

# Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		George Hazuda					
Street Address		5159 Merilee Drive					
City	Erie	State	PA	Zip Code	16506		

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	05/16/2017	Year	2017		Amendment Report	<input type="checkbox"/>	Termination Report	<input checked="" type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	1/1/2018	12/31/2018	
A. Amount Brought Forward From Last Report	\$	634.23	<p style="text-align: center;">2019 FEB -5 PM 4:01</p> <p style="text-align: center;">ERIE COUNTY VOTER REGISTRATION</p> <p style="text-align: right;">LA</p>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$		
C. Total Funds Available (Sum of Lines A and B)	\$	634.23	
D. Total Expenditures (From Schedule III)	\$		
E. Ending Cash Balance (Subtract Line D from Line C)	\$	634.23	
F. Value of In-Kind Contributions Received (From Schedule II)	\$		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	1,947.09	

### Affidavit Section

Part I- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 5<sup>th</sup> day of February 2019

Kimberly S. Alexander Signature

George H. Hazuda Signature of Person Submitting report  
Printed Name

My Commission expires 10 MO. 31 DAY 2019 YR.

814 Area Code 881-4062 Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA  
 NOTARIAL SEAL  
 Kimberley S. Alexander, Notary Public  
 City of Erie, Erie County  
 My Commission Expires Oct. 31, 2019  
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Part II- If this is a report of a Candidate's Authorized Committee, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, (10.320) as amended.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Printed Name

My Commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YR.

\_\_\_\_\_  
Area Code \_\_\_\_\_ Daytime Telephone Number

**PART D**  
**All Other Contributions**

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C)

Filer Identification Number:									
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
GEORGE HAZUDA						05/05/2017		1500.00	
House #		Street Address				Date [MM/DD/YYYY]		\$	
5159		MERILEE DRIVE				05/08/2017		5100.00	
City			State	Zip Code		Date [MM/DD/YYYY]		\$	
ERIE			PA	16506		5/10/2017		2800.00	
Employer Name						Occupation			
MOREE' ADVERTISING, INC.						PRESIDENT			
Employer Mailing Address / Principal Place of Business						5159 Merilee Drive Erie, PA 16506			
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
GEORGE HAZUDA						05/15/2017		2000.00	
House #		Street Address				Date [MM/DD/YYYY]		\$	
5159		MERILEE DRIVE							
City			State	Zip Code		Date [MM/DD/YYYY]		\$	
ERIE			PA	16506					
Employer Name						Occupation			
MOREE' ADVERTISING, INC.						PRESIDENT			
Employer Mailing Address / Principal Place of Business						5159 Merilee Drive Erie, PA 16506			
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
House #		Street Address				Date [MM/DD/YYYY]		\$	
City			State	Zip Code		Date [MM/DD/YYYY]		\$	
Employer Name						Occupation			
Employer Mailing Address / Principal Place of Business									
Full Name of Contributor						Date [MM/DD/YYYY]		\$	
House #		Street Address				Date [MM/DD/YYYY]		\$	
City			State	Zip Code		Date [MM/DD/YYYY]		\$	
Employer Name						Occupation			
Employer Mailing Address / Principal Place of Business									

**SCHEDULE III**  
**Statement of Expenditures**

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		JET 1400			<b>Date [MM/DD/YYYY]</b>	\$	340
					05/08/17		
<b>House #</b>	ONE	<b>Street Address</b>	BOSTON STORE PLACE		<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16501	RADIO ADS	
<b>To Whom Paid</b>		WFXP 66			<b>Date [MM/DD/YYYY]</b>	\$	1147.50
					05/08/17		
<b>House #</b>	8455	<b>Street Address</b>	PEACH STREET		<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16509	TV ADS	
<b>To Whom Paid</b>		GOHRS PRINTING			<b>Date [MM/DD/YYYY]</b>	\$	1545.82
					05/09/17		
<b>House #</b>	10575	<b>Street Address</b>	WEST MAIN ROAD		<b>Description of Expenditure</b>		
<b>City</b>	NORTH EAST	<b>State</b>	PA	<b>Zip Code</b>	16428	POLITICAL MAILER	
<b>To Whom Paid</b>		WSEE 35			<b>Date [MM/DD/YYYY]</b>	\$	1190.00
					05/09/17		
<b>House #</b>	3514	<b>Street Address</b>	STATE STREET		<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16508	TV ADS	
<b>To Whom Paid</b>		DESANTIS SIGNS & GRAPHICS			<b>Date [MM/DD/YYYY]</b>	\$	689.53
					05/10/17		
<b>House #</b>	540	<b>Street Address</b>	WEST 18TH STREET		<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16502	YARD SIGNS	
<b>To Whom Paid</b>		WJET 24			<b>Date [MM/DD/YYYY]</b>	\$	2975.00
					05/10/17		
<b>House #</b>	8455	<b>Street Address</b>	PEACH STREET		<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16509	TV ADS	
<b>To Whom Paid</b>		WICU 12			<b>Date [MM/DD/YYYY]</b>	\$	1020.00
					05/12/17		
<b>House #</b>	3514	<b>Street Address</b>	STATE STREET		<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16508	TV ADS	
<b>To Whom Paid</b>		ERIE COUNTY			<b>Date [MM/DD/YYYY]</b>	\$	100.00
					05/12/17		
<b>House #</b>	140	<b>Street Address</b>	WEST 6TH STREET		<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16501	LATE FILING FEE 24 HR REPORT	

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filler Identification Number:	
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Name of Creditor		GEORGE HAZUDA					Outstanding Balance of Debt	
House #	5159	Street Address		MERILEE DRIVE		DATE DEBT INCURRED [MM/DD/YYYY]		\$
				02/24/2015 - 05/04/15				
City		ERIE	State	PA	Zip Code	16506	2,448.09	
Description of Debt		LOANS TO COMMITTEE TO ELECT GEORGE HAZUDA						
Name of Creditor		GEORGE HAZUDA					Outstanding Balance of Debt	
House #	5159	Street Address		MERILEE DRIVE		DATE DEBT INCURRED [MM/DD/YYYY]		\$
				03/3/17 - 04/27/17				
City		ERIE	State	PA	Zip Code	16506	4,099.00	
Description of Debt		LOANS TO COMMITTEE TO ELECT GEORGE HAZUDA						
Name of Creditor		GEORGE HAZUDA					Outstanding Balance of Debt	
House #	5159	Street Address		MERILEE DRIVE		DATE DEBT INCURRED [MM/DD/YYYY]		\$
				05/05/17 - 05/15/17				
City		ERIE	State	PA	Zip Code	16506	11,400.00	
Description of Debt		LOANS TO COMMITTEE TO ELECT GEORGE HAZUDA						
Name of Creditor							Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]		\$
City			State		Zip Code			
Description of Debt								
Name of Creditor							Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]		\$
City			State		Zip Code			
Description of Debt								
Name of Creditor							Outstanding Balance of Debt	
House #		Street Address				DATE DEBT INCURRED [MM/DD/YYYY]		\$
City			State		Zip Code			
Description of Debt								