### **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> 20	180075			eport		CANDI	DIDATE COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Can	didate or L	obbyist:	TH	AMOI:	S, WE	NDI FRIE	NDS (	DF							
Street Address:	47 LYNFOR	RD RD														
City:	RICHBORC						State:	PA			<b>Zip Code:</b> 18954-1322					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2.X 30 DAY POST- PRIMARY 3.							AMENDM REPORT	No	<b>\</b>				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PR ELECTION	.E-	5.	30 DA		POST-	6.		TERMIN/ REPORT		Yes	No	<b>\</b>	
report type)	ANNUAL REPO	<b>RT</b> 7.	<b>Year</b> 2022				NG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	ought by Cand	idate:	•				DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
REPRESENTATI	VE IN THE CEI	MEDAL ACC	EMDLV				МО	DAY	YE	AR	178	STH	REP		09	
REPRESENTATI	VE IN THE GET	NEKAL ASS	CIMDLT				11		8	2022		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
Summary of		МО	DAY YEAR	R			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	s trom:		1 1 2	202	2 <b>T</b>	0	5		2	2022						
A. Amount Bro	ught Forward F	rom Last R	eport			\$			50,6	92.28						
B. Total Moneta	ary Contributio	ns And Rec	eipts (From Sch	edu	le I)	\$				0.00						
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			50,6	92.28						
D. Total Expend	ditures (From S	Schedule II	I)			\$			20,6	04.23						
E. Ending Cash	Balance (Subt	ract Line D	From Line C)			\$			30,0	88.05						
F. Value Of In-	Kind Contributi	ons Receiv	ed (From Schedu	ıle 1	II)	\$				0.00						
G. Unpaid Debt	s And Obligation	ons (From S	Schedule IV)			\$				0.00						
			AFI	FID	DAVI	T SE	CTION									
PART I - If this is	s a Committee	report, trea	surer sign here.	If t	this is	a Car	ndidate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple		including the	e attached schedule	es fil	led on	paper	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and belie	f , true	
Sworn to and subs	cribed before me day of	this	20						S	ignature	of Perso	n Submit	ting Rep	ort		
	— ————————————————————————————————————	ature	_			- -					Prin	ted Name	•			
My Commission Ex	cpires										Ema	il				
	мо	D	AY YR	ì				Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized Com	mitt	tee, C	andid	ate shall	all sign here.								
I swear (or affirm) No 320) as amende		of my knowl	edge and belief thi	s po	litical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	
Sworn to and subsc		his						Signature of Candidate								
	day of —— ———					-		Printed Name								
	Signatu	ıre				-					F	:1				
My Commission Exp	ires										Ema					
	МО	D	AY YI	R		-		Area	Code		D	aytime T	elephon	e Numbe	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
THOMAS, WENDI FRIENDS OF	From:	1/1/202	<u>2</u> To:	<u>5/2/2022</u>
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

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

## 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 Filling Committee of Candidate			Reporting Period From: To:					
					DATE		Al	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	<b>TAL</b> 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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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	I	
THOMAS, WENDI FRIENDS OF	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	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
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 Candid	Reporting	g Period	Reporting Period								
	From					From: To:					
				DATE			AMOUNT				
Full Name of Contributor			МО	DAY	YEAR						
Mailing Address						<b>\$</b>	0.00				
City	State	Zip Code (Plus 4)									
Description of Contribution:											
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL				
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL				
						\$	0.00				

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	Name of Filing Committee or Candidate				Re	porting P	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	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or (	Candidate		Reportir	ng Period			
THOMAS, WENDI FRIENDS O	)F		From	<u>1/1</u>	1/2022	То:	5/2/2022
				DATE			AMOUNT
<b>To Whom Paid</b> Friends of Frank Farry			мо	DAY	YEAR		
Mailing Address PO Box 23	31		4	11	2022	\$	10,000.00
City Langhorne State Zip Code (Plus 4) PA 19047				otion of Exp ution	)enditure		
To Whom Paid HRCC	МО	DAY	YEAR				
Mailing Address PO Box 11787				11	2022	\$	5,000.00
<b>City</b> Harrisburg	State PA	<b>Zip Code (Plus 4)</b> 17108	<b>Descrip</b> contrib	otion of Exp ution	penditure		
<b>To Whom Paid</b> Wendi Thomas			мо	DAY	YEAR		
Mailing Address 107 Glenn	nifer Hill Rd.		4	11	2022	\$	604.23
City Richboro	State PA	<b>Zip Code (Plus 4)</b> 18954	1	otion of Exp			ense
<b>To Whom Paid</b> Northampton Township Repub	blican Committee		мо	DAY	YEAR		
Mailing Address 196 Hilltop Dr.			4	20	2022	\$	5,000.00
City Churchville State Zip Code (Plus 4) PA 18966			<b>Descrip</b> contrib	otion of Exp ution	enditure		
Enter Grand Total of Exper	nter Grand Total of Expenditures on Page 1. Report Cover Page. Item D						PAGE TOTAL
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						ے ا	20 (04 22

20,604.23