

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) | <input checked="" type="checkbox"/> | Candidate | <input type="checkbox"/> | Committee | <input type="checkbox"/> | Lobbyist | <input type="checkbox"/> |
| Name of Filing Committee, Candidate or Lobbyist | | Michael Pace | | | | | | |
| Street Address | | 770 W. Townhall Rd. | | | | | | |
| City | Waterford | State | PA | Zip Code | 16441 | | | |

Type of Report (Place x under report type)

| | | | | | | | | |
|--|---------------------------------------|--------------------------|---|--|--------------------------|-------------------------------------|---|------------------------------|
| 1- 6 th Tuesday Pre-Primary | 2- 2 nd Friday Pre-Primary | 3- 30 Day Post Primary | 4- 6 th Tuesday Pre-Election | 5- 2 nd Friday Pre-Election | 6- 30 Day Post Election | 7- Annual | Special 2 nd 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) | | 11/5/19 | Year | 2019 | Amendment Report | <input type="checkbox"/> | Termination Report | <input type="checkbox"/> |

| Summary of Receipts and Expenditures | From Date | To Date | For Office Use Only |
|--|-----------|-------------|---------------------|
| A. Amount Brought Forward From Last Report | | \$ -1793.90 | |
| B. Total Monetary Contributions and Receipts (From Schedule I) | | \$ 0 | |
| C. Total Funds Available (Sum of Lines A and B) | | \$ -1793.90 | |
| D. Total Expenditures (From Schedule III) | | \$ 0 | |
| E. Ending Cash Balance (Subtract Line D from Line C) | | \$ -1793.90 | |
| F. Value of In-Kind Contributions Received (From Schedule II) | | \$ 0 | |
| G. Unpaid Debts and Obligations (From Schedule IV) | | \$ 0 | |

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 schedule on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 11th day of January 2021

Jonia Fernandez
Signature

My Commission expires 4-3-23
MO. DAY YR.

Notary Public
Erie County
My Commission expires April 3, 2023
Commission number 1288912

Michael P. Pace
Signature of Person Submitting report

Michael P. Pace
Printed Name

(814) 460-5851
Area Code Daytime Telephone Number

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

I swear (or affirm) that to the best of my knowledge and belief this candidate's authorized committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20____

Signature

My Commission expires _____
MO. DAY YR.

Notary Public
Erie County
My Commission expires April 3, 2023
Commission number 1288912

Signature of Candidate

Printed Name

Area Code

Daytime Telephone Number