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 2014	0157			Repo Filed		CA	WDI	DATE		COM	AITTEE	Y	LUB	51151	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	FRIEN	IDS OF	JOE .	TOR	SELLA							
Street Address:	602 CREEK LA	ANE														
City:	FLOURTOWN						Stat	e:	PA			Zip Co	de: 19	9031		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D PRIM		F	POST-	3.		AMENDN REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5.		AY TION	F	POST-	6. X		TERMIN. REPORT		Yes	No	\
report type)	ANNUAL REPORT	7.	Year 2021				NG MI					PAPER		/	DISKE	TTE
Name of Office S	- Sought by Candidat	te:					DAT	ΓΕ Ο	F ELEC	CTIC	N	District Number	Office Code	Pai	ty Code	County Code
							МО		DAY	YI	AR		•			
								11		2	2021		(SEE IN	STRUCTI	ONS FOR C	CODES)
	Receipts and	МО	DAY	YEAR	l		МО		DAY	YI	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		10 19) 2	021	то		11	2	22	2021					
A. Amount Bro	ught Forward Fron	n Last R	eport		·	\$			•	20,	185.02					
B. Total Monetary Contributions And Receipts (From Schedule					dule I) \$;				0.00					
C. Total Funds Available (Sum Of Lines A and B)						\$	5			20,	185.02					
D. Total Expenditures (From Schedule III)						\$	5				0.00					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$	5			20,1	.85.02					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	Schedu	le II)		5				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)		\$	5				0.00			'		
						/IT SE										
	that this report, incl	*	_						-		_		f my kno	wledge	and belie	ef , true
•	cribed before me this										lanatura	of Perso	n Gubmit	ting Do		
	day of		_ 20								ngnature	oi Peiso	ii Subiiiit	tilly Ke	, , , , , , , , , , , , , , , , , , ,	
	Signatu	re										Prin	ted Name	е		
My Commission Ex	·											Ema				
	МО		AY	YR						a Coo	le	Daytin	ie Teleph	none Nu	mber	
	a report of a cance that to the best of m												+ - - 1	2 1	027 (D.I.	1222
No 320) as amende		iy knowie	edge and bei	ier this	politic	ai comn	iittee i	nas n	Ot Violat	eu an	ly provis	ions or th	e act or J	une 3,1	937 (P.L.	. 1333,
Sworn to and Subsc	day of		20								S	ignature (of Candid	ate		
												Printe	d Name			
My Commission Exp	Signature ires											Ema	il			
	мо	D	AY	YR		_			Area	Code		D	aytime T	elephor	ne Numbe	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JOE TORSELLA	From:	10/19/202	<u>1</u> To:	11/22/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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	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) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an 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

Name of Filing Committee or Candidate			Re	eporting				
		From:				:		
					DATE			AMOUNT
Full Name of Contributing	g Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					

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

0.00

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 Fining Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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 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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod			
			Fron	n:		To):	
				D	ATE		АМС	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PA(GE TOTAL 0.00

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	••			\$	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 Per	iod	
FRIENDS OF JOE TORSELLA	From:	<u>10/19/2021</u> To :	11/22/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,	•	\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candida	te		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sci Section 2.	nedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
occuon 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	ation		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting F	Period		
FRIENDS OF JOE TORSELLA	From	10/19/2021	То:	11/22/2021

				DATE			AMOUNT
Fo Whom Paid MARIN MCLAUGHLIN FOR SUPREME COURT				DAY	YEAR		
Mailing Address PO BOX 15943				4	2021	\$	1,000.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip				
	PA	19103	CONTR	IBUTION			
							PAGE TOTAL
Enter Grand Total of Expenditure	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						