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 2022	2C0967			Repo Filed		CA	ANDI	DATE	~	C	OMMITTEI		LOB	BYIST		
Name of Filing C	Committee, Candid	date or L	obbyist:	•	BANTA	, JAC	OB D	ANIE	L								
Street Address:																	
City:	_						Stat	te:				Zip Cod	e : 16	5441			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2. X		AY MARY	P	OST-	3.		AMENDMI REPORT?	ENT	Yes	N	lo	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 C	OAY CTION	P	OST-	6.		TERMINA REPORT?	TION	Yes	١	lo	\
report type)	ANNUAL REPORT	7.	Year 2022				ING M					PAPER		/	DISK	ETTE	
Name of Office S	Sought by Candida	ate:	-				DA [*]	TE O	F ELE	CTI	ON	District Office Party Code C					
							МО		DAY	,	YEAR	4	STH	REI)	25	
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					11		8	2022		(SEE IN	STRUCTI	ONS FO	R CODES	6)
	Receipts and	МО	DAY	YEAR			МО		DAY	,	YEAR	FO	R OFFI	CE USE	ONL	7	
Expenditures	from:		1 1	20	022	ТО		5		2	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport		•	9	\$		•		0.00	1					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule I)		\$				0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				0.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$				511.31						
E. Ending Cash	Balance (Subtra	t Line D	From Line	C)			\$			(511.31)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	le II)	9	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)		9	\$				0.00			'			
				AFF	IDAV	IT SI	ECTI	ON									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	(f this i	is a Ca	ndida	ate re	port,	can	didate si	gn here.					
I swear (or affirm) correct and complete) that this report, inc ete.	luding the	e attached sc	hedules	filed o	n pape	r or by	electi	ronic m	ediu	ım, are to	the best of	my kno	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before me th	is	20								Signatur	e of Person	Submit	ting Re	port		_
	Signate					_						Print	ed Name	e			-
My Commission Ex	-							•				Email	l				-
	мо	D/	AY	YR					Ar	ea C	ode	Daytime	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Candi	date s	shall :	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and beli	ef this	politica	l comi	mittee	has n	ot viola	ted	any provi	sions of the	act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me this	ı										Signature of	f Candid	ate			-
	day of —— ————											Printed	d Name				-
	Signature					_											_
My Commission Exp	vires											Email	l				
	МО	D	AY	YR		_			Area	Cod	e	Da	ytime T	elephoi	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -								
Name of Filing Committee or Candidate	Reporting Period							
BANTA, JACOB DANIEL	From:	1/1/202	<u>2</u> To:	5/2/2022				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting	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 Reporting	y 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	y Period	(3)	\$	0.00				
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)								
TOTAL for the Reporting	g 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				

PAGE TOTAL

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	F	Reporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing 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)

(EXCID	ue contributions noi	in pontical comm	iiiie	es re	por teu	III Pait	Α)	
Name of Filing Committe	e or Candidate		Rep	oorting P	Period			
			Fro	m:		To):	
		'			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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	1			Repo	orting Pe	riod			
				Fron	n:		To):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary 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		Report	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	'	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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	I	
BANTA, JACOB DANIEL	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	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 Candidate			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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
BANTA, JACOB DANIEL	From	1/1/2022	То:	5/2/2022

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Waterford Beverage			MO		ILAK		
Mailing Address			4	29	2022	\$	51.50
City Waterford	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16441	Beer for	r Fundraise	er		
To Whom Paid			МО	DAY	YEAR		
Kwik Fill			MO	DAI	ILAK		
Mailing Address			3	24	2022	\$	20.02
City Waterford	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16441	Fuel				
To Whom Paid			МО	DAY	YEAR		
Thrifty Dry Cleaners			MO	DAT	TEAR		
Mailing Address			4	15	2022	\$	36.90
City Erie	State	Zip Code (Plus 4)	Descrip				
	PA	16506	Suit for	Forum & F	r		
To Whom Paid			МО	DAY	YEAR		
Go Daddy			1-10		IZAK		
Mailing Address			2	9	2022	\$	110.70
City Scottsdale	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	AZ	85260	website				
To Whom Paid			МО	DAY	YEAR		
Steve Clayton Inc			MO	DAI	ILAK		
Mailing Address			2	10	2022	\$	59.00
City Talent	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	OR	97540	Promo	oicks			
To Whom Paid			МО	DAY	YEAR		
Steve Clayton Inc			МО	DAT	TEAR		
Mailing Address			2	18	2022	\$	7.00
City Talent	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	OR	97540	Promo	oicks			

To Whom Paid			МО	DAY	YEAR		
Vistaprint			140		ILAK		
Mailing Address			2	25	2022	\$	128.19
City Waltham	State	Zip Code (Plus 4)	Description of Expenditure				
	MA	02451	Rack Cards				
To Whom Paid				DAY	YEAR		
National Center for Constitutional Studies			МО		1 Z/IIX		
Mailing Address			2	18	2022	\$	98.00
City Malta	State	Zip Code (Plus 4)	Description of Expenditure				
	ID	83342	Pocket Constitutions				
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	511.31