

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number : 20200203		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF ANN FLOOD											
Street Address:											
City: BATH				State: PA		Zip Code: 18014					
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2020	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	REP			
					11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	2020		5	18	2020			
A. Amount Brought Forward From Last Report					\$		0.00				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		22,810.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		22,810.00				
D. Total Expenditures (From Schedule III)					\$		17,484.52				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		5,325.48				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		309.51				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		0.00				

## 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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**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, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF ANN FLOOD	From: <u>1/1/2020</u> To: <u>5/18/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 110.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 2,200.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,200.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 11,000.00
<b>All Other Contributions (Part D)</b>	\$ 9,500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 20,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 22,810.00
---	--------------

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
	From: To:

DATE	AMOUNT
------	--------

Full Name of Contributing Committee	MO	DAY	YEAR	\$0.00
Mailing Address				
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 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)**

<b>Name of Filing Committee or Candidate</b> FRIENDS OF ANN FLOOD				<b>Reporting Period</b> From: <u>1/1/2020</u> To: <u>5/18/2020</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributor</b> YAKUP TUNCOK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b>			3	2	2020	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180181711				

  

<b>Full Name of Contributor</b> AHMET AVCI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b>			3	9	2020	
<b>City</b> ROSETO	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180139319				

  

<b>Full Name of Contributor</b> JOSEPH A POLAT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b>			3	5	2020	
<b>City</b> SAYLORSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18353				

  

<b>Full Name of Contributor</b> ARSLAN CELIK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b>			3	9	2020	
<b>City</b> ELICOTT CITY	<b>State</b> MD	<b>Zip Code (Plus 4)</b> 210423882				

  

<b>Full Name of Contributor</b> BAYRAM SAPMAZ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b>			3	9	2020	
<b>City</b> WIND GAP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180911423				

  

<b>Full Name of Contributor</b> BLAKE C MARLES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			3	12	2020	
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18101				

  

<b>Full Name of Contributor</b> CHARLOTTE P MILLER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b>			5	6	2020	
<b>City</b> NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180649548				

Full Name of Contributor PATRICK J CUBBAGE			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	6	2020	
City	WALNUTPORT	State PA				
Full Name of Contributor BLAIR BATES			MO	DAY	YEAR	\$ 60.00
Mailing Address			5	13	2020	
City	BETHLEHEM	State PA				
Full Name of Contributor DOROTHY NIKLOS			MO	DAY	YEAR	\$ 100.00
Mailing Address			3	26	2020	
City	BATH	State PA				
Full Name of Contributor JOSEPH VASKO			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	16	2020	
City	NAZARETH	State PA				
Full Name of Contributor MIKE ZIMMER			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	1	2020	
City	WIND GAP	State PA				
Full Name of Contributor COREY FRANK			MO	DAY	YEAR	\$ 200.00
Mailing Address			5	12	2020	
City	BATH	State PA				
Full Name of Contributor DANIEL LOIKITS			MO	DAY	YEAR	\$ 40.00
Mailing Address			5	11	2020	
City	BETHLEHEM	State PA				
Full Name of Contributor TIM TIMMTENGES			MO	DAY	YEAR	\$ 50.00
Mailing Address			5	4	2020	
City	NAZARETH	State PA				

**PAGE TOTAL**

\$ 2,200.00

**Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.**

**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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF ANN FLOOD	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2020</u> <b>To:</b> <u>5/18/2020</u>
--	---

				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
FRIENDS OF TOM GIOVANNI				2	27	2020	
Mailing Address							
City	NAZARETH	State	PA	Zip Code (Plus 4)		18064	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
SCAVELLO, MARIO COM TO ELECT				2	14	2020	
Mailing Address							
City	TANNERSVILLE	State	PA	Zip Code (Plus 4)		18372-0000	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
HAHN, MARCIA FRIENDS OF				2	1	2020	
Mailing Address							
City	BATH	State	PA	Zip Code (Plus 4)		18014-0000	

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

PAGE TOTAL
\$ 11,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF ANN FLOOD	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2020</u> <b>To:</b> <u>5/18/2020</u>
--	---

				DATE	AMOUNT
<b>Full Name of Contributor</b> STEPHEN J HURNI, JR				<b>MO</b>	\$ 1,000.00
<b>Mailing Address</b>				<b>DAY</b>	
<b>City</b> PEN ARGYL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180729680	<b>YEAR</b> 2020		
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> KIMBERLY KRUPKA				<b>MO</b>	\$ 500.00
<b>Mailing Address</b>				<b>DAY</b>	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>YEAR</b> 2020		
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> LEWIS D RONCA				<b>MO</b>	\$ 1,000.00
<b>Mailing Address</b>				<b>DAY</b>	
<b>City</b> NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064	<b>YEAR</b> 2020		
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> DAPHNE R ULIANA				<b>MO</b>	\$ 500.00
<b>Mailing Address</b>				<b>DAY</b>	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017	<b>YEAR</b> 2020		
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> NOLAN A PERIN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b>			5	7	2020	
<b>City</b> PEN ARGYL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18072				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

  

<b>Full Name of Contributor</b> FAUST CAPOBIANCO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b>			5	18	2020	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

  

<b>Full Name of Contributor</b> TRICIA CASTELLI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b>			4	14	2020	
<b>City</b> ENOLA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17025				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

  

<b>Full Name of Contributor</b> ANITA M PRICE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b>			2	29	2020	
<b>City</b> BANGOR	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18013				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

  

<b>Full Name of Contributor</b> CEVDET TURKYOLU			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,000.00
<b>Mailing Address</b>			12	24	2019	
<b>City</b> SAYLORSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18353				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

  

<b>Full Name of Contributor</b> BRYAN GAULT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b>			3	1	2020	
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		



<b>Full Name of Contributor</b> JOSEPH A. TAVIANINI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b>			3	3	2020	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> FRIENDS OF TOM GIOVANNI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b>			2	27	2020	
<b>City</b> NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> COMM ELECT MARIO SCAVELLO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 5,000.00
<b>Mailing Address</b>			2	14	2020	
<b>City</b> TANNERSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18372				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> FRIENDS OF MARCIA HAHN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 5,000.00
<b>Mailing Address</b>						
<b>City</b> WIND GAP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18091				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
<b>\$</b> 20,500.00

## 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: <span style="float: right;">To:</span>
---------------------------------------	--

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF ANN FLOOD		From: <u>1/1/2020</u> To: <u>5/18/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 309.51
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 309.51

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
---------------------------------------	--

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II  
PART G  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OVER \$250.00**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF ANN FLOOD	From: <u>1/1/2020</u> To: <u>5/18/2020</u>

				DATE	AMOUNT	
Full Name of Contributor				MO	DAY	YEAR
JASON MUTCHLER						
Mailing Address				5	15	2020
City	PEN ARGYL	State	Zip Code(Plus 4)			
		PA	18072			
Employer of Contributor				Occupation		
Employer Mailing Address/Principal Place of Business				City	State	Zip Code(Plus 4)
				Description of Contribution		
				DIGITAL ADVERTISEMENT		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						<b>PAGE TOTAL</b>
						309.51

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF ANN FLOOD	From <u>1/1/2020</u> To: <u>5/18/2020</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ANN FLOOD				
<b>Mailing Address</b>	1	23	2020	\$ 105.99
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> PHONE REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
COMMUNICATIONS CONCEPTS				
<b>Mailing Address</b>	1	23	2020	\$ 328.68
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	<b>Description of Expenditure</b> STREET LIST	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ANN FLOOD				
<b>Mailing Address</b>	1	23	2020	\$ 11.00
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> POSTAGE STAMPS REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ANN FLOOD				
<b>Mailing Address</b>				\$ 137.27
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> REIMBURSEMENT BUTTONS AND LABELS	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DETZI'S TAVERN				
<b>Mailing Address</b>	1	27	2020	\$ 380.00
<b>City</b> WIND GAP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18091	<b>Description of Expenditure</b> PETITIN CIRCULATING EVENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
COMMUNICATION CONCEPTS				
<b>Mailing Address</b>	1	28	2020	\$ 1,550.78
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	<b>Description of Expenditure</b> PALM CARDS	

To Whom Paid REPUBLICAN ACTION TEAM			MO	DAY	YEAR	\$ 250.00
Mailing Address			1	28	2020	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 180022063	Description of Expenditure FOR PETITON SIGNING EVENTS			
To Whom Paid NCRC			MO	DAY	YEAR	\$ 300.00
Mailing Address			1	29	2020	
City	State	Zip Code (Plus 4)	Description of Expenditure LINCOLN DAY BREAKFAST			
To Whom Paid COMMONWEALTH OF PA			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			2	12	2020	
City	State	Zip Code (Plus 4)	Description of Expenditure FEE CANDIDATE APPLICATION			
To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 208.70
Mailing Address			2	13	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT PETITION SIGNING			
To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 49.35
Mailing Address			2	13	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT JAN. CAMPAIGN PHONE			
To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 49.35
Mailing Address			2	28	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT FEB. CAMPAIGN PHONE			
To Whom Paid DELUXE CHECK PRINTING CHARGE			MO	DAY	YEAR	\$ 27.95
Mailing Address			1	22	2020	
City	State	Zip Code (Plus 4)	Description of Expenditure BANK ACCOUNT CHECK PRINTING CHARGE			
To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 11.00
Mailing Address			3	5	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT POSTAGE STAMPS			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 275.00
Mailing Address			3	10	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT POSTAGE STAMPS			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 55.00
Mailing Address			3	10	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT POSTAGE STAMPS			

To Whom Paid RANDY MONCEAUX			MO	DAY	YEAR	\$ 295.00
Mailing Address			3	17	2020	
City OREFIELD	State PA	Zip Code (Plus 4) 18069	Description of Expenditure PHOTOS FOR CAMPAIGN HEADSHOTS			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 49.35
Mailing Address			3	28	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBUSEMENT MAR CAMPAIGN PHONE			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 44.00
Mailing Address			3	28	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT FOR WEBSITE			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 55.00
Mailing Address			4	22	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT POSTAGE STAMPS			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 49.35
Mailing Address			4	22	2020	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT APRIL CAMPAIGN PHONE			

To Whom Paid COMMUNICATIONS CONCEPTS			MO	DAY	YEAR	\$ 3,656.87
Mailing Address			5	6	2020	
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure MAILERS			



<b>To Whom Paid</b> THE FREE WEEKLY PRESS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 45.00
<b>Mailing Address</b>			5	11	2020	
<b>City</b> BANGOR	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18013	<b>Description of Expenditure</b> MAY 14 2020 PRESS RELEASE			

  

<b>To Whom Paid</b> COMMUNICATIONS CONCEPTS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3,515.87
<b>Mailing Address</b>			5	13	2020	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	<b>Description of Expenditure</b> MAIL 2 6 X 11			

  

<b>To Whom Paid</b> COMMUNICATION CONCEPTS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,222.14
<b>Mailing Address</b>			5	13	2020	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	<b>Description of Expenditure</b> HAHN AUTO CALL AND TEXT MSG			

  

<b>To Whom Paid</b> COMMUNICATION CONCEPTS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3,515.87
<b>Mailing Address</b>			5	18	2020	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	<b>Description of Expenditure</b> MAIL 3 6 X 11			

  

<b>To Whom Paid</b> ANN FLOOD			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,196.00
<b>Mailing Address</b>			2	28	2020	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> SIGN REIMBURSEMENT			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 18,384.52

