### **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 :	ion	2010	223			Rep File			CANDI	DATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBE	SYIST	
Name of Filing C	Committee	e, Candid	ate or Lo	obbyist:		MAS	SER	R, KUF	RT FRIEN	DS OF							
Street Address:	57 M	OUNTAIN	l RD														
City:	SHAM	10KIN							State:	PA			Zip Cod	de: 17	7872		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2	2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRI	Ē- 5	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	<b>~</b>
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2022					NG METHO CHECK O				PAPER		/	DISKE	TTE
Name of Office S	Sought by	Candida	te:	-					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
									МО	DAY	YE	AR	107	STH	REP		49
REPRESENTATI	IVE IN TH	E GENER	AL ASS	EMBLY					11		8	2022		(SEE IN	STRUCTIO	ONS FOR C	CODES)
Summary of		and	МО	DAY	YEAR	ł			МО	DAY	YI	AR	FC	R OFFI	CE USE	ONLY	
Expenditures	irom:			3 29	2	022	Т	0	5		2	2022					
A. Amount Bro	ught Forw	vard Fron	n Last R	eport				\$	-		45,5	524.14					
B. Total Monet	ary Contri	ibutions <i>i</i>	And Rec	eipts (Fron	1 Sche	dule	I)	\$				0.00					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			45,5	524.14					
D. Total Expend	ditures (F	rom Sch	edule II	I)				\$			19,5	50.00					
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$			25,9	74.14					
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II	)	\$				0.00					
G. Unpaid Debt	ts And Ob	ligations	(From S	Schedule IV	<b>'</b> )			\$				0.00			•		
					AFF	IDA	VI	ΓSE	CTION								
PART I - If this is	s a Comm	ittee rep	ort, trea	surer sign	here.	If thi	is is	a Car	ndidate re	eport, o	candi	date sig	jn here.				
I swear (or affirm) correct and comple		eport, incl	uding the	attached sc	hedule	s filed	l on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed befo	ore me this	3	20							S	Signature	of Perso	n Submit	ting Rep	ort	
		Signatu	ra					- -					Prin	ted Name	<b>e</b>		
My Commission Ex	kpires	Digitata											Ema	il			
	•	мо	DA	AY	YR			-		Are	ea Cod	le	Daytim	e Teleph	none Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	e, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		e best of n	ny knowle	edge and beli	ef this	polit	ical	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	ribed befor	e me this										s	ignature (	of Candid	ate		
	day of							-					Prin+e	ed Name			
	•	Signature						-					rillite	a Haille			
My Commission Exp		ya.u. C											Ema	il			
	_	МО	D/	AY	YR	1		•		Area	Code		D	aytime T	elephon	e Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
MASSER, KURT FRIENDS OF	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	) 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	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	) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	0.00
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			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			From:			То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE 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	Name of Fining Committee of Canadate			Reporting Period From: To:				
			l		DATE			AMOUNT
Full Name of Contributor				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.

**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	•			Rep	orting Pe	riod			
				Fror	n:		То	):	
					D	ATE		A	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	O.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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z 5</i> 4a. <b>y</b> 1 4 <b>9</b> 0,	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	
MASSER, KURT FRIENDS OF	From:	3/29/2022 <b>To:</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	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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									<b>\$</b>	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

### SCHEDULE III **STATEMENT OF EXPENDITURES**

Name of Filing Committee or	Candidate		Reporti	ng Period			
MASSER, KURT FRIENDS OF			From	3/29	9/2022	То:	5/2/2022
				DATE			AMOUNT
To Whom Paid Saint Johns UCC			мо	DAY	YEAR		
Mailing Address 117 N. 8th	h St		3	30	2022	\$	600.00
<b>City</b> Shamokin	State PA	<b>Zip Code (Plus 4)</b> 17872		otion of Exp			
<b>To Whom Paid</b> Schuylkill County GOP			МО	DAY	YEAR		
Mailing Address PO Box 449			4	14	2022	\$	350.00
<b>City</b> Pottsville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17901		Description of Expenditure Ad & Dinner			
<b>To Whom Paid</b> Silvis for PA		•	мо	DAY	YEAR		
Mailing Address PO Box 10	)2		4	4	2022	\$	1,000.00
<b>City</b> Vandergrift	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15690	<b>Descrip</b> Contrib	otion of Expoution	penditure		
<b>To Whom Paid</b> Team Gillespie	·	•	мо	DAY	YEAR		
Mailing Address 5225 Pick	ing Road		4	4	2022	\$	2,000.00
City York	State	<b>Zip Code (Plus 4)</b> 17406	<b>Descrip</b> Contrib	otion of Exp	enditure		
	PA	17400	Contin	Jacion			

			l				
<b>To Whom Paid</b> Silvis for PA			мо	DAY	YEAR		
Mailing Address PO Box 102			4	4	2022	\$	1,000.00
<b>City</b> Vandergrift	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15690	Description of Expenditure Contribution				
<b>To Whom Paid</b> Team Gillespie			мо	DAY	YEAR		
Mailing Address 5225 Picking Road			4	4	2022	\$	2,000.00
City York	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17406	Description of Expenditure  Contribution				
<b>To Whom Paid</b> Shamokin Area High School Musical			МО	DAY	YEAR		
Mailing Address 2000 West State St	reet		3	31	2022	\$	100.00
City Shamokin	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17872	Description of Expenditure Ad				

							AGE 12
To Whom Paid Friends of Kate Klunk			мо	DAY	YEAR		
Mailing Address PO Box 941			4	11	2022	\$	1,000.00
City Hanover	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17331	<b>Descrip</b> Contrib	tion of Exp ution			
To Whom Paid Friends of Aaron Bernstine			МО	DAY	YEAR		
Mailing Address 254 State Route 168			4	12	2022	\$	500.00
City New Galilee	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16141	Description of Expenditure Contribution				
To Whom Paid Friends of Chris Quinn			МО	DAY	YEAR		
Mailing Address 815 Greenwood Ave Ste 21			4	12	2022	\$	500.00
<b>City</b> Jenkintown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19046	Description of Expenditure Contribution				
To Whom Paid Friends of Todd Stephens			МО	DAY	YEAR		
Mailing Address 212 Hampton Road			4	12	2022	\$	1,000.00
<b>City</b> Hatboro	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19040	Description of Expenditure Contribution				
To Whom Paid Silvis for PA			МО	DAY	YEAR		
3.101.17			110				
Mailing Address PO Box 102			4	13	2022	\$	1,000.00
Matter and decree	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15690	4	13	2022	\$	1,000.00
Mailing Address PO Box 102			4 Descrip	13	2022	\$	1,000.00
Mailing Address PO Box 102  City Vandergrift  To Whom Paid			4  Descrip Contrib	13  Ition of Expution	2022 penditure	\$	1,000.00

To Whom Paid HDCNC			мо	DAY	YEAR		
Mailing Address 420 West 7th Street			4	12	2022	\$	2,500.00
City Mount Carmel	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17851	Description of Expenditure Fight the Blight Sponsor				
To Whom Paid HRCC			мо	DAY	YEAR		
Mailing Address PO Box 11787			4	23	2022	\$	8,000.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> Southwest Outing				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	
					\$	19,550.00	