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 202	220283			Repor Filed E		CANDI	ANDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Cand	idate or L	obbyist:	F	RIEND	S OF	LARRY U	LRICH	PA 153							
Street Address:	PO BOX 69:															
City:	ABINGTON						State: PA				Zip Code: 19001					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PI PRIMARY	RE-	2. X	30 DA		POST- 3.			AMENDMENT REPORT?		Yes	No	>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P ELECTION	RE-	5.	30 DA		POST-	6.		TERMINATION REPORT?		Yes	No	\	
report type)	ANNUAL REPOR	T 7.	Year 2022				NG METHO				PAPER	/	DISKE	ГТЕ		
Name of Office S	- Sought by Candid	late:					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
DEDDECENITATI	VE IN THE GEN	EDAL ACC	EMRIV				МО	DAY	YE	AR	153	STH	REP	'	46	
REFRESENTATI	VE IN THE GEN	LNAL ASS	LINDLI				11		8	2022		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
Summary of Expenditures	Receipts and	МО	DAY YE	AR			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
			3 29	20	22 T	<u>o</u>	5		2	2022	_					
A. Amount Bro	ught Forward Fr	om Last R	eport			\$				0.00						
B. Total Moneta	ary Contribution	s And Rec	eipts (From Sc	hed	lule I)	\$			2,0	50.00						
C. Total Funds	Available (Sum	Of Lines A	and B)			\$			2,0	50.00						
D. Total Expend	ditures (From So	hedule II	I)			\$				32.80						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			\$			2,0	17.20						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Sche	dule	e II)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00						
			Al	FI	DAVI	T SE	CTION									
PART I - If this is	s a Committee re	port, trea	surer sign here	e. If	f this is	a Car	ndidate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple		cluding the	e attached schedu	les 1	filed on	paper	or by elect	ronic m	edium	are to t	the best o	f my knov	wledge a	and belie	f , true	
Sworn to and subs	cribed before me t day of	nis	20						S	ignature	of Perso	n Submit	ting Rep	ort		
	— — Signa	ture	_			<u>-</u>					Prin	ted Name	•			
My Commission Ex	cpires										Ema	il				
	мо	D	AY Y	/R				Are	ea Cod	е	Daytim	e Teleph	one Nu	nber		
Part II- If this is	a report of a ca	ndidate's	authorized Cor	nmi	ittee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and belief tl	his p	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc		is								s	ignature o	of Candid	ate			
	day of					_					Printe	ed Name				
	Signatur	e				-					F	:1				
My Commission Exp	ires										Ema					
	мо	D	AY	YR		-		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		
FRIENDS OF LARRY ULRICH PA 153	From:	<u>3/29/202</u>	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	50.00
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	J 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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	2,000.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	2,050.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL\$ 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 Filing Committee o	or Candidate		Rep Fro	oorting P m:	eriod	To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
				·				DACE TOTAL

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	ne of Filing Committee or Candidate			Reporting Period						
			Fror	n:		To) :			
				D	ATE		А	MOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name		•		Occupa	tion		•			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	on 3.			\$	PAGE 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 Candidate	Reporting Peri	iod	
FRIENDS OF LARRY ULRICH PA 153	From:	3/29/2022 To:	<u>5/2/2022</u>

			D	ATE		AMOUNT
Full Name Larry Ulrich			МО	DAY	YEAR	
Mailing Address 2154 Guern			4	22	2022	\$ 2,000.00
City Abington	State PA	Zip Code (Plus 4) 19001	7	22	2022	
Receipt Description Open b	pank account					

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

PAGE TOTAL 2,000.00

\$

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 Perio	d	
FRIENDS OF LARRY ULRICH PA 153	From:	3/29/2022 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	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	ate		Reportin	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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	Period			
					Fro	om:		То:		
							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 Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	iedule II, I	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P	eriod		
FRIENDS OF LARRY ULRICH PA 153	From	3/29/2022	То:	<u>5/2/2022</u>

				DATE			AMOUNT
To Whom Paid TD Bank			мо	DAY	YEAR		
Mailing Address 710 Old York Road			5	2	2022	\$	32.80
City Jenkintown	State PA	Zip Code (Plus 4) 19046	Description of Expenditure Check order				
Forten Commit Tatal of Form and Stores	D 1 D						PAGE TOTAL
Enter Grand Total of Expenditures	s on Page 1, R	eport Cover Page, Item D.	•			\$	32.80