Campaign Finance Report

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

		-			-		-				1	_		_		NICT		
Filer Identificat	ion	20220	C0500			Repo Filed		C	ANDI	DATE	\checkmark	CO	OMMITTE		LOBI	BYIST		
Name of Filing (Committee	e, Candida	ate or L	obbyist:		WILLI	AMS,	WEND	DELL	CRAIG	ì							
Street Address:																		
City:								Sta	te:				Zip Cod	e: 19	342			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2.)	30 I PRI	DAY MARY	F	POST- 3.		AMENDMENT REPORT?		Yes	N	0	\checkmark	
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRE	Ξ- 5.		DAY CTION		POST-	6.		TERMINA REPORT?		Yes	N	0	\checkmark
report type)	ANNUAL	REPORT	7.	Year 2022				ING M) CHE					PAPER		\checkmark	DISK	ETTE	
Name of Office S	Sought by	Candidat	e:					DA	TE O	FELE	СТІОІ	N District Office Party Code Number Code					Cour Code	
DEDDECENTAT				EMDLY				мо		DAY	YE	AR	160	STH	REP	•	23	
REPRESENTAT	IVE IN IH	E GENER	AL ASS	EMBLY					11		8	2022	1	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR	2		мо		DAY	YE.	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:			1 1	2	022	то		5		2	2022						
A. Amount Bro	ought Forw	ard From	n Last R	eport				\$				0.00						
B. Total Monetary Contributions And Receipts (From Schedule								\$				0.00						
C. Total Funds Available (Sum Of Lines A and B)								\$				0.00						
D. Total Expenditures (From Schedule III)							\$			1,3	59.52]						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$			(1,35	9.52)						
F. Value Of In-	Kind Cont	ributions	Receiv	ed (From S	chedu	le II)		\$				0.00	_					
G. Unpaid Deb	ts And Ob	ligations	(From S	Schedule IV	/)			\$				0.00						
					AFF	IDAV	IT S	ECTI	ON									
PART I - If this i	s a Comm	ittee repo	ort, trea	surer sign	here.	If this	is a C	andida	ate re	eport, o	candid	ate si	gn here.					
I swear (or affirm correct and compl		eport, inclu	uding the	e attached sc	hedule	s filed o	n pape	er or by	elect	ronic m	edium,	are to	the best of	my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	scribed befo day of	ore me this		20							Si	gnatur	e of Persor	Submitt	ing Rep	oort		-
		Signatur	e				_						Print	ed Name				-
My Commission E	xpires	-											Emai	I				_
	1	мо	D	AY	YR					Ar	ea Code	9	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	idate's	authorized	Comm	nittee,	Cand	idate s	shall	sign he	ere.							
I swear (or affirm) No 320) as amend		e best of m	y knowle	edge and beli	ief this	o politica	l com	mittee	has n	ot viola	ted any	, provis	ions of the	act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	cribed befor day of	e me this		20								S	ignature o	f Candida	ite			-
													Printe	d Name				-
My Commission Exp		ignature											Emai	1				-
																		_
		мо	D	AY	YR	ł				Area	Code		Da	ytime Te	elephon	e Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reportin	g Period		
WILLIAMS, WENDELL CRAIG	From:	<u>1/1/202</u>	<u>2</u> To:	<u>5/2/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			-	
TOTAL for the Reportin	g 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 Reportin	(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 Reportin	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	I.			
TOTAL for the Reportin	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add a 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

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 Candidat	e		Reporting Period					
			From: To:					
		·			DATE			AMOUNT
Full Name of Contributing Committee					DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
٦								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 Candidate Reporting Period								
			From: To			»: 		
					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 Candidate			Reporting Period					
			From:			То:		
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						PAGE TOTAL		
inter Grand Total of Part C on Schedule I, Detailed Summary Page,				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			Rep	Reporting Period				
			Froi	n:		Т	То:	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio				on 3.			P#	AGE TOTAL 0.00

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			Report	ing Peric	d					
			From:			То:	:			
				D	ATE			AMOUNT	r	
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	Receipt Description									
		_						PAGE TO	TAL	
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		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		
WILLIAMS, WENDELL CRAIG	From:	<u>1/1/2022</u> To:	<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 PAR	TF)		
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			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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,	F	PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate			Rep	porting F	Period		
			Fro	From:			
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period						
WILLIAMS, WENDELL CRAIG			From	<u>1/:</u>	1/2022	То:	<u>5/2/2022</u>			
				DATE			AMOUNT			
To Whom Paid			мо	DAY	YEAR					
Omni William Penn Hotel										
Mailing Address 530 William Penn Pl	ace		3	31	2022	\$	260.67			
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	РА	15219	lodging			-				
To Whom Paid Alco Parking Corp.			мо	DAY	YEAR					
Mailing Address 350 Oliver Avenue			3	31	2022	\$	30.00			
City Pittsburgh	State	Zip Code (Plus 4)	Description of Expenditure							
_	PA 15222				parking					
To Whom Paid Mostoller, Inc.				DAY	YEAR					
Mailing Address 877 Stoystown Roa	d		3	31	2022	\$	96.69			
City Somerset	State	Zip Code (Plus 4)	Descrip	i tion of Exp	enditure					
	РА	15501	gasoline							
To Whom Paid			мо	DAY	YEAR					
Mailing Address PO Box 6416			1	20	2022	\$	20.00			
City Carol Stream	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1				
	IL	60197	tablet p	hone line						
To Whom Paid AT&T			мо	DAY	YEAR					
Mailing Address PO Box 6416			2	20	2022	\$	20.00			
City Carol Stream	State	Zip Code (Plus 4)	Descrip	i tion of Exp	enditure	1				
	IL	60197	tablet p	hone line						
To Whom Paid			мо	DAY	YEAR					
Mailing Address PO Box 6416			3	20	2022	\$	20.00			
City Carol Stream	Carol Stream State Zip Code (Plus 4)			4) Description of Expenditure						
	IL 60197				tablet phone line					

To Whor	m Paid			мо	DAY	YEAR			
AT&T				MO	DAT	TEAR			
Mailing	Address PO Box 6416			4	20	2022	\$	20.00	
City (Carol Stream	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		IL	60197	tablet p	hone line				
To Whor	m Paid			мо	DAY	YEAR			
PA Turn	pike Commission			MO	DAT	TEAR			
Mailing	Address 300 East Park Drive			3	30	2022	\$	22.90	
City	Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure					
PA 17111				tolls					
To Whor	To Whom Paid				DAY	YEAR			
PA Turnpike Commission					DAT	TEAR			
Mailing Address 300 East Park Drive				3	31	2022	\$	26.80	
City	Harrisburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	17111	tolls					
To Whor	m Paid			мо	DAY	YEAR			
Amazon	.com								
Mailing	Address 410 Terry Avenue No	orth		2	5	2022	\$	678.81	
City	Seattle	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		WA	98109	video eo	quipment				
To Whor				мо	DAY	YEAR			
Amazon	.com								
Mailing	Address 410 Terry Avenue No	orth		3	13	2022	\$	163.65	
City Seattle State Zip Code (Plus 4)			Descript	tion of Exp	enditure				
	WA 98109				video equipment accessories				
Enter	nter Grand Total of Expenditures on Page 1. Penort Cover Page. Item D							PAGE TOTAL	
Enter G	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item I						\$	1,359.52	

6/15/2025 3:19:49 PM