#### **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 2018	0052				port ed B		CANDI	CANDIDATE COMMITTEE \( \square\) LOBBYIST						BYIST		
Name of Filing C	ommittee, Candid	ate or L	obbyist:	-	ENE	RGY	VOIC	CES PAC					_				
Street Address:	2200 GEORGE	TOWNE	DR, STE 50	0													
City:	SEWICKLEY							State:	PA			Zip Cod	le: 15	5143-8	753		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No		<b>/</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2024					IG METHO				PAPER DISK			DISKE	TTE	
Name of Office S	ought by Candida	te:						DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Coun	
	-							мо	DAY	YE	AR		****	-			
								11		5	2024		(SEE IN	STRUCTIO	ONS FOR C	ODES	)
	Receipts and	МО	DAY Y	/EAR				МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		1 2	20	024	T	0	3		4	2024						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	-		1,4	53.79						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$				11.91						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			1,4	65.70						
D. Total Expend	ditures (From Sch	edule II	I)				\$				0.00						
E. Ending Cash	Balance (Subtract	Line D	From Line C)	)			\$			1,4	65.70						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sch	edul	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			1			
			,	AFF	ΙDΑ	AVI	T SE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign he	ere. 1	[f th	nis is	a Can	ndidate re	eport, o	candio	late sig	ın here.					
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached sche	dules	file	d on	paper o	or by elect	ronic m	edium,	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue.
Sworn to and subs	cribed before me this day of	i	20							s	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	re					-					Prin	ted Name	e			
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Arc	ea Cod	e	Daytim	e Teleph	one Nu	mber		╝
Part II- If this is	a report of a cand	lidate's	authorized C	omm	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ıy knowle	edge and belief	this	poli	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	ate			-
	<u> </u>						-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
, ссолоп Ехр																	╻┃
	МО	D.	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Detailed Summary ruge	-			
Name of Filing Committee or Candidate	Reporting	Period		
ENERGY VOICES PAC	From:	1/2/202	<u>4</u> То:	3/4/2024
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)	\$	11.91
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 Page 1			\$	11.91

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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 Filing Committee of Candidate			Reporting Period From: To:					
					DATE		AMOUN	т
			_				71.10011	•
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		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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 Ca	ame of Filing Committee or Candidate				orting Pe	eriod			
				Fror	m:		T	o:	
			_		D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•				Occupa	tion		•	
Employer Mailing Address/Princ Business	cipal Place of		City			State		Zip Cod	e (Plus 4)
Enter Grand Total of Part C	on Schedule I, Detai	iled Sumr	mary Page,	Section	on 3.			P.	AGE TOTAL 0.00
							L		

## 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 F	Period	
ENERGY VOICES PAC	From:	<u>1/2/2024</u> <b>To:</b>	3/4/2024
		DATE	AMOUNT

				AIL		AMOUNT
Full Name Fidelity Investments			мо	DAY	YEAR	
Mailing Address 450 N. Federal Highway, Ste 200					2024	<b>\$</b> 11.91
<b>City</b> Ft. Lauderdale	<b>State</b> FL	<b>Zip Code (Plus 4)</b> 33301	3	4	2024	
Receipt Description Bank I	nterest					

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

**PAGE TOTAL \$** 11.91

#### **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	
ENERGY VOICES PAC	From:	<u>1/2/2024</u> <b>To:</b>	<u>3/4/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	l	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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						
	Fr					From: To:				
				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	lame of Filing Committee or Candidate					Period			
					From:		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 Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (	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)	Descri	ption of Ex	penditure						
-							PAGE TOTAL				
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D	).			\$	0.00				