## **Campaign Finance Report**

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

Filer Identificat Number :	ion 2022	C0718			Repor Filed I		CAND	IDATE	✓	co	OMMITTE	E	LOBI	BYIST		
Name of Filing	Committee, Candid	ate or Lo	obbyist:		FRIEL,	PAUL	F JR									
Street Address																
City:							State:				<b>Zip Code:</b> 19460					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2. <b>X</b>	30 D. PRIM		POST-	3.		AMENDMENT REPORT?		Yes	No	<ul> <li>Image: A start of the start of</li></ul>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. 2ND FRIDAY PRE- ELECTION 5. 30 D					AY TION	POST-	6.		TERMINA REPORT?		Yes	No	$\checkmark$	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG METH CHECK O				PAPER		$\checkmark$	DISKE	TTE	
Name of Office	Name of Office Sought by Candidate:						DATE O	OF ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
REPRESENTAT	IVE IN THE GENER	RAL ASS	EMBLY				мо	DAY	YE	AR	26	STH	DEN	1	15	
								-	8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures from: 1 1 2022						0	5	5	2	2022						
A. Amount Bro	ought Forward Fron	n Last R	eport			\$				0.00						
B. Total Mone	tary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	\$ 0.00									
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5			0.00						
D. Total Exper	nditures (From Scho	edule II	I)			\$	5		50,0	00.00						
E. Ending Cas	h Balance (Subtract	t Line D	From Line	C)			5	(	50,00	0.00)	-					
F. Value Of In	-Kind Contributions	Receiv	ed (From S	chedu	le II)	\$	5			0.00	4					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		\$	5			0.00						
							CTION									
	is a Committee report, incl											my know	dodao	and hali	of true	
correct and comp		during the	e attached sc	neuure	s mea on	рареі	or by elec	a onic m	eurum,		the best of	IIIY KIIOW	leuge		er, true	
Sworn to and sub	scribed before me this day of	5				_			S	ignatur	e of Persor	Submitti	ing Rep	oort		
	Signatu	re				_					Print	ed Name				
My Commission E	xpires					_					Emai					
	МО	D/	AY	YR				Ar	ea Cod	e	Daytim	e Telepho	one Nu	mber		
	s a report of a canc ) that to the best of m led.							-		y provis	ions of the	act of Ju	ine 3,1	937 (P.I	. 1333,	
Sworn to and subs	cribed before me this day of									s	ignature o	f Candida	te			
day of 20											Printe	d Name				
My Commission Ex	Signature					_					Emai	1				
						_					-					
	МО	D	AY	YR	l			Area	Code		Da	ytime Te	lephon	e Numb	er	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIEL, PAUL F JR From: <u>1/1/2022</u> **To:** 5/2/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candidate			Re	porting I	Period			
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	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 Candidat	e		Rep Fror	orting P	eriod	Τα	):		
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	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 Candid	Name of Filing Committee or Candidate			Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detai	led Summary Pa	age, Sectio	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	Reporting I	Period	
	From:		То:
		DATE	AMOUNT

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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	ting Perio	od				
					From: To:				
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description				1	1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y Page,	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 Period		
FRIEL, PAUL F JR	From:	<u>1/1/2022</u> <b>то:</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	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	ΓF)		
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				
	F					То:		
				DATE		АМС	DUNT	
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 Schedule II, In-Kind Contributions Details Section 2.				mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

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

Name of Filing Committee or Candidate				Reporting Period						
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion		•	
Employer Mailing Address/Principal Place of City State Business				State		Zip 4)	Code(Plus	Descri	ption of	Contribution

	1	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed		PAGE TOTAL
Summary Page, Section 3.		0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
FRIEL, PAUL F JR				From <u>1/1/2022</u> To:							
		AMOUNT									
<b>To Whom Paid</b> Paul for PA				DAY	YEAR						
Mailing Address P.O. Box 42, 2102 k	ímberton Rd.		5	1	2022	\$	50,000.00				
City Kimberton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19442	· · ·	<b>otion of Exp</b> campaign		1					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL				
Enter Grand Total of Expenditures of	n Page 1, Report C	over Page, Item L				\$	50,000.00				