# **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 2022	C1335			Repo Filed		CAN	NDIDATE	$\checkmark$	СО	MMITTEE		LOBE	BYIST	
Name of Filing C	Committee, Candida	ate or L	obbyist:	<b>!</b> ·	TEMO	۰ NS, M	ARK JO	SEPH II							
Street Address:															
City:							State	:			Zip Cod	<b>e:</b> 17	547		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDAY PRIMARY	2ND FRIDAY PRE- PRIMARY 2. 30 DAY PRIMARY				POST-	POST- 3.			AMENDMENT REPORT?		No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	( PRE	RE- 5. 30 DAY PO ELECTION				POST- 6.		TERMINATION REPORT?		Yes	No	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG ME				PAPER		$\checkmark$	DISKE	TTE
Name of Office S	Sought by Candidat	ie:					DAT	E OF ELE	CTION		District Number	Office Code	Par	ty Code	County Code
REPRESENTATI	IVE IN THE GENER		SEMBLY				мо	DAY	YEAF	٤	98	STH	DEM	1	36
REIRESERIATI								11	8 2	022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAF	ł	FOF	OFFIC	E USE	ONLY	
Expenditures	s from:		6 7	20	022	то		9	19 2	.022	$\triangleright$				
A. Amount Bro	ught Forward Fron	n Last F	Report			ģ	5		9	0.00					
B. Total Monet	ary Contributions A	And Red	ceipts (From	Sche	dule I)					0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			-	5	$\mathbf{N}$	C	0.00					
D. Total Expen	ditures (From Sche	edule II	11)	6			5	//	C	0.00					
E. Ending Cash	Balance (Subtract	Line D	From Line C	;)		-	5./	2	0	.00					
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedu	le II)		5		0	.00					
G. Unpaid Debt	ts And Obligations	(From	Schedule IV			1	\$		C	0.00					
				AFF	IDAV	IT SI	ECTIC	DN							
	s a Committee repo		1/					• •		-					
I swear (or affirm correct and comple	) that this report, incl ete.	uding th	e attached sch	edules	s filed o	n papei	or by e	lectronic m	edium, ar	e to t	he best of	my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	)	20						Sign	ature	of Person	Submitt	ing Rep	ort	
	Signatu	re				_					Printe	ed Name			
My Commission E	xpires					_					Email				
	мо	D	ΑΥ	YR				Ar	ea Code		Daytime	e Teleph	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee,	Candi	date sh	all sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of med.	ıy knowl	edge and belie	ef this	politica	l comr	nittee ha	as not viola	ited any p	rovisi	ons of the	act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso	ribed before me this day of		20							Si	gnature of	Candida	ite		
											Printed	Name			
My Commission Exp	Signature bires					_					Email				
	мо	D	AY	YR				Area	Code		Day	ytime Te	elephon	e Numb	er

# SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	
TEMONS, MARK JOSEPH II	From: <u>6/7/202</u>	22 <b>To:</b> <u>9/19/2022</u>
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	g Period (2)	\$ 0.00
		7
3. Contributions Received Over \$250.00 (From Part C and Part D)		-
Contributions Received From Political Committees (Part C)		<b>\$</b> 0.00
All Other Contributions (Part D)		<b>\$</b> 0.00
TOTAL for the Reporting	Period (3)	\$ 0.00
	<i>0</i>	
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa	nd enter amount Ige, Item B.)	\$ 0.00

9/15/2025 7:44:26 AM

#### PAGE 3

## 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	Name of Filing Committee or Candidate			Reporting Period						
			Fro	om:		То:				
					DATE		АМО	UNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							<b>a</b>	0.00		
City	State	Zip Code (Plus 4	4)							
Enton Crond Total of Dart A on Sakar	tule T. Detailed Sur	amany Daga S	aatia	_			PAGE 1			
Enter Grand Total of Part A on Scheo	iule 1, Detalled Sun	nmary Page, S	ectio			V	\$	0.00		
					$\mathcal{V}$					

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 Candida	te		Rep	oorting P	eriod					
			Fro	m:		То	<b>D:</b>			
					DATE		AMOUN	r		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address		I					\$	0.00		
City	State	Zip Code (Plus 4	)				$\sum$			
							PAGE T	OTAL		
		P								

# 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	Name of Filing Committee or Candidate			Reporting Period							
			From:			То:					
				DA	TE						
Full Name of Contributing Committee				мо	DAY	YEAR					
Mailing Address								0.00			
City	State	Zip Cod	e (Plus 4)								
Enter Grand Total of Part C on Sched	ule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			PAGE T	<b>OTAL</b> 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					
			Fror	n:		То:		
				D/	ATE		AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	4	0.00
Mailing Address								
City	State	Zip Code (Plu	ıs 4)					
Employer Name				Occupat	tion		<i>n</i>	
Employer Mailing Address/Principal Plac	e of Business	City			State	$\geq$	Zip Code (Plus	4)
Enter Grand Total of Part C on Sched	dule I, Detailed Su	ummary Page	e, Sectio	on 3.		\$	PAGE TO	<b>FAL</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			Report	ing Perio	od			
			From:			То:		
				D	ATE		AMOUN	г
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (	Plus 4)					
Receipt Description				Â			V	
Enter Grand Total of Part E on Schedu	le T. Detailed Summ	Dary Page	Section			$\mathbf{\nabla}$	PAGE TO	TAL
Enter Grand Total of Part E on Schedu	ie i, Detailed Suim	iai y Paye,	Section			4	5	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 Pe	eriod	
TEMONS, MARK JOSEPH II	From:	<u>6/7/2022</u> <b>То:</b>	<u>9/19/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUT	OR	
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, 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: 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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	ailed Sum	mary Pag	ge, \$	PAGE TOT	<b>AL</b> 0.00	

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

Name of Filing Committee or Candidate				Re	porting <b>F</b>	Period			
F					From:			То:	
						DATE		AMOUN	т
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State Zip Code(Plus 4)								
Employer of Contributor		-			Occupa	ation		$\searrow$	
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	Stat	e Zip	Code(Plus 4)	Descri	ption of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (	Contributions D	etaile	ed			PAGE T	OTAL
Summary Page, Section 3.	<b>,</b>	-				$\checkmark$			0.00
					$\mathcal{D}$				

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reportii	ng Period			
			From			То:	
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address						<b>s</b>	0.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	R	
Fater Crowd Tatal of Free additions	- Daga 1. Dagast C	awar Daga Itam D				$\sum$	PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item D				\$	0.00