

Campaign Finance Report

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

Filer Identification Number : 2022C0507		Report Filed By :		CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE	LOBBYIST
Name of Filing Committee, Candidate or Lobbyist: ANN FLOOD						
Street Address:						
City:			State:		Zip Code: 18014-9649	
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2. <input checked="" type="checkbox"/>	30 DAY POST-PRIMARY	3.
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.
	ANNUAL REPORT	7.	Year 2022	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/> DISKETTE
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO	DAY	YEAR
				11	8	2022
				(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		3	29	2022		
A. Amount Brought Forward From Last Report				TO		
				5	2	2022
B. Total Monetary Contributions And Receipts (From Schedule I)						
C. Total Funds Available (Sum Of Lines A and B)						
D. Total Expenditures (From Schedule III)						
E. Ending Cash Balance (Subtract Line D From Line C)						
F. Value Of In-Kind Contributions Received (From Schedule II)						
G. Unpaid Debts And Obligations (From Schedule IV)						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
ANN FLOOD	From: <u>3/29/2022</u> To: <u>5/2/2022</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 100.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 1,000.00
All Other Contributions (Part B)	\$ 500.00
TOTAL for the Reporting Period (2)	\$ 1,500.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 500.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 2,600.00
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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 ANN FLOOD	Reporting Period From: <u>3/29/2022</u> To: <u>5/2/2022</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee INDEPENDENCE POLITICAL ACTION COMMITTEE			MO	DAY	YEAR	\$ 250.00
Mailing Address			1	27	2022	
City	State	Zip Code (Plus 4)				

Full Name of Contributing Committee CHAMBER PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address			4	18	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011902				

Full Name of Contributing Committee CAPITAL BLUE PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address			4	18	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 171060710				

Full Name of Contributing Committee HIGHMARK PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address			4	18	2022	
City CAMP HILL	State PA	Zip Code (Plus 4) 170890089				

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

PAGE TOTAL
\$ 1,000.00

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
ANN FLOOD	From: <u>3/29/2022</u> To: <u>5/2/2022</u>

DATE	AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
ROBERT S. TAYLOR						
Mailing Address						
City HARRISBURG	State PA	Zip Code (Plus 4) 171120349	1	6	2022	

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
GUY N. SAXTON						
Mailing Address						
City EASTON	State PA	Zip Code (Plus 4) 18045	4	19	2022	

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

PAGE TOTAL
\$ 500.00

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	
ANN FLOOD	From: <u>3/29/2022</u>	To: <u>5/2/2022</u>

				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
WODJAK FOR THE COMMONWEALTH PAC								
Mailing Address				4	18	2022		
City	HARRISBURG	State	Zip Code (Plus 4)					
		PA	17101					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL	
\$	500.00

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 ANN FLOOD	Reporting Period From: <u>3/29/2022</u> To: <u>5/2/2022</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
JM ULIANA AND ASSOCIATES, LLC							\$ 500.00
Mailing Address				3	28	2022	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State		Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 500.00

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 From: To:
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			DATE	AMOUNT		
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
ANN FLOOD		From: <u>3/29/2022</u> To: <u>5/2/2022</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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 From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
ANN FLOOD	From <u>3/29/2022</u> To: <u>5/2/2022</u>

				DATE	AMOUNT		
To Whom Paid ANN FLOOD				MO	DAY	YEAR	\$ 49.35
Mailing Address				1	27	2022	
City	BATH	State	PA	Zip Code (Plus 4)	18014	Description of Expenditure CAMPAIGN PHONE REIMBURSEMENT-JANUARY	
To Whom Paid ANN FLOOD				MO	DAY	YEAR	\$ 49.35
Mailing Address				2	10	2022	
City	BATH	State	PA	Zip Code (Plus 4)	18014	Description of Expenditure CAMPAIGN PHONE REIMBURSEMENT-FEBRUARY	
To Whom Paid ANN FLOOD				MO	DAY	YEAR	\$ 350.00
Mailing Address				2	10	2022	
City	BATH	State	PA	Zip Code (Plus 4)	18014	Description of Expenditure REIMBURSEMENT-LINCOLN BREAKFAST	
To Whom Paid ANN FLOOD				MO	DAY	YEAR	\$ 49.35
Mailing Address				3	16	2022	
City	BATH	State	PA	Zip Code (Plus 4)	18014	Description of Expenditure CAMPAIGN PHONE REIMBURSEMENT-MARCH	
To Whom Paid ANN FLOOD				MO	DAY	YEAR	\$ 700.00
Mailing Address				3	16	2022	
City	BATH	State	PA	Zip Code (Plus 4)	18014	Description of Expenditure REIMBURSEMENT-DOOR KNOCKING APP	
To Whom Paid COMMUNICATION CONCEPTS				MO	DAY	YEAR	\$ 308.11
Mailing Address				3	25	2022	
City	EASTON	State	PA	Zip Code (Plus 4)	18045	Description of Expenditure DETZI'S AUTO CALL	

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 49.35
Mailing Address			4	1	2022	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CAMPAIGN PHONE REIMBURSEMENT-APRIL			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 467.59
Mailing Address			4	5	2022	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT-PETITION SIGNING EVENT			

To Whom Paid OLD TOWN DELI			MO	DAY	YEAR	\$ 201.39
Mailing Address			4	18	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure FOOD FOR HARRISBURG FUNDRAISER			

To Whom Paid HOUSE REPUBLICAN CAMPAIGN COMMITTEE			MO	DAY	YEAR	\$ 285.32
Mailing Address			4	18	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure MAILING OF INVITATIONS & COST OF VENUE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,509.81

