#### **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 2020	0021			Report Filed		CA	WDI	DATE		COMN	AITTEE	<b>~</b>	LUB	D1131	
Name of Filing C	ommittee, Candida	ate or L	obbyist:	•	ELECT	GREG	HAYI	ES	•				•			
Street Address:	2050 SOUTH :	SHORE	DR.													
City:	ERIE						Stat	e:	PA			Zip Co	de: 1	6505		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		F	POST-	6.		TERMIN/ REPORT		Yes	No	)
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2022				FILING METHOD ( ) CHECK ONE					PAPER DISKE			TTE	
Name of Office S	ought by Candidat	e:					DAT	TE O	F ELEC	TIOI	N	District Number	Office Code	Pa	rty Code	County Code
							МО		DAY	YE	AR			REI	•	
								11		8	2022		(SEE IN	ISTRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YE	AR	FC	OR OFFI	CE USE	ONLY	
Expenditures	trom:	:	11 29	20	022	ТО		12	3	1	2022					
A. Amount Brought Forward From Last Report						\$				5	67.06					
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sche	dule I)	\$	;				0.00					
C. Total Funds Available (Sum Of Lines A and B)						\$				5	67.06					
D. Total Expend	ditures (From Sche	dule II	1)			\$	i			56	67.06					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$	<u> </u>				0.00					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)	\$	;				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$				7,53	32.94					
						IT SE										
	that this report, incl		_								_		of my kno	wledge	and beli	ef , true
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My Commission Ex	· —											Ema				
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My Commission Exp	Signature ires											Ema	nil			
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# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
ELECT GREG HAYES	From:	11/29/202	<u>2</u> To:	12/31/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	J 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	J 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 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

Name of Filing Committee or Candidate				ng Period			
		From:		То	:		
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		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

### 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 Filling Committee of Candidate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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					
		Fron	n:		То	То:		
			D/	ATE		АМ	OUNT	
			МО	DAY	YEAR			
						\$	0.00	
State	Zip Code (Plus	s <b>4</b> )						
			Occupat	tion				
e of	City			State		Zip Code	(Plus 4)	
dule I, Detailed Su	ımmary Page,	Section	on 3.				<b>GE TOTAL</b> 0.00	
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4)  Occupation  Other State	State Zip Code (Plus 4)  Occupation  Occupation  Other State  Occupation  Output  Outp	DATE AM  MO DAY YEAR  \$ State Zip Code (Plus 4)  Occupation  City State Zip Code	

## 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, <b>200</b> 0000		22300				\$	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 Pe	riod	
ELECT GREG HAYES	From:	11/29/2022 <b>To:</b>	12/31/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	OR .	
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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	-1		•			Occupa	ation			
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	etaile	ed				<b>PAGE TOTAL</b> 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candid	Reporting Period							
ELECT GREG HAYES				From <u>11/29/2022</u> To:				
				DATE			AMOUNT	
To Whom Paid GREGORY S. HAYES			мо	DAY	YEAR			
Mailing Address 5755 GIBSON HI	LL RD		2	22	2023	\$	567.06	
City EDINBORO	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16412	<b>Descrip</b> REPAY	otion of Exp	enditure			

## 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			Reporting Period					
		From:	<u>11</u>	./29/2022	То:	: <u>-</u>	12/31/2022	
				DATE			Outstanding Balance of Debt	
			МО	DAY	YEAR			
Mailing Address 5755 GIBSON HILL RD						\$	5,000.00	
State	Zip Code (Pl	us 4)	Descri	otion of De	bt			
PA	16412		LOAN TO CAMPAIGN					
DATE							Outstanding Balance of Debt	
Name of Creditor GREGORY S. HAYES				DAY	YEAR			
Mailing Address 5755 GIBSON HILL RD						\$	2,532.94	
State	Zip Code (Pl	us 4)	Description of Debt					
PA	16412		LOAN TO CAMPAIGN					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL	
						\$	7,532.94	
	State PA  RD  State PA	State   Zip Code (Plant   16412	RD  State Zip Code (Plus 4) 16412  RD  State Zip Code (Plus 4) 16412	From: 11   MO   MO	From: 11/29/2022   DATE	From: 11/29/2022 To:     DATE	From:   11/29/2022   To:	