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	20220	295				port ed B		CAND	DATE		COMN	MITTEE	✓	LOB	вуіст		
Name of Filing C	ommittee,	Candida	te or Lo	obbyist:		FRI	END:	S OF	ANNA TH	HOMAS								
Street Address:	3325 🗅	DARIEN	RD															
City:	BETHLE	EHEM							State:	PA			Zip Cod	ie: 18	020-1	.316		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRID PRIMARY	AY PRE	-	2. X	30 DA		POST-	3.		AMENDM REPORT?		Yes	No		\
(place X to the right of	6TH TUESDA PRE-ELECTI		4.	2ND FRID. ELECTION		E-	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	No		\
report type)	ANNUAL R	EPORT	7.	Year 2022	2				NG METH CHECK O				PAPER		\	DISKE	TTE	
Name of Office S	- Sought by C	andidate	e:						DATE C	F ELE	CTIC	N	District Number	Office Code	Pai	ty Code	Coun	
									МО	DAY	YI	EAR	137	STH	DEI	М	48	
REPRESENTATI	VE IN THE	GENERA	AL ASS	EMBLY					11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	•	and	МО	DAY	YEAR	₹			МО	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:			1	1 2	022	T	0	5	5	2	2022						
A. Amount Bro	ught Forwa	rd From	Last R	eport			•	\$				0.00						
B. Total Moneta	ary Contrib	utions A	nd Rec	eipts (Fro	m Sche	dule	e I)	\$			2,	550.00						
C. Total Funds	Available (Sum Of I	Lines A	and B)				\$			2,	550.00						
D. Total Expend	ditures (Fro	om Sche	dule II	I)				\$			=	177.14						
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)			\$			2,4	72.86						
F. Value Of In-	Kind Contri	butions	Receive	ed (From	Schedu	le II	I)	\$			2	252.12						
G. Unpaid Debt	s And Oblig	gations (From S	chedule I	V)			\$				0.00		•				
					AFF	FID/	AVI	ΓSE	CTION									
PART I - If this is	a Committ	tee repo	rt, trea	surer sign	here.	If th	nis is	a Car	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple		oort, inclu	ding the	attached s	chedule	s file	ed on	paper	or by elect	tronic m	edium	, are to t	he best o	f my knov	vledge	and beli	ef , tr	ue.
Sworn to and subs	cribed before day of	e me this		20							9	Signature	of Perso	n Submitt	ing Re	oort		_
		Signature		<u> </u>				-					Prin	ted Name				-
My Commission Ex		Signature	-							-			Ema	il				-
	М	0	D/	λY	YR			-		Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of	f a candi	date's	authorize	d Comr	nitte	ee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		best of my	y knowle	edge and be	lief this	s poli	itical	comm	ittee has r	not viola	ted ar	ny provisi	ions of the	e act of Ju	ıne 3,1	937 (P.L	1333	3,
Sworn to and subsc		me this										Si	ignature o	of Candida	ite			-
	day of ——							-					Printa	d Name				_
	Sia	ınature						-					Fillice					_
My Commission Exp	_	.											Ema	il				
		мо	DA	ΑΥ	YR	ì.		•		Area	Code		Da	aytime Te	elephor	ne Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF ANNA THOMAS	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)	\$	320.00
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)			\$	1,830.00
TOTAL for the Reporting	y Period	(2)	\$	1,830.00
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)			\$	500.00
TOTAL for the Reporting	J Period	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	j 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			\$	2,650.00

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 or Candidat	e		Rep	orting Pe	eriod			
FRIENDS OF ANNA THOMAS			Fro	m:	1/1/2	2022 To) :	5/2/2022
					DATE			AMOUNT
Full Name of Contributor Martin J. Beatty				МО	DAY	YEAR		
Mailing Address 1926 12th Street							\$	240.00
City Bethlehem	State PA	Zip Code (Plus 4) 18020		4	18	2022		
Full Name of Contributor Concetta M.Labellarte				МО	DAY	YEAR		
Mailing Address Apt 216 212 East 3	1 Ave North						\$	100.00
City Kansas City	State MO	Zip Code (Plus 4) 64116		4	18	2022		
Full Name of Contributor Concetta M.Labellarte				МО	DAY	YEAR		
Mailing Address Apt 216 212 East 3	1 Ave North						\$	50.00
City Kansas City	State MO	Zip Code (Plus 4) 64116		4	22	2022		
Full Name of Contributor Mary Thomas				МО	DAY	YEAR		
Mailing Address 3325 Darien Road				4	18	2022	\$	240.00
City Bethlehem	State PA	Zip Code (Plus 4) 18020		7	10	2022		
Full Name of Contributor Malissa Davis				МО	DAY	YEAR		
Mailing Address 4282 Windswept Dr	rive						\$	100.00
City Bethlehem	State PA	Zip Code (Plus 4) 18020		4	26	2022		

Full Name of C	ontributor						
Grant Holland				МО	DAY	YEAR	
Mailing Addres	597 Mountain Road	i					\$ 100.00
City Boiling	Springs	State	Zip Code (Plus 4)	4	28	2022	
		PA	17007				
Full Name of Co				мо	DAY	YEAR	
Mailing Addres	1304 Heights Dr						\$ 100.00
City Santa	Clara	State	Zip Code (Plus 4)	4	30	2022	
		UT	84765				
Full Name of C	ontributor						
Kristin Mullen	one ibacoi			МО	DAY	YEAR	
Mailing Addres	3276 Gun Club Roa	ad		_			\$ 250.00
City Nazare	eth	State	Zip Code (Plus 4)	5	1	2022	
		PA	18064				
Full Name of Co				МО	DAY	YEAR	
	er	urt		МО	DAY	YEAR	\$ 100.00
John K Gallage	er 3308 Moravian Cou	urt State	Zip Code (Plus 4)	MO 5	DAY 1	YEAR 2022	\$ 100.00
John K Gallage	er 3308 Moravian Cou		Zip Code (Plus 4) 18020				\$ 100.00
John K Gallage	er 3308 Moravian Cou hem ontributor	State					\$ 100.00
John K Gallage Mailing Addres City Bethlel Full Name of C	er 3308 Moravian Cou hem ontributor thingham	State PA		5	1	2022	\$ 100.00
John K Gallage Mailing Addres City Bethlel Full Name of C Adeline E. Frot Mailing Addres	er 3308 Moravian Cou hem ontributor thingham ss 2112 Williams Ave	State PA		5	1	2022	
John K Gallage Mailing Addres City Bethlel Full Name of C Adeline E. Frot	er 3308 Moravian Cou hem ontributor thingham ss 2112 Williams Ave	State PA	18020	мо	DAY	2022 YEAR	
John K Gallage Mailing Addres City Bethlel Full Name of C Adeline E. Frot Mailing Addres	er 3308 Moravian Cou hem ontributor thingham 2112 Williams Ave	State PA State	18020 Zip Code (Plus 4)	мо	DAY	2022 YEAR	
John K Gallage Mailing Addres City Bethlel Full Name of C Adeline E. Frot Mailing Addres City Bethlel	as 3308 Moravian Counter them ontributor thingham ss 2112 Williams Ave	State PA State PA	18020 Zip Code (Plus 4)	мо	1 DAY	2022 YEAR 2022	
John K Gallage Mailing Addres City Bethlel Full Name of C Adeline E. Frot Mailing Addres City Bethlel Full Name of C Karen Frey Mailing Addres	as 3308 Moravian Counter them ontributor thingham ss 2112 Williams Ave them ontributor ss 563 Georgetown R	State PA State PA	18020 Zip Code (Plus 4)	мо	1 DAY	2022 YEAR 2022	\$ 100.00
John K Gallage Mailing Addres City Bethlel Full Name of C Adeline E. Frot Mailing Addres City Bethlel Full Name of C Karen Frey	as 3308 Moravian Counter them ontributor thingham ss 2112 Williams Ave them ontributor ss 563 Georgetown R	State PA State PA oad	18020 Zip Code (Plus 4) 18020	мо 5	DAY 1	2022 YEAR 2022	\$ 100.00

Full Name of Contributor Margie Derenzis			мо	DAY	YEAR	
Mailing Address 50 Clairmo	ont Ave					\$ 100.00
City Easton	State PA	Zip Code (Plus 4) 18045	5	1	2022	
Full Name of Contributor Gail W. Preuninger			МО	DAY	YEAR	
Gail W. Preuninger	mingbird Lane		MO 5	DAY	YEAR 2022	\$ 250.00

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

PAGE TOTAL
\$ 1,830.00

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			Rep	orting Pe	riod			
FRIENDS OF ANNA THOMAS			Fror	n:	<u>1/1/2</u>	<u>022</u> To	:	<u>5/2/2022</u>
				D/	ATE		AMO	UNT
Full Name of Contributor Dale Sourbeck				МО	DAY	YEAR		
Mailing 3211 Oakland Square	e Drive						\$	500.00
City Bethlehem	State	Zip Code (Plu	s 4)	4	27	2022		
	PA	18020						
Employer Name N/A				Occupat	t ion	Retired	•	
Employer Mailing Address/Principal Place Business	e of	City		•	State		Zip Code (Plus 4)
N/A		N/A			PA		18020	
Enter Grand Total of Part C on Sche	dule I. Detailed Si	ımmarv Page	Section	on 3.			PAG	E TOTAL
	= , = 	, . 					•	500.00

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	••			\$	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 Perio	od	
FRIENDS OF ANNA THOMAS	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	PER CONTRIBUTOR	l .	
TOTAL for the Reporting Pe	eriod (1)	\$	147.12
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2)	\$	105.00
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,	•	\$	252.12

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reporting	Period			
FRIENDS OF ANNA THOMAS			From:	<u>1</u>	<u>l/1/2022</u>	To:	5/2/2022
		•		DATE			AMOUNT
Full Name of Contributor Anna Thomas			мо	DAY	YEAR		
Mailing Address 3325 Darie	n Road		3	25	2022	\$	5.00
City Bethlehem	State	Zip Code (Plus 4)	7				
	PA	18020					
		L		l			
Description of Contribution: Full Name of Contributor Anna Thomas	Petition Filing		мо	DAY	YEAR		
Full Name of Contributor Anna Thomas			MO 3	DAY 28	YEAR 2022	\$	100.00
Full Name of Contributor Anna Thomas		Zip Code (Plus 4)	3			\$	100.00
Full Name of Contributor Anna Thomas Mailing Address 3325 Daries	n Road	Zip Code (Plus 4) 18020	3			\$	100.00
Full Name of Contributor Anna Thomas Mailing Address 3325 Daries City Bethlehem	n Road State		3			\$	100.00
Full Name of Contributor Anna Thomas Mailing Address 3325 Daries City Bethlehem	n Road State PA Petition Filing	18020	3	28	2022	\$	100.00 PAGE TOTAL

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period							
					From:		To:	То:			
					•		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Zip Code(Plus 4)							
Employer of Contributor						Occupation					
Employer Mailing Address/Principal Place of Business		City		State	State		Zip Code(Plus 4)		Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL 0.00			

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
FRIENDS OF ANNA THOMAS			From	1/2	1/2022	То:	5/2/2022		
		AMOUNT							
To Whom Paid ActBlue			мо	DAY	YEAR				
Mailing Address P.O Box 4411	.46		5	1	2022	\$	14.96		
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure Fees for April						
To Whom Paid WordPress.com Automattic Inc.			мо	DAY	YEAR				
Mailing Address 60, 29th St #	÷343		5	2	2022	\$	162.18		
City San Francisco	State CA	Zip Code (Plus 4) 94110		otion of Exp					

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

177.14