# **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 :	<b>on</b> 2(	)190102			Repor Filed I		CANDI	(DATE		СОМ	<b>1ITTEE</b>	✓	LOBE	BYIST	
Name of Filing C	ommittee, Can	didate or	Lobbyist:		WARMI	NSTE	R FIRST								
Street Address:	414 BRAN	DYWINE (	СТ								_				
City:	WARMINS	ΓER					State:	PA			Zip Co	<b>de:</b> 18	974		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRI PRIMARY	DAY PRE- Y	2. <b>X</b>	30 D/ PRIM		POST-	3.		AMENDN REPORT		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRI ELECTIO		- 5.	30 D/ ELEC	AY I TION	POST-	6.		TERMIN/ REPORT		Yes	No	$\checkmark$
report type)	ANNUAL REPO	<b>RT</b> 7.	<b>Year</b> 20	22			NG METH				PAPER		$\checkmark$	DISKE	TTE
Name of Office S	L Sought by Cand	idate:					DATE O	OF ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR			DEN	1	09
							11		8	2022		(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of		мо	DAY	YEAR			мо	DAY	YE	AR	FC	R OFFIC	E USE	ONLY	
Expenditures	from:		1	1 20	)22 <b>T</b>	0	5	5	2	2022					
A. Amount Bro	ught Forward F	rom Last	Report			\$			4,0	57.28					
B. Total Moneta	ary Contributio	ns And Re	ceipts (Fr	om Scheo	dule I)	\$	5		3,0	00.00					
C. Total Funds	Available (Sum	Of Lines	A and B)			\$	5		7,0	57.28					
D. Total Expen	ditures (From S	Schedule 1	<b>II</b> )			\$	;		3,7	77.00					
E. Ending Cash	Balance (Subt	ract Line I	D From Lir	ne C)		\$	;		3,2	80.28	-				
F. Value Of In-	Kind Contributi	ons Recei	ved (From	n Schedul	e II)	\$				0.00	-				
G. Unpaid Debt	s And Obligation	ons (From	Schedule	IV)		\$	5			0.00					
				AFF	IDAVI	T SE	CTION								
PART I - If this is		• •		-				• •							
I swear (or affirm) correct and comple		including t	he attached	schedules	filed on	paper	or by elect	tronic m	edium,	are to t	the best o	f my know	/ledge	and beli	ef , true
Sworn to and subs	cribed before me day of	this	20						s	ignature	e of Perso	n Submitt	ing Rep	ort	
	Sigr	ature				_					Prin	ted Name			
My Commission Ex	cpires					_					Ema	il			
	мо		DAY	YR				Are	ea Cod	e	Daytin	e Telepho	one Nu	mber	
Part II- If this is	a report of a c	andidate'	s authoriz	ed Comm	ittee, C	Candid	late shall	sign he	ere.						
I swear (or affirm) No 320) as amende		of my know	/ledge and l	belief this	political	comm	nittee has n	not viola	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me t day of	his	20							s	ignature	of Candida	te		
						_					Printe	d Name			
My Commission Exp	Signatu	ire				_					Ema	il			
						_									
	мо		DAY	YR				Area	Code		D	aytime Te	lephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** WARMINSTER FIRST From: <u>1/1/2022</u> **To:** 5/2/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 3,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 3,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 3,000.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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			Reportin	g Period			
•			From: To:			:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4	•)				
						Γ	PAGE TOTAL

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

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)									
Name of Filing Committee or Candidat	e		Rep Fror	orting P	eriod	Τα	):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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 Can	didate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

### 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.)

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
WARMINSTER FIRST			From: <u>1/1/2022</u>			<u>022</u> To	2 <b>To:</b> <u>5/2/2022</u>				
				DA	<b>ATE</b>		AMOUNT				
Full Name of Contributor Randall C. & Sherry Donna Flager				мо	DAY	YEAR					
Mailing 425 Riverview Circle Address								0.00			
City New Hope	<b>State</b> PA	Zip Code (Plus	s 4)	4	25	2022	2				
Employer Name Flager & Associates, F	P.C		Occupation Attorney								
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)				
210 Northbrook Dr. #280		Trevose			РА		19053				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Se				on 3.			<b>PAGE TOTAL</b> \$ 3,000.0	)0			

### 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	2		Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR			
Mailing Address	Mailing Address						\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·					•	•		
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
			20000				\$		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 Period		
WARMINSTER FIRST	From:	<u>1/1/2022</u> <b>To:</b>	<u>5/2/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

### SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DATE		АМО	UNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address	Mailing Address					\$	0.00	
City	State	Zip Code (Plus 4)	,					
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Details Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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

Name of Filing Committee or Candidate				Reporting Period						
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(P	Plus 4)						
Employer of Contributor					Occupat	tion				
Employer Mailing Address/Principal Place of Business City State			State		Zip Code(Plus Descrip 4)			ption of	Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
WARMINSTER FIRST			From	<u>1/</u>	<u>1/2022</u>	То:	<u>5/2/2022</u>	
				DATE			AMOUNT	
<b>To Whom Paid</b> TD Bank			мо	DAY	YEAR			
Mailing Address PO Box 5094			1	31	2022	\$	3.00	
City Mt Laurel	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 08094		<b>Description of Expenditure</b> Campaign Finance - Paper Statement Fee				
To Whom Paid P & P Caterers, Inc.			мо	DAY	YEAR			
Mailing Address 2980Southhampton Rd.			2	9	2022	\$	400.00	
CityPhiladelphiaStateZip Code (Plus 4)PA19154				Description of Expenditure Appreciation Dinner				
To Whom Paid P & P Caterers, Inc.			мо	DAY	YEAR			
Mailing Address 2980Southhampton	Rd.		2	23	2022	\$	1,265.00	
City Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19154		<b>otion of Exp</b> ayment - T				
<b>To Whom Paid</b> TD Bank		·	мо	DAY	YEAR			
Mailing Address PO Box 5094			2	28	2022	\$	3.00	
City Mt Laurel	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 08094		<b>otion of Exp</b> ign Financ			ent Fee	
To Whom Paid Painters And Trades DC#21			мо	DAY	YEAR			
Aailing Address 2980 Southampton Rd.			3	3	2022	\$	150.00	
City Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19154		<b>stion of Exp</b> You Dinner		1		

To Whom Paid			мо	DAY	YEAR			
TD Bank								
Mailing Address PO Box 5094			3	31	2022	\$	3.00	
City Mt Laurel	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	ŊĴ	08094	Campa	ign Finance	e - Paper	Statem	ent Fee	
<b>To Whom Paid</b> Kenneth M. Hayes			мо	DAY	YEAR			
Mailing Address 850 Lingo Dr.			4	4	2022	\$	450.00	
City Warminster State Zip Code (Plus 4)			Description of Expenditure					
PA 19874				You Dinner			ent.	
To Whom Paid Warminster Township Democratic Organization			мо	DAY	YEAR			
Mailing Address 438 Chestnut	Rd.		4	26	2022	\$	1,500.00	
City Warminster	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure			
	PA	18974	Contrib	ution				
<b>To Whom Paid</b> TD Bank			мо	DAY	YEAR			
Mailing Address PO Box 5094			4	29	2022	\$	3.00	
City Mt Laurel	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure			
	NJ	08094	Campa	ign Finance	e - Paper	Statem	ient Fee	
· ·							PAGE TOTAL	
Enter Grand Total of Expenditu	ires on Page 1, Re	port Cover Page, Item D	•			\$	3,777.00	