

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

THE LH PAC

ADDRESS (number and street)

1238 ST. MARYS DRIVE

Check if different
than previously
reported. (ACC)

ERIE

PA

16509

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00678987

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2021

through

M M M / D D D / Y Y Y Y Y Y
12 31 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Satterfield, David, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Satterfield, David, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 24 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

THE LH PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2021

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2021</div></div>		<div><div></div><div>1347.27</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>8411.47</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>15000.00</div></div>	<div><div></div><div>23000.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>23411.47</div></div>	<div><div></div><div>24347.27</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>21711.60</div></div>	<div><div></div><div>22647.40</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>1699.87</div></div>	<div><div></div><div>1699.87</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

THE LH PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07	/	01	/	2021

To:

M M	/	D D	/	Y Y Y Y Y
12	/	31	/	2021

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

14600.00

22600.00

(ii) Unitemized

400.00

400.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

15000.00

23000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

15000.00

23000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

15000.00

23000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

15000.00

23000.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	711.60	1647.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	711.60	1647.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	21000.00	21000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21711.60	22647.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21711.60	22647.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15000.00	23000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15000.00	23000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	711.60	1647.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	711.60	1647.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Alonge, Marie, , ,

Mailing Address 216 Meadow St.

City
Meadville

State
PA

Zip Code
16335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Homemaker

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11AI.4447

Amount of Each Receipt this Period

800.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Breon, Sarah, , ,

Mailing Address 10737 Wattsburg Rd.

City
Erie

State
PA

Zip Code
16509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medical Associates of Erie

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2021

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. D'Amico, Carmine, , ,

Mailing Address 345 Stonegate Dr.

City
Erie

State
PA

Zip Code
16505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lake Erie College of Medicine

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11AI.4444

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Diley, Jasen, , ,

Mailing Address 23170 Gravel Run Rd

City

Saegertown

State

PA

Zip Code

16433

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LECOM

Occupation (for Individual)

Hospital Executive

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4434

Amount of Each Receipt this Period

1000.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Falk, Karl, , ,

Mailing Address 2645 Frontenac Dr.

City

Erie

State

PA

Zip Code

16511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LECOM

Occupation (for Individual)

Physican

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11AI.4443

Amount of Each Receipt this Period

500.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ferretti, Anthony, , ,

Mailing Address 5230 Fiarlawn St.

City

Erie

State

PA

Zip Code

16509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LECOM

Occupation (for Individual)

Physican

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4429

Amount of Each Receipt this Period

1000.00

☐

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

2500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hansen, Corey, , ,

Mailing Address 11432 Scotland Ave.

City
North East

State
PA

Zip Code
16428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Homemaker

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4436

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Inman, Steven, , ,

Mailing Address 6018 Deerfield Dr

City
Fairview

State
PA

Zip Code
16415

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LECOM Health

Occupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4433

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kauffman, Mark, , ,

Mailing Address 14216 11th Ter. NE

City
Bradenton

State
FL

Zip Code
34212

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LECOM Medical

Occupation (for Individual)
Dean

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4430

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kelly, Susan, M., ,

Mailing Address 4519 Antoinette Ct.

City
ErieState
PAZip Code
16506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Homemaker

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4427

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mosco, Marlene, , ,

Mailing Address 3806 Beech Ave

City
ErieState
PAZip Code
16508FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LECOM MedicalOccupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2021

Transaction ID : SA11AI.4437

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'Neill, Nancy, , ,

Mailing Address 8715 Ennis Dr.

City
ErieState
PAZip Code
16509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Advertising Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11AI.4442

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

2300.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaffner, James, , ,

Mailing Address 9343 Hamot Rd.

City
WaterfordState
PAZip Code
16441FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Radio Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4435

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Slomski, Lisa, J., ,

Mailing Address 653 Young Rd.

City
ErieState
PAZip Code
16509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

First National Bank of PA

Occupation (for Individual)

Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2021

Transaction ID : SA11AI.4453

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sparber, Dale, , ,

Mailing Address 11050 State Rd.

City
AlbionState
PAZip Code
16401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2021

Transaction ID : SA11AI.4452

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1750.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Styn, Dennis, , ,

Mailing Address 4570 Pineview Ct.

City
ErieState
PAZip Code
16506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medical Associates of ErieOccupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11AI.4449

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Terry, Richard, , ,

Mailing Address 926 Deerfield Rd.

City
ElmiraState
NYZip Code
14905FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Director Osteopathic Medical Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2021

Transaction ID : SA11AI.4431

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Verdecchia, Edward, , ,

Mailing Address 449 Vermont Ave.

City
ErieState
PAZip Code
16505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Scrap Metal Brokers

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11AI.4446

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wedzik, Thomas, , ,

Mailing Address 108 Del Sol Ave.

City
Davenport

State
FL

Zip Code
33837

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11AI.4445

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilson, John, , ,

Mailing Address 211 E. Columbus Ave.

City
Corry

State
PA

Zip Code
16407

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 13 / 2021

Transaction ID : SA11AI.4451

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

14600.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name (Last, First, Middle Initial)

A. Huckaby Davis Lisker

Mailing Address 228 S. Washington St.
Ste. 115

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
FEC Compliance/Accounting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 12 / 2021

FEC Identification Number

C

Transaction ID : SB21B.4412

Amount of Each Disbursement this Period

357.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Huckaby Davis Lisker

Mailing Address 228 S. Washington St.
Ste. 115

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
FEC Compliance/Accounting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 19 / 2021

FEC Identification Number

C

Transaction ID : SB21B.4416

Amount of Each Disbursement this Period

354.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

711.60

711.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name (Last, First, Middle Initial)

A. Benninghoff for Representative

Mailing Address 3258 East Lamb Street

City
BellefonteState
PAZip Code
16823Purpose of Disbursement
Non Federal Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2021

FEC Identification Number

C**Transaction ID : SB29.4424**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Elect Tyler TitusMailing Address 3607 Poplar St.
#3713City
ErieState
PAZip Code
16508Purpose of Disbursement
Non Federal Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2021

FEC Identification Number

C**Transaction ID : SB29.4417**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Bob Merski

Mailing Address P.O. Box 667

City
ErieState
PAZip Code
16512Purpose of Disbursement
Non Federal Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2021

FEC Identification Number

C**Transaction ID : SB29.4423**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name (Last, First, Middle Initial)

A. Friends of Brenton Davis

Mailing Address 525 Indiana Dr.

City
ErieState
PAZip Code
16509Purpose of Disbursement
Non Federal Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2021

FEC Identification Number

C**Transaction ID : SB29.4419**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Kim Ward

Mailing Address PO Box 42

City
BrockwayState
PAZip Code
15824Purpose of Disbursement
Non Federal Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2021

FEC Identification Number

C**Transaction ID : SB29.4421**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jay Costa for State SenateMailing Address 1501 Ardmore Blvd.
#403City
PittsburghState
PAZip Code
15221Purpose of Disbursement
Non Federal Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2021

FEC Identification Number

C**Transaction ID : SB29.4426**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

THE LH PAC

Full Name (Last, First, Middle Initial)

A. PA House Republican Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2021

Mailing Address 2165 Pierce Bluffs Dr.

City
HermitageState
PAZip Code
16148Purpose of Disbursement
Non Federal Political Contribution

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB29.4456**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

21000.00