### **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 20100	090			Repo		CA	ANDI	DATE		COM	4ITTEE	<b>✓</b>	LOB	BYIST	
Name of Filing C	ommittee, Candida	ate or L	obbyist:	1	MULLE	RY, G	ERAL	D CI	TIZENS	FOI	R					
Street Address:	6 MARIE DRIV	'E														
City:	NANTICOKE						Stat	e:	PA			Zip Co	d <b>e:</b> 18	3634-0	0000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 D PRIM		F	POST-	3.		AMENDM REPORT		Yes	No	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. <b>X</b>		AY CTION	F	POST-	6.		TERMIN/ REPORT		Yes	<b>√</b> No	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG M					PAPER		<b>V</b>	DISKE	TTE
Name of Office S	ought by Candidat	e:	•		·		DA	ΓΕ Ο	F ELE	СТІС	ON	District Number	Office Code	Pai	rty Code	County Code
							МО	11	DAY	8 <b>Y</b> I	<b>EAR</b> 2022	119	1	DEI		41
			I	1				11							ONS FOR	CODES)
Summary of Expenditures		МО	DAY	YEAR			МО		DAY		EAR	FC	R OFFI	CE USE	ONLY	
			9 20	20	)22	ГО		10	2	24	2022					
	ught Forward From		-			\$	5			12,	103.43					
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sched	dule I)	- 5	<u> </u>				0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				<b>5</b>			12,	103.43					
D. Total Expend	ditures (From Sche	dule II	I)			9	<b>5</b>			12,	103.43					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			5				0.00					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)	9	<b>5</b>				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		9	<b>5</b>				0.00			'		
				AFF:	IDAV	IT SI	CTI	ON								
	a Committee repo	•	_						• '							
correct and comple	that this report, incluete.	uding the	attached sc	hedules	filed oi	ı papeı	or by	electi	ronic me	edium	i, are to t	the best o	f my kno	wledge	and beli	ef , true
Sworn to and subs	cribed before me this day of		20							5	Signature	of Perso	n Submit	ting Re	port	
	Signatur	e				_						Prin	ted Name	9		
My Commission Ex	pires					_						Ema	il			
	МО	D	AY	YR					Are	ea Coo	de	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a cand	idate's	authorized	Comm	ittee,	Candi	date s	hall	sign he	ere.						
No 320) as amende		y knowle	edge and beli	ief this	politica	l comr	nittee	has n	ot violat	ed ar	ny provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature (	of Candid	ate		
						_						Printe	ed Name			
My Commission Exp	Signature ires					_						Ema	il			
	мо	D	AY	YR		_			Area	Code		D	aytime T	elephoi	ne Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
MULLERY, GERALD CITIZENS FOR	From:	<u>9/20/202</u>	<u>2</u> To:	10/24/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	J 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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Name of Filing Commi	ttee or Candidate		Reporti	ng Period			
			From:		То	:	
		L		DATE			AMOUNT
Full Name of Contributin	g Committee		МС	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

## 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 Candid	ate		Rep Fro	oorting P	eriod	To	o:	
					DATE		AN	4OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)	1					

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			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 Scho	edule I, Detailed Sun	nmary 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			
			Fron	n:		To	<b>)</b> :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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 or	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Perio	d	
MULLERY, GERALD CITIZENS FOR	From:	<u>9/20/2022</u> <b>To:</b>	10/24/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	-1		•			Occupa	ation			
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				<b>PAGE TOTAL</b> 0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
MULLERY, GERALD CITIZENS FOR			From	9/20	0/2022	То:	10/24/2022
				DATE			AMOUNT
<b>To Whom Paid</b> Shapiro for PA			МО	DAY	YEAR		
Mailing Address PO Box 22635			9	20	2022	\$	10,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19110	<b>Descrip</b> Donation	otion of Exp	penditure		
<b>To Whom Paid</b> Friends of Vito Malacari			МО	DAY	YEAR		
Mailing Address 23 Halliday Court			9	20	2022	\$	1,000.00
City Hanover Twp.	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18706	<b>Descrip</b> Donation	otion of Exp	penditure		
<b>To Whom Paid</b> Nanticoke 12th Man Booster Club			МО	DAY	YEAR		
Mailing Address 336 E. Broad Street	-		9	20	2022	\$	100.00
<b>City</b> Nanticoke	State PA	<b>Zip Code (Plus 4)</b> 18634	<b>Descrip</b> Donation	otion of Exp	penditure		
<b>To Whom Paid</b> Bernie's Memorial			МО	DAY	YEAR		
Mailing Address 40 Northampton Str	reet		9	20	2022	\$	82.09
<b>City</b> Wilkes-Barre	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18701	<b>Descrip</b> Donation	otion of Exp	penditure		
<b>To Whom Paid</b> Choice One FCU			мо	DAY	YEAR		

Zip Code (Plus 4)

18702

**Mailing Address** 

Wilkes-Barre

City

101 Hazle Street

State

PΑ

4.00

2022

20

**Description of Expenditure** 

Bank Fee

<b>To Whom Paid</b> White Haven Lions Club			мо	DAY	YEAR			
Mailing Address 500 Berwick	Street		9	20	2022	\$		205.00
<b>City</b> White Haven	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18661	<b>Descrip</b> Donation	otion of Exp	penditure			
<b>To Whom Paid</b> Newport Twp. Lions Club			мо	DAY	YEAR			
Mailing Address 34 Prince St	reet		9	20	2022	\$		200.00
<b>City</b> Nanticoke	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18634	<b>Descrip</b> Donatio	otion of Exp	penditure			
<b>To Whom Paid</b> Bean Funeral Home			мо	DAY	YEAR			
Mailing Address 1605 Rockla	nd Street		9	20	2022	\$		36.90
<b>City</b> Reading	State PA	<b>Zip Code (Plus 4)</b> 19604	Description of Expenditure  Memorial Gift					
<b>To Whom Paid</b> Vito's Coal Fired			МО	DAY	YEAR			
	ch Blvd.		<b>мо</b>	<b>DAY</b> 20	<b>YEAR</b> 2022	\$		72.32
Vito's Coal Fired	sch Blvd. State PA	<b>Zip Code (Plus 4)</b> 17970	9 Descrip		2022 penditure			72.32
Vito's Coal Fired  Mailing Address 400 Terry Ri	State		9 Descrip	20 otion of Exp	2022 penditure			72.32
Vito's Coal Fired  Mailing Address 400 Terry Ri  City St. Clair  To Whom Paid	State PA		9  Descrip Campai	20 etion of Exp	2022 penditure			72.32 50.01
Vito's Coal Fired  Mailing Address 400 Terry Ri  City St. Clair  To Whom Paid Franco's Pizza	State PA		9  Descrip Campai  MO  9  Descrip	20  Ition of Expign Meeting  DAY	2022  penditure  9  YEAR  2022  penditure	\$		
Vito's Coal Fired  Mailing Address 400 Terry Ri  City St. Clair  To Whom Paid Franco's Pizza  Mailing Address 198 S. Main	State PA  Street  State	17970  Zip Code (Plus 4)	9  Descrip Campai  MO  9  Descrip	20  Intion of Expriging Meeting  DAY  20  Intion of Exprision of Expression of Express	2022  penditure  9  YEAR  2022  penditure	\$		
Mailing Address 400 Terry Ri  City St. Clair  To Whom Paid Franco's Pizza  Mailing Address 198 S. Main  City Wilkes-Barre	State PA  Street  State PA	17970  Zip Code (Plus 4)	9  Descrip Campai  MO  9  Descrip Campai	20  Intion of Exprise DAY  20  Intion of Exprise Meeting	2022  penditure  9  YEAR  2022  penditure  9	\$		

							- 13
To Whom Paid GNA Boys Soccer			мо	DAY	YEAR		
Mailing Address 1 Education Plaza			9	20	2022	\$	102.00
<b>City</b> Nanticoke	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18634	<b>Description of Expenditure</b> Donation				
<b>To Whom Paid</b> Plymouth Alive			МО	DAY	YEAR		
Mailing Address Main Str	eet		9	20	2022	\$	103.21
<b>City</b> Plymouth	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18651	Description of Expenditure Kielbasi Festival				
<b>To Whom Paid</b> GNA Soccer Booster Club			МО	DAY	YEAR		
Mailing Address 425 Kosciuszko Street			9	27	2022	\$	50.00
City Nanticoke	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18634	Description of Expenditure Fundraiser				
To Whom Paid GNA Senior Class			мо	DAY	YEAR		
Mailing Address 1 Education Plaza			9	27	2022	\$	20.00
<b>City</b> Nanticoke	State PA	<b>Zip Code (Plus 4)</b> 18634	<b>Descrip</b> Donation	otion of Exp			
Enter Crand Total of Eva	anditures on Dago 1. Do	mort Cover Page Item D					PAGE TOTAL
Enter Grand Total of Exp	enditures on Page 1, Re	port Cover Page, Item D	•			\$	12,103.43