Campaign Finance Report

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

Filer Identificat Number :	ion 2022	20418			Repor Filed I		CANDI	DATE		СОМІ	MITTEE	✓	LOB	BYIST			
Name of Filing	Committee, Candio	late or L	obbyist:		COMMI	TTEE	TO ELECT	Г MICH	AEL I	PACE							
Street Address:	Street Address:																
City:	ERIE						State: PA Z					Zip Code: 16509					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA PRIMA		POST-	3.		AMENDN REPORT		Yes	No	\checkmark		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		POST-	6.		TERMIN REPORT		Yes	V No			
report type)	ANNUAL REPORT	7. X	Year 2022				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE		
Name of Office	L Sought by Candida	nte:			<u>I</u>		DATE O	F ELE(СТІО	N	District Number	Office Code	Par	ty Code	County Code		
							мо	DAY	YE	AR	Humber	couc	REF	,	coue		
							11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)		
	Receipts and	мо	DAY	YEAR	1		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY			
Expenditure	s from:		11 29	20	022 T	0	1		2	2023							
A. Amount Bro	ought Forward Fro	m Last R	eport			\$			(74	45.01)							
B. Total Monet	tary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$			7	45.01							
C. Total Funds	Available (Sum O	f Lines A	and B)			\$				0.00							
D. Total Exper	nditures (From Sch	edule II	I)			\$				0.00							
E. Ending Casl	n Balance (Subtrac	t Line D	From Line	C)		\$				0.00	-						
F. Value Of In	-Kind Contribution	s Receiv	ed (From S	chedul	le II)	\$				0.00	-						
G. Unpaid Deb	ts And Obligations	s (From S	Schedule IV	/)		\$				0.00							
				AFF	IDAVI	T SE	CTION										
	is a Committee rep		-									f my knou	uladaa	and hali	of true		
correct and comp	ı) that this report, ind lete.	cluaing the	e attached sc	nequies	s mea on	paper	or by elect	ronic me	arum,	, are to	the best o	т ту кноч	vieage	and ben	er, true		
Sworn to and sub	scribed before me thi day of 	is	20						s	ignature	e of Perso	n Submitt	ing Rep	oort			
	Signati	ure				_					Prin	ted Name					
My Commission E	xpires					_					Ema	il					
	мо	D	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, C	Candid	ate shall	sign he	ere.								
I swear (or affirm No 320) as amend) that to the best of led.	my knowle	edge and beli	ief this	political	comm	ittee has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,		
Sworn to and subs	cribed before me this day of	;	20							s	ignature	of Candida	ite				
						_					Printe	ed Name					
My Commission Ex	Signature pires					_					Ema	il					
						_											
	МО	D	AY	YR				Area (Code		D	aytime Te	elephor	e Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO ELECT MICHAEL PACE	From:	<u>11/29/202</u>	<u>2</u> To:	<u>1/2/2023</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	745.01
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	\$	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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	745.01

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			м	10	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	

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 P	eriod				
			Fror	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address		_					\$	0.00	
City	State	Zip Code (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2			\$	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						
				To:					
				DA	TE		ŀ	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				Reporting Period				
Fre					From:			
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, 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	Name of Filing Committee or Candidate			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 TO	TAL
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 Perio	od	
COMMITTEE TO ELECT MICHAEL PACE	From:	<u>11/29/2022</u> To:	<u>1/2/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	2	
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	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 R			Reporting Period					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period				
						То:			
			DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$ 0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor		•		Occupa	ation				
Employer Mailing Address/Principal Plac	e of Business	City	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	d Contributions D	etaile	d			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	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)				tion of Exp	enditure					
Enter Grand Total of Exponditures	on Page 1. Penert (Cover Bage Item [`				PAGE TOTAL			
Enter Grand Total of Expenditures of	JII Page 1, Report C	lover Page, menn i				\$	0.00			