom Paid Committee To Elect Michael Pace  Mailing Address  City Waterford  PA 2ip Code (Plus 4) PA 16441	Descript	10	2022	\$	120.00
Committee To Elect Michael Pace  Mailing Address  City Waterford  State  PA  16441		ion of Exp	enditure		
Committee To Elect Michael Pace  Mailing Address  City Waterford  State  PA  16441	loan				
Mailing Address  City Waterford  State  PA  16441	мо	DAY	YEAR		
City Waterford State Zip Code (Plus 4) PA 16441	1.0				
PA 16441	8	18	2022	\$	3,000.00
	Descript	ion of Exp	enditure		
	loan				
To Whom Paid	мо	DAY	YEAR		
Committee To Elect Michael Pace	PIO	DAI	ILAK		
Mailing Address	9	19	2022	\$	7,000.00
City Waterford State Zip Code (Plus 4)	Descript	ion of Exp	enditure		
PA 16441	loan				
To Whom Paid	МО	DAY	VEAD		
Department of State	МО	DAT	TEAR		
Mailing Address	8	1	2022	\$	100.00
City Harrisburg State Zip Code (Plus 4)	Descript	ion of Exp	enditure	•	
PA 17120	filing fee	9			
					PAGE TOTAL
inter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				<b> </b>	10,268.00
Department of State  Mailing Address  City Harrisburg State Zip Code (Plus 4)	Descript	ion of Exp			