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 :		Repo Filed			CAND	IDATE		СОМ	ITTEE	✓	LOBE	YIST				
Name of Filing C	Committee, Candi	date or L	obbyist:	F	RIEN	NDS	S OF I	DARYL N	1ETCAL	.FE	•		_			
Street Address:	P.O. BOX 15	36														
City:	CRANBERRY	TWP						State:	PA			Zip Code: 16066				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.	х	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION	PRE-	- 5.		30 DA ELECT		POST-	6.	TERMINATIO REPORT?			Yes	No	~
report type)	ANNUAL REPOR	r 7.	Year 2022	FILING METHOD () CHECK ONE						PAPER	PAPER DISKET			ITE		
Name of Office S	Sought by Candid	ate:	•		•			DATE (OF ELE	CTIC	N	District Number	Office Code	Part	ty Code	County Code
								МО	DAY	YI	AR	12	STH	REP		10
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					11	L	8	2022		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY YE	AR				МО	DAY	Y	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	irom:		3 29	20)22	T	0	Ī	5	2	2022					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			62,	203.20					
B. Total Monet	ary Contributions	And Rec	eipts (From Sc	hec	lule I	()	\$				0.00					
C. Total Funds	Available (Sum (of Lines A	and B)				\$			62,2	203.20					
D. Total Expen	ditures (From Sc	nedule II	I)				\$			10,5	91.53					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			51,6	11.67]				
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sche	dul	e II)		\$				0.00					
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$				0.00			•		
			Al	13	[DA\	/I7	ΓSE	CTION								
PART I - If this is			_								_					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached schedu	ıles	filed	on p	paper o	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me th	is	20							S	Signature	of Perso	n Submit	ting Rep	ort	
							-					Prin	ted Name	e		
My Commission Ex	Signat cpires	uie										Ema	il			
	мо	D	AY ,	YR			-		Ar	ea Cod	le	Daytim	ne Telepi	none Nui	nber	
Part II- If this is	a report of a car	ndidate's	authorized Cor	nm	ittee,	, Ca	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his	politic	al	commi	ittee has	not viola	ted ar	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me thi	5									s	ignature (of Candid	ate		
	day of						•									
	6:1						-					Printe	ed Name			
My Commission Exp	Signature Pires											Ema	il			
	МО	D	AY	YR					Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF DARYL METCALFE	From:	3/29/202	<u>22</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	g 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	g 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
			1	
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			
			Fr	om:		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 of Candidate				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:		To	o:		
					D	ATE			AMOUNT	
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 C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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 C	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. Detailed	d Summary Page.	Section	4.			PAGE TOTA	ıL
		· • • • • • • • • • • • • • • • • • • •					\$ C	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 DARYL METCALFE	From:	3/29/2022 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 Candidat	:e		Reporting	g Period			
			From:			То:	
				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 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 Candi	date				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			1			Occupa	tion			
Employer Mailing Address/Principa Business	l Place of	City		State		Zip 4)	Code(Plus	Descr	iption (of Contribution
Enter Grand Total of Part G on	Schedule II,	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
FRIENDS OF DARYL METCALFE	From	3/29/2022	То:	<u>5/2/2022</u>

				DATE	AMOUNT		
To Whom Paid COMMUNICATION CONCEPTS			мо	DAY	YEAR		
Mailing Address 2906 WILLIAM PENN HWY SUITE 401			1	12	2022	\$	404.60
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure VOTER CONTACT SERVICES				
To Whom Paid VERIZON			МО	DAY	YEAR		
Mailing Address P.O. BOX 25505			1	24	2022	\$	57.23
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure SMART PHONE SERVICE				
To Whom Paid ARMSTRONG			МО	DAY	YEAR		
Mailing Address P.O. BOX 37749			2	2	2022	\$	75.24
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101	Description of Expenditure INTERNET & DESCRIPTION OF THE PROPERTY OF THE PROPE				
To Whom Paid BANK OF AMERICA			МО	DAY	YEAR		
Mailing Address P.O. BOX 15019			2	15	2022	\$	181.31
City WILMINGTON	State DE	Zip Code (Plus 4) 19886	Description of Expenditure VISA PAYMENT FOR P.O. BOX RENTAL FEE, COPIES&POSTAGE				
To Whom Paid VERIZON			МО	DAY	YEAR		
Mailing Address P.O. BOX 25505			2	23	2022	\$	57.23
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure SMART PHONE SERVICE				

						PAG	E 12
To Whom Paid ARMSTRONG				DAY	YEAR		
Mailing Address P.O. BOX 37749			3	7	2022	\$	75.24
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101	Description of Expenditure INTERNET & DESCRIPTION OF THE SERVICE				
To Whom Paid BANK OF AMERICA			МО	DAY	YEAR		
Mailing Address P.O. BOX 15019			3	15	2022	\$	50.00
City WILMINGTON	State DE	Zip Code (Plus 4) 19886	Description of Expenditure VISA PAYMENT FOR VOLUNTEER GIFT CARD				CARD
To Whom Paid RICHARD LIPP			МО	DAY	YEAR		
Mailing Address 137 SPITHALER SCHOOL RD			3	25	2022	\$	100.00
City EVANS CITY	State PA	Zip Code (Plus 4) 16033	Description of Expenditure RETURN OF 2021 CONTRIBUTION				
To Whom Paid VERIZON			МО	DAY	YEAR		
Mailing Address P.O. BOX 25505			3	25	2022	\$	57.23
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure SMART PHONE SERVICE				
To Whom Paid ARMSTRONG			МО	DAY	YEAR		
Mailing Address P.O. BOX 37749			4	5	2022	\$	75.44
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101	Description of Expenditure INTERNET & DESCRIPTION OF SERVICE				
To Whom Paid BANK OF AMERICA			МО	DAY	YEAR		
Mailing Address P.O. BOX 15019			4	13	2002	\$	147.87
			Description of Expenditure VISA PAYMENT FOR BREAKFAST MEETING & amp; MICROSOFT 365				

						PA	GE 13
To Whom Paid COMMUNICATION CONCEPTS			мо	DAY	YEAR		
Mailing Address 2906 WILLIAM PENN HWY SUITE 401			4	25	2022	\$	4,100.00
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure VOTER SURVEY SERVICES				
To Whom Paid VERIZON			МО	DAY	YEAR		
Mailing Address P.O. BOX 25505			4	26	2022	\$	57.20
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure SMART PHONE SERVICE				
To Whom Paid COMMUNICATION CONCEPTS			мо	DAY	YEAR		
Mailing Address 2906 WILLIAM PENN HWY SUITE 401			4	28	2022	\$	4,574.37
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure PRINTING & DESCRIPTION OF THE PRINTING & DESCRIPTION OF THE PRINTING SERVICES				S
To Whom Paid ARMSTRONG	•	·	МО	DAY	YEAR		
Mailing Address P.O. BOX 37749			4	29	2022	\$	75.24
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101	Description of Expenditure INTERNET & DESCRIPTION OF THE PROPERTY OF THE PROPE				
To Whom Paid BANK OF AMERICA			мо	DAY	YEAR		
Mailing Address P.O. BOX 15019			4	29	2022	\$	503.33
City WILMINGTON	State DE	Zip Code (Plus 4) 19886	Description of Expenditure VISA PAYMENT FOR BREAKFAST & DINNER MEETINGS, VOLUNTEER GIFT CARDS				
						P	AGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	port Cover Page, Item D	•			\$	10,591.53