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 202	2C0858				Rep File			CA	NDII	DATE	*	C	OMMITTE	MMITTEE LOBBYIST			Т	
Name of Filing C	ommittee, Candi	date or L	obby	vist:		BETI	H FI	NCH	•										
Street Address:																			
City:	_								State	e:				Zip Coo	le: 18	3052			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		FRIDA' MARY	Y PRE-	- 2	2. X	30 DA		Р	OST-	3.			AMENDMENT REPORT?			No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		FRIDA' CTION	Y PRE	- 5	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes		No	\
report type)	ANNUAL REPOR	Г 7.	Yea	r 2022					IG ME CHEC					PAPER		/	DIS	KETTE	
Name of Office S	ought by Candid	ate:							DAT	ΕO	F ELE	CTI	ION	District Number	Office Code	Pa	rty Co	de Cou	
									МО		DAY		YEAR	132	STH	REI)		
REPRESENTATI	VE IN THE GENE	RAL ASS	SEMB	SLY						11		8	2022		(SEE IN	STRUCTI	ONS F	OR CODE	S)
Summary of		МО	D	PAY	YEAR				МО		DAY		YEAR	FO	R OFFI	CE USE	ONL	.Υ	
Expenditures	from:		3	29	20	022	Т	0		5		2	2022	2					
A. Amount Bro	ught Forward Fro	m Last R	epor	t				\$			•		0.00						
B. Total Moneta	ary Contributions	And Rec	eipts	s (From	Sche	dule	I)	\$					0.00)					
C. Total Funds Available (Sum Of Lines A and B)								\$					0.00						
D. Total Expenditures (From Schedule III)							\$				2	2,223.00							
E. Ending Cash Balance (Subtract Line D From Line C)								\$					0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (I	From S	chedul	le II)	\$					60.00						
G. Unpaid Debt	s And Obligation	s (From S	Sche	dule IV)			\$					0.00			'			
					AFF	IDA	VI	ΓSE	CTIC	NC									
PART I - If this is				_										_					
I swear (or affirm) correct and complete	that this report, in ete.	cluding the	e atta	ched scl	nedules	filed	l on	paper	or by e	electr	ronic m	ediu	ım, are to	the best o	f my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me th day of	is	20							•			Signatu	e of Perso	1 Submit	ting Re	port		
	Signat	ure	_					-						Prin	ted Name	e			_
My Commission Ex	cpires							_		•				Emai	i				
	мо	D	AY		YR						Ar	ea C	Code	Daytim	e Telepl	none Nu	ımber		
Part II- If this is	a report of a car	ididate's	auth	orized	Comm	nitte	e, C	andid	ate sl	nall s	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge	and beli	ef this	polit	ical	comm	ittee h	as no	ot viola	ted	any provi	sions of the	e act of J	une 3,1	937 (P.L. 13	33,
Sworn to and subsc	ribed before me thi	;	20											Signature o	f Candid	ate			_
			_ 20 _					-						Printe	d Name				-
My Commission Exp					-						Ema	iI				-			
•																			_
	МО	D	AY		YR						Area	Cod	le	Da	ytime T	elepho	ne Nu	mber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BETH FINCH	From:	3/29/202	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	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

PAGE TOTAL

0.00

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 Committe	e or Candidate			Re	porting	Period			
				Fre	om:		То	!	
						DATE			AMOUNT
Full Name of Contributing	Committee				МО	DAY	YEAR		
Mailing Address								\$	0.00
City		State	Zip Code (Plus 4	4)					

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

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		Rep	orting P	eriod			
			Fro	m:		To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
				•		•		DACE TOTAL

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 Candidate			Reporting	Period					
			From:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOT	AL
Enter Grand Total of Part C on School	dule I, Detailed Sun	nmary 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.)

			Repo	orting Pe	riod			
			Fron	n:		T	0:	
				D	ATE			AMOUNT
				мо	DAY	YEAR	\$	0.00
State	Zi	p Code (Plus	s 4)					
				Occupa	tion			
ce of Business		City			State		Zip	Code (Plus 4)
dule I, Detailed	Sumn	mary Page,	Section	on 3.			\$	PAGE TOTAL 0.00
	State ce of Business	State Zi ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: MO State Zip Code (Plus 4) Occupa	From: DATE MO DAY State Zip Code (Plus 4) Occupation ce of Business City State	State Zip Code (Plus 4) State Zip Code (Plus 4) Occupation ce of Business City State cdule I, Detailed Summary Page, Section 3.	From: To: DATE MO DAY YEAR State Zip Code (Plus 4) Occupation ce of Business City State Zip

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 of	or Candidate		Report	ing Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description		•			•	1	•	
Enter Crand Total of David	on Cahadula I. Datailad	Summany Dago	Section	4			·	PAGE TOTAL
Enter Grand Total of Part I	on Schedule 1, Detalled	Summary 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 DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Peri	od					
BETH FINCH	From:	3/29/2022 To:	<u>5/2/2022</u>				
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	₹					
TOTAL for the Reporting Pe	eriod (1)	\$	0.00				
IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)							
TOTAL for the Reporting Pe	eriod (2)	\$	60.00				
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,		\$	60.00				

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	ne of Filing Committee or Candidate				Reporting Period							
BETH FINCH			From:	<u>3/</u>	<u>/29/2022</u>	To:	5/2/2022					
				DATE			AMOUNT					
Full Name of Contributor			мо	DAY	YEAR							
LEHIGH COUNTY REPUBLICAN COMMIT	МО	DAT	TEAR	\$	60.00							
Mailing Address			4	28	2022	7 🕺	00.00					
City ALLENTOWN	State	Zip Code (Plus 4)] '		2022							
	PA	18104										
Description of Contribution: LABELS/I	MAILING	•	•	•	•	•						
Enter Grand Total of Part F on Sched Section 2.	lule II, In-Ki	nd Contributions Detai	led Sumi	mary Pag	ie,		PAGE TOTAL					
Section 2.						\$	60.00					

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name	of Filing Committee or	Candidate		Reportir	ng Period			
BETH	FINCH			From	<u>3/29</u>	9/2022	То:	5/2/2022
					DATE			AMOUNT
To Wh	om Paid			МО	DAY	YEAR		
STAPL	ES			MO	DA1	ILAK		
Mailin	g Address			4	28	2022	\$	724.00
City	WHITEHALL	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	18052	LETTERS	S/MAILER			
To Wh	om Paid			МО	DAY	YEAR		
BEYO	ND CITIZENS BENJAMIN	I JACQUES		140		ILAK		
Mailin	g Address			4	11	2022	\$	350.00
City	NAZARETH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	18064	LOGO/D	ESIGN			
To Wh	om Paid			МО	DAY	YEAR		
BEYO	ND CITIZENS BENJAMIN	JACQUES		MO	DAT	TEAR		
Mailing Address				4	23	2022	\$	100.00
City	NAZARETH	State	Zip Code (Plus 4)	Descript	tion of Exp	•		
		PA	18064	ADDITIO	ONAL DES	IGN WOF	RK	
To Wh	om Paid			МО	DAY	YEAR		
USPS				140		ILAK		
Mailin	g Address			4	28	2022	\$	812.00
City	WHITEHALL	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	18052	STAMPS	FOR MAII	_ER		
To Wh	om Paid			МО	DAY	YEAR		
CANV	A.COM			MO	DAT	TEAR		
Mailin	g Address			4	15	2022	\$	85.00
City		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	<u>I</u>	
				BUSINE	SS CARDS			
To Wh	om Paid			МО	DAY	YEAR		-
DARR	EN PEIFFER ROYAL GRA	PHICS		l'iO		ILAK		
Mailin	g Address			5	5	2022	\$	152.00
City	ALLENTOWN	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	1	
		PA	18104	PALM C	ARDS			
								PAGE TOTAL
_			port Cover Page, Item I	_			1	