# **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	C0320			Repor Filed			CANDI	DATE	$\checkmark$	C	OMMITTEE		LOB	BYIST		
	Committee, Candida	ate or Lo	bbyist:			-		VILLIAM	IS								
Street Address:																	
City:								State:				Zip Cod	<b>e:</b> 19	143			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY IMAI		POST-	3. <b>X</b>		AMENDME REPORT?	ENT	Yes	</td <td>lo</td> <td>]</td>	lo	]
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					DAY ECTI		POST- 6.			TERMINATION REPORT?		Yes	Ν	lo	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022					G METHO HECK O				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	Sought by Candidat	:e:						DATE O	FELE	CTIO	N	District Number	Office Code	Par	ty Cod	e Cou Cod	
CENATOD IN T		MDLV					1	мо	DAY	YE	AR	8	STS	DEN	1		
SENATOR IN T	HE GENERAL ASSE	MBLY						11		8	2022		(SEE INS	TRUCTI	ONS FOI	R CODES	5)
	Receipts and	мо	DAY	YEAR	Ł		[	мо	DAY	YE	AR	FOF	ROFFIC	e use	ONLY	1	
Expenditures	s from:		5 3	2	022 <b>1</b>	го		6		6	2022						
A. Amount Bro	ught Forward From	1 Last Re	eport				\$				0.00						
B. Total Monet	ary Contributions A	And Rece	eipts (From	1 Sche	dule I)		\$				0.00	]					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				0.00						
D. Total Expen	ditures (From Sche	edule III	)				\$				0.00						
E. Ending Cash	Balance (Subtract	Line D I	From Line	C)			\$				0.00	_					
F. Value Of In-	Kind Contributions	Receive	d (From S	chedu	le II)		\$				0.00	_					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')			\$				0.00						
				AFF	IDAV	IT S	SEC	CTION									
	s a Committee repo												_				
I swear (or affirm correct and compl	) that this report, incluete.	uding the	attached sc	hedule	s filed on	ı рар	er o	r by elect	ronic m	edium,	are to	the best of	my know	ledge	and be	lief , ti	rue
Sworn to and subs	scribed before me this day of		20							Si	gnatur	e of Person	Submitti	ng Rep	oort		-
						_						Printe	ed Name				-
My Commission E	Signatur xpires	e										Email					_
,	мо	DA	Y	YR					Ar	ea Code	•		Telepho	one Nu	mber		-
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, (	Cand	dida	te shall	sign h	ere.							
I swear (or affirm) No 320) as amende	) that to the best of m ed.	ıy knowle	dge and beli	ef this	political	l con	nmit	tee has n	ot viola	ted any	provis	ions of the	act of Ju	ne 3,1	937 (P	.L. 133	83,
Sworn to and subso	cribed before me this										s	ignature of	Candida	te			-
	day of 		20									Printed	Name				—
	. Signature					_						Email					_
My Commission Exp	oires					_						Email					
	мо	DA	Y	YR	1	-			Area	Code		Day	ytime Te	lephor	e Num	ber	-

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** ANTHONY H. WILLIAMS 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						
				From: To:						
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								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 Candidate Reporting Period									
			From: To			<b>D:</b>			
					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			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.00		
Mailing Address							- \$	0.00		
City	State	Zip Cod	e (Plus 4)							
					PAGE TOTAL					
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	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 R				eporting Period						
			Froi	n:		Т	):			
				D	ATE		АМ	IOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio							P#	<b>AGE TOTAL</b> 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:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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		
ANTHONY H. WILLIAMS	From:	<u>5/3/2022</u> <b>то:</b>	<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			Reporting Period						
			From:			То:			
				DATE			AMOUNT		
Full Name of Contributor				MO DAY					
Mailing Address		_				<b>\$</b>	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:			-						
Enter Grand Total of Part F on Section 2.	Schedule II, In-Kii	nd Contributions Detai	led Sum	mary Pag	je,	F	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:						
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				<b>\$</b> 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						<b>PAGE TOTAL</b> 0.00				

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From							
		DATE		AMOUNT							
To Whom Paid	мо	DAY	YEAR								
Mailing Address						\$	0.00				
City	Zip Code (Plus 4)	Description of Expenditure									
Enter Crand Tatal of Evnanditures					PAGE TOTAL						
Enter Grand Total of Expenditures	on Page 1, Report C	Jover Page, Item L				\$	0.00				