Campaign Finance Report

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

Filer Identificat Number :	tion 2022	C0516			Repo Filed	-	C	ANDI	DATE	√	CO	OMMITTE	E	LOB	BYIST		
Name of Filing	Committee, Candida	ate or Lo	obbyist:		DAVIE	S, R0	OBER ⁻	Г									
Street Address	:																
City:							State:				Zip Cod	Zip Code: 19438					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY IMARY	F	POST- 3. X			AMENDMENT REPORT?		Yes	No	D	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	Ξ- 5.		DAY CTION	-	POST-	6.		TERMINA REPORT?		Yes	No	C	\checkmark
report type)	ANNUAL REPORT	7.	Year 2022 FILING METHOD () CHECK ONE										\checkmark	DISK	ETTE		
Name of Office	Sought by Candidat	te:					DA	TE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun Code	
							мс)	DAY	YE	AR	12	STS	REF)	46	
SENATOR IN THE GENERAL ASSEMBLY								11		8	2022]	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мс)	DAY	YE	AR	FO	R OFFIC	e use	ONLY		
Expenditure	s from:		5 3	2	022	то		6		6	2022						
A. Amount Bro	ought Forward Fron	n Last R	eport				\$			(5	18.99)						
B. Total Mone	tary Contributions A	And Reco	eipts (Fron	n Sche	dule I))	\$				0.00						
C. Total Funds	a Available (Sum Of	Lines A	and B)				\$			(5	18.99)						
D. Total Exper	nditures (From Sche	edule II	[)				\$			2	91.85						
E. Ending Cas	h Balance (Subtract	Line D	From Line	C)		_	\$			(81	.0.84)	-					
F. Value Of In	-Kind Contributions	Receive	ed (From S	chedu	le II)		\$				0.00	-					
G. Unpaid Deb	ots And Obligations	(From S	chedule IV	/)			\$				0.00						_
					IDAV												
	is a Committee repo												i mu knou	dadaa	and hal	iof tr	
correct and comp	n) that this report, incluie lete.	uaing the	attached sc	nequie	s filed o	п раре	erorb	y elect	ronic m	earum	, are to	the best of	ту клом	neage	anu bei	ier, tri	je
Sworn to and sub	scribed before me this day of	i	20							s	ignatur	e of Persor	n Submitti	ing Rep	oort		-
	Signatur	re				_						Print	ed Name				-
My Commission I	Expires											Emai	I				_
	МО	DA	NY	YR					Ar	ea Cod	e	Daytim	e Telepho	one Nu	mber		
	s a report of a cand) that to the best of m ded.								-		y provis	sions of the	e act of Ju	ine 3,1	937 (P.I	L. 1333	З,
Sworn to and subs	cribed before me this day of		20								s	ignature o	f Candida	te			-
												Printe	d Name				-
My Commission Ex	Signature											Emai	1				-
	мо		v						Area	Code			iytime Te	lenhor	e Num	ber	-
	no	DA	A T	YR	•				Alea	2046		Da	, une re		.s .tunii		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** DAVIES, ROBERT From: <u>5/3/2022</u> **To:** 6/6/2022 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			
					То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

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 Candidat	e			orting P	eriod	_		
	From: To:							
					DATE			AMOUNT
Full Name of Contributor				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 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		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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	Name of Filing Committee or Candidate			ing Perio	d				
From:			om: To:						
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	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 Period		
DAVIES, ROBERT	From:	<u>5/3/2022</u> то:	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
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, 1		\$	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	g Period			
F					То:	'o:	
				DATE		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate				Rej	porting P	eriod				
					Fro	om:		То:		
							AMOUNT			
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business				State		Zip Code(Plus 4) Description of (f Contribution	

	i
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Reporti	ng Period			
DAVIES, ROBERT			From	<u>5/:</u>	<u>3/2022</u>	То:	<u>6/6/2022</u>
				DATE			AMOUNT
To Whom Paid Friends of Rob Davies				DAY	YEAR		
Mailing Address PO Box 86			5	5	2022	\$	250.00
CityHarleysvilleStateZip Code (Plus 4)PA19438			Descrip Contrib	otion of Exp oution	penditure	3	
To Whom Paid Staples			мо	DAY	YEAR		
Mailing Address 4020 Bethlehem F	Pike		5	8	2022	\$	37.09
City Telford	State PA	Zip Code (Plus 4) 18969		ss cards	penditure	;	
To Whom Paid Staples			мо	DAY	YEAR		
Mailing Address 4020 Bethlehem F	Pike		5	14	2022	\$	4.76
CityTelfordStateZip Code (Plus 4)PA18969			Descrip Marker	s	penditure	; ;	
Enter Grand Total of Expenditure	s on Page 1 E	Penort Cover Page Item I	<u>.</u>				PAGE TOTAL
	s on Page 1, r	teport cover rage, item i				\$	291.85