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 20	200203			Repo			CANI	DIE	DATE		COM	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Can	didate or L	obbyist:	·	FRIE	NDS	S OF	ANN FL	.00	DD D								
Street Address:																		
City:	BATH							State:		PA			Zip Cod	le: 18	014-9	549		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2		30 DA PRIMA		P	OST-	3. X		AMENDM REPORT?		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5		30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	0	√
report type)	ANNUAL REPO	RT 7.	Year 2022					NG MET		_			PAPER		√	DISK	ETTE	
Name of Office S	ought by Cand	idate:	•					DATE	OF	F ELE	CTIO	N	District Number	Office Code	Par	ty Cod	Code	
								МО		DAY	YE	AR			REP	•		
								1	11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Expenditures		МО	DAY	YEAR		_	_	МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONLY	,	
			5 3	20)22	T	<u> </u>		6		6	2022						
A. Amount Bro	ught Forward F	rom Last F	Report				\$					291.67						
B. Total Moneta	ary Contribution	ns And Red	ceipts (From	Sched	dule 1	I)	\$					320.00						
C. Total Funds	Available (Sum	Of Lines A	A and B)				\$				31,6	511.67						
D. Total Expend	ditures (From S	ichedule I	II)				\$				2,2	264.70						
E. Ending Cash	Balance (Subti	ract Line D	From Line	C)			\$				29,3	46.97						
F. Value Of In-	Kind Contributi	ons Receiv	ed (From S	chedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ons (From	Schedule IV	')			\$					0.00		,				
				AFF:	IDA'	VI٦	ΓSE	CTIO	V									
PART I - If this is			_									_						
I swear (or affirm) correct and comple		including th	e attached scl	hedules	filed	on p	paper	or by ele	ectr	onic me	edium	, are to t	he best of	f my knov	/ledge	and be	lief , tr	ue
Sworn to and subs	cribed before me day of	this	20						-		S	ignature	of Perso	1 Submitt	ing Rep	ort		_
	Sign	ature					-		-				Print	ted Name				-
My Commission Ex	rpires						_		-				Emai	il				
	МО		PAY	YR						Are	a Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized	Comm	ittee	, Ca	andid	ate sha	ll s	ign he	ere.							
I swear (or affirm) No 320) as amende		of my knowl	ledge and beli	ef this	politio	cal	comm	ittee has	s no	t violat	ed an	y provisi	ons of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me t day of	his	20									Si	gnature o	f Candida	te			_
							•						Printe	d Name				-
	Signatu	ıre							_				E					_
My Commission Exp	ires												Emai	ıı				
	мо	С	PAY	YR						Area	Code		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF ANN FLOOD	From:	5/3/202	<u>2</u> To:	6/6/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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)			\$	320.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	320.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	320.00

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 Com	mittee or Candidate			Re	porting F	Period			
FRIENDS OF ANN I	FLOOD			Fr	om:	<u>5/3/2</u>	<u>)22</u> To:	•	6/6/2022
			·			DATE			AMOUNT
Full Name of Contrib	_				мо	DAY	YEAR		
Mailing Address					5	6	2022	\$	70.00
City BETHLEHEM		State PA	Zip Code (Plus 4 18015	1)					
Full Name of Contrib	uting Committee				мо	DAY	YEAR		
UGI ENERGY SVC LL	C PAC				МО	DAT	TEAR		
Mailing Address					5	31	2022	\$	250.00
City DENVER		State PA	Zip Code (Plus 4	1)	J	31	2022		

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

PAGE TOTAL 320.00

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.

			Fro	m:		To		
							J.	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	I)					

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Þ	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							*	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d 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	:	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							1	
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 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 of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							\neg	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Cookie					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, Detailed	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 Period		
FRIENDS OF ANN FLOOD	From:	<u>5/3/2022</u> To:	<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	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 Candidate			Reporting	g Period				
			From:			To:		
				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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or 0	Candidate		Reporti	ng Period			
FRIENDS OF ANN FLOOD			From	<u>5/</u>	3/2022	То:	6/6/2022
			•	DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
ANN FLOOD			1-10		12/11		
Mailing Address			5	3	2022	\$	49.35
City BATH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	18014	CAMPA	IGN PHONE	REIMBU	JRSEMEN ⁻	T-MAY
To Whom Paid FRIENDS OF JOHN MERHOCE	IN		мо	DAY	YEAR		
Mailing Address			5	5	2022	\$	1,000.00
City EASTON	State	Zip Code (Plus 4)	Description of Expenditur			<u> </u>	
	PA	18045	DONAT	ION			
To Whom Paid			МО	DAY	YEAR		
KEMMERER GRAPHICS			1-10		12/11		
Mailing Address			6	2	2022	\$	1,156.00
City WIND GAP	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	18091	SIGNS				
To Whom Paid			мо	DAY	YEAR		
ANN FLOOD							
Mailing Address			6	2	2022	\$	49.35
City BATH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18014	CAMBAI	IGN PHONE	- DETMOI	IDCEMENT	T 311NIT

2,254.70