# **Campaign Finance Report**

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

Filer Identification 2022C0204 Report Number : Filed B							CANDI	DATE	✓	CC	OMMITTE		LOBI	BYIST	
Name of Filing (	Committee, Candida	ate or Lo	obbyist:		CORMA	N, JA	COB DOY	LE III							
Street Address:															
City:							State:	<b>Zip Code:</b> 16823							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. <b>X</b>	30 DA PRIM		POST-	3.		AMENDMENT REPORT?		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		POST-	OST- 6.		TERMINATION REPORT?		Yes	No	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG METHO CHECK O				PAPER		$\checkmark$	DISKE	TTE
Name of Office S	Sought by Candidat	te:					DATE O	FELE			District Number	Office Code	Par	ty Code	County Code
GOVERNOR							мо	DAY	YE	AR	-1	GOV	REP		14
GOVERNOR							11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE/	AR	FOI	R OFFIC	E USE	ONLY	
Expenditures	s from:		3 29	20	)22 <b>T</b>	0	5		2	2022					
A. Amount Bro	ught Forward Fron	n Last Ro	eport			\$			·	0.00					
B. Total Monet	ary Contributions A	And Rece	eipts (From	Scheo	dule I)	\$				0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				0.00					
D. Total Expen	ditures (From Sche	edule III	[)			\$				0.00					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				0.00					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$				0.00					
				AFF	IDAVI	T SE	CTION								
	s a Committee repo		-								-				
I swear (or affirm correct and compl	) that this report, incl ete.	uding the	attached sc	hedules	filed on	paper	or by elect	ronic m	edium,	are to	the best of	my know	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	;	20						Si	gnatur	e of Person	Submitt	ing Rep	ort	
	Signatu	re				-					Print	ed Name			
My Commission E	-										Email				
	мо	DA	NY	YR		-		Ar	ea Code		Daytime	e Telepho	one Nu	mber	
Part II- If this is	a report of a cand	lidate's a	authorized	Comm	ittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amend	) that to the best of m ed.	ıy knowle	dge and beli	ef this	political	comm	ittee has n	ot viola	ted any	provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	Sworn to and subscribed before me this Signature of Candidate														
						-					Printeo	i Name			
My Commission Exp	Signature					-					Email				
						_									
	мо	DA	AY .	YR				Area	Code		Da	ytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CORMAN, JACOB DOYLE III From: <u>3/29/2022</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				Reporting Period						
				From: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee			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 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	l)							
								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						
				То:					
				DA	TE		ŀ	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							<b>-</b>   \$	0.00	
City	State	Zip Cod	e (Plus 4)						
					PAGE TOTAL				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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 Period						
From:				m:			То:			
				D	ATE		AMOUNT			
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, Section 3.							<b>PAGE TOTAL</b> \$ 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			Reporting Period							
				rom: To:						
				DATE				AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description	·									
		_	<b>.</b>					PAGE TOT	AL	
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

### E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period											
CORMAN, JACOB DOYLE III	From:	<u>3/29/2022</u> то:	<u>5/2/2022</u>									
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	L. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR											
TOTAL for the Reporting Pe	riod (1)	\$	0.00									
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	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, I		\$	0.00									

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting Period					
				From:			То:	
	DATE			AMOUNT				
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Su Section 2.					ed Summary Page,			AL
						\$		0.00

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

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

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
				From						
		DATE		AMOUNT						
To Whom Paid	мо	DAY	YEAR							
Mailing Address						\$	0.00			
City	Zip Code (Plus 4)	) Description of Expenditure								
Enter Grand Tatal of Evnanditures	<u> </u>				PAGE TOTAL					
Enter Grand Total of Expenditures of				\$	0.00					