# **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 :	ion	20220	0429			Repo Filed		:	CANDI	DATE	✓	CC	OMMITTE		LOB	BYIST		
Name of Filing (	Committee, (	Candida	ite or Lo	obbyist:			-		WIAK									
Street Address:																		
City:									State:				Zip Cod	<b>e:</b> 19	506			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA PRIMARY	Y PRE	- 2.		0 DA RIMA		POST-	3. <b>X</b>		AMENDM REPORT?	ENT	Yes	N	0	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION4.2ND FRIDAY ELECTION7.30 DAY ELECTIONPO ELECTION						POST-	6.			TERMINATION REPORT?		N	0	$\checkmark$			
report type)	ANNUAL RI	EPORT	7.	<b>Year</b> 2022					IG METHO				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	lame of Office Sought by Candidate: DATE OF ELECTION							District Number	Office Code	Par	ty Cod	e Cou Cod						
DEDDECENTAT		CENED							мо	DAY	YE	AR	5	STH	REP	)	1	-
REPRESENTAT	IVE IN THE	GENER	AL ASSI	EMBLY					11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of		and	мо	DAY	YEAR	2			мо	DAY	YE	AR	FO	R OFFIC	e use	ONLY	,	
Expenditures	s from:			5 3	2	022	то		6		6	2022						
A. Amount Brought Forward From Last Report						\$				0.00								
B. Total Monet	ary Contribu	utions A	nd Reco	eipts (Fron	1 Sche	dule I	)	\$		0.00								
C. Total Funds	Available (S	Sum Of	Lines A	and B)				\$				0.00						
D. Total Expen	ditures (Fro	om Sche	dule II	[)				\$				0.00	]					
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)			\$				0.00						
F. Value Of In-	Kind Contril	butions	Receive	ed (From S	chedu	le II)		\$				0.00	_					
G. Unpaid Deb	ts And Oblig	ations	(From S	chedule IV	')			\$ 0.00										
					AFF	IDA	/IT	SE	CTION									
PART I - If this i																		
I swear (or affirm correct and compl		ort, inclu	iaing the	attached sc	nedules	s filed c	on pa	per c	or by elect	ronic m	eaium,	are to	the best of	ту кпом	leage	and be	lief , ti	rue
Sworn to and subs	cribed before day of	me this		20							Si	gnatur	e of Person	Submitt	ing Rep	port		
	;	Signatur	e										Print	ed Name				_
My Commission E	xpires												Emai					
	мс	)	DA	AY	YR					Ar	ea Cod	e	Daytime	e Telepho	one Nu	mber		
Part II- If this is	a report of	a cand	idate's a	authorized	Comn	nittee,	Can	ndida	ate shall	sign he	ere.							
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 subso	cribed before i day of	me this		20								S	ignature o	f Candida	te			-
20 Printed Name								—										
My Commission Exp	-	nature											Emai	1				_
		мо	D/	AY	YR					Area	Code		Da	ytime Te	lephor	e Num	ber	-
			57														-	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BARRY J. JOZWIAK 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				porting	Period				
				From: To			Го:		
					DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						
							Γ	PAGE TOTAL	

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

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 Candidat	e		Rep Froi	orting P m:	eriod	То	):	
					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 S	Schedule I, Detail	ed Summary Pag	le, Se	ection 2	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 Cand	lidate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	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		АМС	DUNT
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 Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	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			Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	Г
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·						•		
Enter Grand Total of Part E on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
	are 1, Detailed Sum	iniai y Faye,	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		
BARRY J. JOZWIAK	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	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, 3		\$	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:			То:			
				DATE		АМС	DUNT
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 Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,	PAGE	TOTAL
					4	5	0.00

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	From: To:				
							DATE			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 Business City State				State		Zip 4)	Code(Plus	Descri	ption of	Contribution

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 Candidate			Reporti	ng Period			
	From		То:				
				DATE			AMOUNT
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrij	otion of Ex	penditure		
Enter Grand Total of Expenditures of	an Rago 1. Roport C	over Dage Them F	<b>`</b>				PAGE TOTAL
	Jil Page 1, Report C	over Page, Item I				\$	0.00