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 2020	0203				port ed B		CANDI	DATE		СОМИ	1ITTEE	✓	LOBE	YIST			
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRII	END	S OF	ANN FLO	OD									
Street Address:	2157 WEST D	ELL RO	AD.															
City:	BATH	ATH State: PA										Zip Code: 18014-9549						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDMENT REPORT?		Yes	No	~		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	~		
report type)	ANNUAL REPORT	7.	Year 2022					IG METHO				PAPER		/	DISKE	TTE		
Name of Office S	Sought by Candida	te:	•					DATE O	F ELE	CTIC	N	District Number	Office Code	Pari	ty Code	County Code		
								МО	DAY	YI	AR	REP						
								11		8	2022		(SEE IN	STRUCTIO	NS FOR (ODES)		
	Receipts and	МО	DAY	YEAR	₹			МО	DAY	ΥI	EAR	FO	R OFFI	E USE	ONLY			
Expenditures	from:		5 3	2	022	Т	0	6		6	2022							
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			31,2	291.67							
B. Total Moneta	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 320.0										320.00							
C. Total Funds Available (Sum Of Lines A and B) \$ 31,611.6									511.67									
D. Total Expend	ditures (From Sch	edule II	I)				\$			2,2	264.70							
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$			29,3	46.97							
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II	[)	\$				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•				
								CTION										
I swear (or affirm)	s a Committee report, incl		_						-		_		f my knov	vledge a	nd beli	ef , true		
correct and comple																		
Sworn to and subs	day of	•					_			S	Signature	of Perso	n Submitt	ing Rep	ort			
	Signatu	re					_					Prin	ted Name	1				
My Commission Ex							_					Emai	I					
	МО	D/	AY	YR					Are	ea Coo	le	Daytim	e Teleph	one Nui	nber			
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign he	ere.								
I swear (or affirm) No 320) as amende	that to the best of ned.	ny knowle	edge and beli	ef this	poli	tical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	ıne 3,19	37 (P.L	. 1333,		
Sworn to and subsc	ribed before me this day of		20						Signature of Candidate									
-							-					Printe	d Name					
My Commission Exp	Signature ires						-					Ema	il					
	МО	Di	AY	YR	<u> </u>		-		Area	Code		Da	ytime T	elephon	e Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	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 Committee or Candidate Repo				porting I	Period			
FRIENDS OF ANN FLOOD From				om:	5/3/20	<u>6/6/2022</u>		
		<u>'</u>			DATE			AMOUNT
Full Name of Contributing Committee FRIENDS OF MLOU MACKENZIE				МО	DAY	YEAR		
Mailing Address 2050 DENNIS LN							\$	70.00
City BETHLEHEM	State PA	Zip Code (Plus 4	1)	5	6	2022		
Full Name of Contributing Committee UGI ENERGY SVC LLC PAC				мо	DAY	YEAR		
Mailing Address 1 UGI DR.							\$	250.00

Zip Code (Plus 4)

17517

5

31

2022

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

State

PA

City

DENVER

PAGE TOTAL \$ 320.00

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					
Froi						o:			
					DATE		A	MOUNT	
Full Name of Contributor				МО	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 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	lame of Filing Committee or Candidate			Reporting Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Sched	lule I, Detailed Sum	mary 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.)

lame of Filing Committee or Candidate				Reporting Period						
				Fror	n:		To	То:		
					D	ATE		AN	MOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	State	Zip Cod	de (Plus	s 4)						
Employer Name	•				Occupa	tion				
Employer Mailing Address/Principal Pla Business	ice of	Ci	ty			State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P <i>i</i>	AGE 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 or Ca	ndidate		Repor	ting Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·				•	•	
Enter Grand Total of Part E on	Schedule T Detailed	l Summary Page	Section	4			P	AGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	z cammary r 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		
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 Candidat	Name of Filing Committee or Candidate Repo				Reporting Period					
			From:			То:				
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL			
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL			
						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
FRIENDS OF ANN FLOOD			From	<u>5/</u>	3/2022	То:	6/6/2022
				DATE			AMOUNT
To Whom Paid ANN FLOOD			мо	DAY	YEAR		
Mailing Address 2157 WES	ST DELL ROAD		5	3	2022	\$	49.35
City BATH		otion of Exp			Г-МАҮ		
To Whom Paid FRIENDS OF JOHN MERHOCE	EIN		МО	DAY	YEAR		
Mailing Address 1903 VINTAGE DRIVE				5	2022	\$	1,000.00
City EASTON	State PA	Zip Code (Plus 4) 18045	Descrip DONAT	otion of Exp	penditure	:	
To Whom Paid KEMMERER GRAPHICS	·		МО	DAY	YEAR		
Mailing Address PO BOX 1	31		6	2	2022	\$	1,156.00
City WIND GAP	State PA	Zip Code (Plus 4) 18091	Descrip SIGNS	otion of Exp	penditure		
To Whom Paid ANN FLOOD			мо	DAY	YEAR		
Mailing Address 2157 WEST DELL ROAD			6	2	2022	\$	49.35
City BATH	State PA	Zip Code (Plus 4) 18014		otion of Ex IGN PHON			T-JUNE
	<u> </u>						PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

2,254.70