

Commonwealth of Pennsylvania

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 : 20210253		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: RICK FOR LG										
Street Address: 404 BOSTON HOLLOW ROAD										
City: ELIZABETH			State: PA		Zip Code: 15037					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. <input checked="" type="checkbox"/>	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	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	Office Code	Party Code	County Code
				MO	DAY	YEAR				
				11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		5	3	2022	TO	6	6	2022		
A. Amount Brought Forward From Last Report				\$		16,055.65				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		1,300.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		17,355.65				
D. Total Expenditures (From Schedule III)				\$		1,294.28				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		16,061.37				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		16,050.00				

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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
RICK FOR LG	From: <u>5/3/2022</u> To: <u>6/6/2022</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 120.00

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)	\$ 1,180.00
TOTAL for the Reporting Period (2)	\$ 1,180.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,300.00
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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	Reporting Period
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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
RICK FOR LG	From: <u>5/3/2022</u> To: <u>6/6/2022</u>

				DATE	AMOUNT		
Full Name of Contributor ALECIA ADDINK				MO	DAY	YEAR	\$ 25.00
Mailing Address 1202 ELM AVE				5	22	2022	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648					
Full Name of Contributor MARILYN SCOTT				MO	DAY	YEAR	\$ 50.00
Mailing Address 705 KAREN LANE				5	15	2022	
City HERMITAGE	State PA	Zip Code (Plus 4) 16148					
Full Name of Contributor PATRICIA SCHRADER				MO	DAY	YEAR	\$ 50.00
Mailing Address 928 ELIZABETH STREET				5	10	2022	
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701					
Full Name of Contributor STEPHEN CRAWFORD				MO	DAY	YEAR	\$ 100.00
Mailing Address 182 JENNIFER CT				5	9	2022	
City LEVITOWN	State PA	Zip Code (Plus 4) 19057					
Full Name of Contributor KIMBERLY WAIGAND				MO	DAY	YEAR	\$ 25.00
Mailing Address 2924 CUSTER AVE				5	6	2022	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15227					

Full Name of Contributor SUZANNE DITTMAN				MO	DAY	YEAR	\$ 100.00
Mailing Address 4106 VERNER CT				5	3	2022	
City MURRYSVILLE	State PA	Zip Code (Plus 4) 15668					
Full Name of Contributor LYNN KOKINDA				MO	DAY	YEAR	\$ 150.00
Mailing Address 1046 WATER STREET				5	3	2022	
City MOOSIC	State PA	Zip Code (Plus 4) 18507					
Full Name of Contributor JOSEPH KRILL				MO	DAY	YEAR	\$ 75.00
Mailing Address 113 HENRY HUDSON DR				5	22	2022	
City DELMONT	State PA	Zip Code (Plus 4) 15626					
Full Name of Contributor JAMES SHELTER				MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 421				5	15	2022	
City REPUBLIC	State PA	Zip Code (Plus 4) 15475					
Full Name of Contributor HELEN MACMINN				MO	DAY	YEAR	\$ 50.00
Mailing Address 65 SHADY LANE				5	12	2022	
City MOHNTON	State PA	Zip Code (Plus 4) 19540					
Full Name of Contributor THE C LLC				MO	DAY	YEAR	\$ 205.00
Mailing Address 4131 BROWNSVILLE ROAD				5	5	2022	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15227					

Full Name of Contributor DONN CHAPMAN			MO	DAY	YEAR	\$ 100.00
Mailing Address 1096 MILLWOOD ROAD			5	4	2022	
City DERRY	State PA	Zip Code (Plus 4) 15627				
Full Name of Contributor LINDA DUPILL			MO	DAY	YEAR	\$ 50.00
Mailing Address 4151 HICKORY HILL ROAD			5	2	2022	
City MURRYSVILLE	State PA	Zip Code (Plus 4) 15668				
Full Name of Contributor DAVID BAUER			MO	DAY	YEAR	\$ 100.00
Mailing Address 62 DUNCAN STATION RD			5	2	2022	
City MCKEESPORT	State PA	Zip Code (Plus 4) 15135				

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

PAGE TOTAL
\$ 1,180.00

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: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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: To:

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
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
\$ 0.00

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: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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 RICK FOR LG	Reporting Period From: <u>5/3/2022</u> To: <u>6/6/2022</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:

Full Name of Contributor	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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 II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$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		
Mailing Address				\$	0.00
City	State	Zip Code(Plus 4)			
Employer of Contributor				Occupation	
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate RICK FOR LG	Reporting Period From <u>5/3/2022</u> To: <u>6/6/2022</u>
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			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
PUNKY PIZZA				
Mailing Address			5	4
			2022	\$ 47.70
City	State	Zip Code (Plus 4)	Description of Expenditure	
			PIZZA	
To Whom Paid	MO	DAY	YEAR	
GK CREATIVE				
Mailing Address			5	4
			2022	\$ 1,211.87
City	State	Zip Code (Plus 4)	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
FACEBOOK				
Mailing Address			5	2
			2022	\$ 34.71
City	State	Zip Code (Plus 4)	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
WPY INC				
Mailing Address			4	26
			2022	\$ 1,080.20
City	State	Zip Code (Plus 4)	Description of Expenditure	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 2,374.48

SCHEDULE IV
STATEMENT OF UNPAID DEBTS
 Use this Section to itemize all unpaid debts and obligations
 which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate				Reporting Period			
RICK FOR LG				From: <u>5/3/2022</u> To: <u>6/6/2022</u>			
DATE							Outstanding Balance of Debt
Name of Creditor RICK SACCONO				MO	DAY	YEAR	\$ 500.00
Mailing Address 404 BOSTON HOLLOW ROAD				7	22	2021	
City ELIZABETH	State PA	Zip Code (Plus 4) 15037		Description of Debt CAMPAIGN LOAN			
DATE							Outstanding Balance of Debt
Name of Creditor RICK SACCONO				MO	DAY	YEAR	\$ 500.00
Mailing Address 404 BOSTON HOLLOW ROAD				8	5	2021	
City ELIZABETH	State PA	Zip Code (Plus 4) 15037		Description of Debt CAMPAIGN LOAN			
DATE							Outstanding Balance of Debt
Name of Creditor RICK SACCONO				MO	DAY	YEAR	\$ 5,050.00
Mailing Address 404 BOSTON HOLLOW ROAD				8	20	2021	
City ELIZABETH	State PA	Zip Code (Plus 4) 15037		Description of Debt CAMPAIGN LOAN			
DATE							Outstanding Balance of Debt
Name of Creditor RICK SACCONO				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 404 BOSTON HOLLOW ROAD				1	30	2022	
City ELIZABETH	State PA	Zip Code (Plus 4) 15037		Description of Debt CAMPAIGN LOAN			

				DATE			Outstanding Balance of Debt
Name of Creditor RICK SACCONI				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 404 BOSTON HOLLOW ROAD				3	5	2022	
City ELIZABETH	State PA	Zip Code (Plus 4) 15037	Description of Debt CAMPAIGN LOAN				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 16,050.00