# **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	20240	)324			Report Filed E		CANDI	DATE	COM	IMITTEE	✓	LOBBYIST	
Name of Filing C	Committee, Ca	andida	te or Lo	bbyist:		COMMI	TTEE .	TO ELECT	NICK (	CIESIELS	<i i<="" td=""><td></td><td></td><td></td></i>			
Street Address:	1346 DE	NTON	ST											
City:	GREENS	BURG						State: PA Zip Code: 15601-4						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY			2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIM		POST-	3.	AMENDI REPORT		Yes 🗸 No	)
(place X to the right of	6TH TUESDAY PRE-ELECTIO			2ND FRIDA ELECTION	Y PRE	- 5.	30 DA ELEC		5. <b>X</b>	TERMIN REPORT		Yes 🗸 No	)	
report type)	ANNUAL REI	PORT	7.	<b>Year</b> 2024				NG METHO			PAPER			TTE
Name of Office S	L Sought by Car	ndidat	e:					DATE O	F ELEC	TION	District Number		Party Code	County Code
								мо	DAY	YEAR	-1	TRE	LIB	65
STATE TREASU	KEK							11		5 202	4	(SEE IN	STRUCTIONS FOR	CODES)
Summary of		nd	мо	DAY	YEAR			мо	DAY	YEAR	F	OR OFFIC	CE USE ONLY	
Expenditures	from:		1	0 22	20	)24 <b>T</b>	0	11	2	5 202	4			
A. Amount Bro	ught Forward	l From	Last Re	eport			\$			0.0	)			
B. Total Moneta	ary Contribut	ions A	nd Rece	ipts (From	n Schee	dule I)	\$			0.00	)			
C. Total Funds	Available (Su	um Of	Lines A a	and B)			\$			0.0	D			
D. Total Expen	ditures (Fron	n Sche	dule III	)			\$			0.00	)			
E. Ending Cash	Balance (Su	btract	Line D F	rom Line (	C)		\$			0.00	)			
F. Value Of In-	Kind Contrib	utions	Receive	d (From S	chedul	e II)	\$			0.00	)			
G. Unpaid Debt	s And Obliga	tions(	(From So	chedule IV	')		\$			0.00	)			
					AFF	IDAVI	T SE	CTION						
PART I - If this is		-	•	-					• •		-			
I swear (or affirm) correct and comple		rt, inclu	iding the	attached scl	hedules	filed on	paper	or by elect	ronic me	dium, are to	the best o	of my know	wledge and beli	ef , true
Sworn to and subs	cribed before n day of	ne this		20						Signatu	re of Perso	on Submit	ting Report	
		ignatur	•				_				Prir	nted Name	9	
My Commission Ex		gnatar	-								Ema	ail		
	мо		DA	Y	YR		-		Area	a Code	Daytin	ne Teleph	one Number	
Part II- If this is	a report of a	a cand	idate's a	uthorized	Comm	ittee, C	andid	ate shall	sign hei	re.				
I swear (or affirm) No 320) as amende		st of m	y knowled	dge and beli	ef this	political	comm	ittee has n	ot violate	ed any prov	sions of th	e act of J	une 3,1937 (P.I	1333,
Sworn to and subso	ribed before m day of	e this		20							Signature	of Candid	ate	
							-				Print	ed Name		
My Commission Exp	-	ature					-				Ema	ail		
							-							
	М	0	DA	Y	YR				Area C	ode	D	aytime T	elephone Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pag	e								
Name of Filing Committee or Candidate	Reporting	g Period							
COMMITTEE TO ELECT NICK CIESIELSKI From: 10/22/2024 To: 11									
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	g 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	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			\$	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					
F				From: To:					
		·			DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	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					
			From:			То:		
				DA	TE		A	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				
			Fron	n:		Τά	):	
				D/	ATE		A	MOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Sectio	on 3.			P. \$	<b>AGE TOTAL</b> 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:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·								
		_	<b>.</b>					PAGE TOT	AL
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	d	
COMMITTEE TO ELECT NICK CIESIELSKI	From:	<u>10/22/2024</u> <b>To:</b>	<u>11/25/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
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			Reporting	Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						<b>]</b> \$	0.0	)0
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,	P	AGE TOTAL	_
						\$	0.0	0

### 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			<b>PAGE TOTAL</b> 0.00		

# SCHEDULE III STATEMENT OF EXPENDITURES

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	Denditure			
Enter Crand Tatal of Evnanditures	an Dago 1. Donort (	Cover Dage Item I					PAGE TOTAL	
Enter Grand Total of Expenditures	on Page 1, Report C	Jover Page, Item L				\$	0.00	