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 20	220338			Repo Filed		<i>'</i> :	CAN	DIE	DATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	lidate or L	obbyist:	-	TIM 4	1 PA				•				·				
Street Address:																		
City:	LEBANON							State:		PA			Zip Cod	l e: 17	046			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE-	2.		BO DA		P	OST-	3.		AMENDM REPORT?	AMENDMENT REPORT?			lo	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY ELECTION	Y PRE	- 5.		BO DA		P	OST-	6.		TERMINATION Yes REPORT?			Ν	lo	\
report type)	ANNUAL REPO	RT 7.	Year 2022					IG MET CHECK		_			PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Candi	date:						DATE	OI	F ELEC	CTIO	N	District Number	Office Code	Par	ty Cod	e Cour	
								МО		DAY	YE	AR			LIB			
									11		8	2022		(SEE INS	TRUCTI	ONS FOI	R CODES	5)
Summary of		МО	DAY	YEAR				МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY	7	
Expenditures	from:		6 7	20	022	TC)		9	1	.9	2022						
A. Amount Bro	ught Forward F	rom Last F	Report				\$	-				0.00						
B. Total Moneta	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 1,137.00																	
C. Total Funds	Available (Sum	Of Lines F	A and B)				\$				1,1	.37.00						
D. Total Expend	ditures (From S	chedule II	II)				\$				7	57.68						
E. Ending Cash Balance (Subtract Line D From Line C)							\$				3	79.32						
F. Value Of In-	Kind Contribution	ons Receiv	ed (From So	chedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligatio	ns (From	Schedule IV)			\$					0.00						
				AFF:	IDA۱	VIT	SE	CTIO	N									
PART I - If this is			_									_						
I swear (or affirm) correct and comple		ncluding th	e attached sch	nedules	filed (on pa	aper	or by eld	ectr	onic me	edium	, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me	this	20						-		s	ignature	of Persoi	n Submitt	ing Re	ort		_
	Sign:	ature				_			Printed Name									
My Commission Ex	pires								-				Emai	I				
	МО	D	AY	YR						Are	a Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	andidate's	authorized	Comm	ittee	, Ca	ndid	ate sha	all s	ign he	re.							
I swear (or affirm) No 320) as amende		of my knowl	edge and beli	ef this	politic	cal c	omm	ittee ha	s no	t violat	ed an	y provisi	ions of the	act of Ju	ine 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before me tl day of	ıis	20									Si	ignature o	f Candida	ite			_
									,				Printe	d Name				-
	Signatu	re							-									_
My Commission Exp	ires									Email								
	мо	D	PAY	YR					,	Area	Code		Da	ytime Te	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
TIM 4 PA	From:	6/7/202	<u>2</u> To:	9/19/2022				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting) Period	(1)	\$	537.00				
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)			\$	600.00				
TOTAL for the Reporting) Period	(2)	\$	600.00				
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			\$	1,137.00				

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	Name of Filing Committee or Candidate					Reporting Period						
	rom:):									
		DATE			AMOUNT							
Full Name of Contributing Co	ommittee		мо	DAY	YEAR							
Mailing Address						\$	0.00					
City	State	Zip Code (Plus 4)										

PAGE TOTAL
0.00

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

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)

Nam	Name of Filing Committee or Candidate					Reporting Period						
TIM	4 PA			Fro	m:	<u>6/7/</u>	2022 T o) :	9/19/2022			
						DATE			AMOUNT			
Full Na	ame of Contributor				мо	DAY	YEAR					
JOSEP	PH VAN WAGNER				140	DAI	ILAK					
Mailin	g Address							\$	25.00			
City	PENNSBURG	State	Zip Code (Plus 4	.)	4	26	2022					
		PA	18073									
Full Na	ame of Contributor				мо	DAY	YEAR					
JOSEP	PH VAN WAGNER											
Mailin	g Address							\$	25.00			
City	PENNSBURG	State	Zip Code (Plus 4)	5	26	2022					
		PA	18073									
Full Na	ame of Contributor				мо	DAY	YEAR					
JOSEP	PH VAN WAGNER							1				
Mailin	g Address		T					\$	25.00			
City	PENNSBURG	State	Zip Code (Plus 4)	6	26	2022					
		PA	18073									
Full Na	ame of Contributor				мо	DAY	YEAR					
JOSEP	PH VAN WAGNER				140	DAI	ILAK					
Mailin	g Address							\$	25.00			
City	PENNSBURG	State	Zip Code (Plus 4	.)	7	26	2022					
		PA	18073									
Full Na	ame of Contributor				мо	DAY	YEAR					
JOSEP	PH VAN WAGNER				MO	DAT	TEAR					
Mailin	g Address							\$	25.00			
City	PENNSBURG	State	Zip Code (Plus 4)	8	26	2022					
		PA	18073									
Full Na	ame of Contributor					DAY	VEAD					
ANDR	EW HREHA				МО	DAY	YEAR					
Mailin	g Address							\$	50.00			
City	NORTH APOLLO	State	Zip Code (Plus 4)	8	28	2022					
		PA	15673									
Full Na	ame of Contributor				мо	DAY	YEAR					
ANDR	EW HREHA						LAK					
Mailin	g Address							\$	50.00			
City	NORTH APOLLO	State	Zip Code (Plus 4)	9	13	2022					
		PA	15673									

Full Name of Contributor						
JUSTIN WRAY			МО	DAY	YEAR	
Mailing Address						\$ 100.00
City RED LION	State	Zip Code (Plus 4)	5	12	2022	100.00
City RED LION	PA	17356				
	FA	17330				
Full Name of Contributor			мо	DAY	YEAR	
RICHARD PANNELL						
Mailing Address	•	T				\$ 100.00
City YORK	State	Zip Code (Plus 4)	6	29	2022	
	PA	17404				
Full Name of Contributor				DAY	VEAD	
ROY MINET			МО	DAY	YEAR	
Mailing Address						\$ 100.00
City MOUNT JOY	State	Zip Code (Plus 4)	9	12	2022	
	PA	17552				
Full Name of Contributor			мо	DAY	YEAR	
MITCHELL MANKIEWICZ			MO	DAT	ILAK	
Mailing Address						\$ 50.00
City SHENANDOAH	State	Zip Code (Plus 4)	9	13	2022	
	PA	17976				
Full Name of Contributor			мо	DAY	YEAR	
MITCHELL MANKIEWICZ			1.10		ILAN	
Mailing Address						\$ 25.00
City SHENANDOAH	State	Zip Code (Plus 4)	9	17	2022	
	PA	17976				

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

PAGE TOTAL\$ 600.00

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	nme of Filing Committee or Candidate		Reporting Period						
	From:			То:					
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		ſ	0.00
Mailing Address							+	C).00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	L
Enter Grand Total of Part C on Scheo	dule 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	ne of Filing Committee or Candidate			Reporting Period					
				Fron	n:		To	o:	
					D	ATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zip Code (F	lus 4	1)					
Employer Name	•	I			Occupa	tion	•	•	
Employer Mailing Address/Principal Pla	ace of Business	City		,		State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed S	ummary Pag	ge, S	ectio	on 3.				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	ing Peri	od			
	From: To:							
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	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	d							
TIM 4 PA	From:	<u>6/7/2022</u> To:	9/19/2022						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate	nme of Filing Committee or Candidate				Reporting Period				
			From:			То:			
				DATE			AMOUNT		
Full Name of Contributor	МО	DAY	YEAR						
Mailing Address						7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:	-	-	•	•	•				
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L	
Section 2.						\$		0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	me of Filing Committee or Candidate			Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Reporting Period					
TIM 4 PA	From	6/7/2022	То:	9/19/2022	
		DATE		AMOUNT	

			DATE				AMOUNT	
To Whom Paid			МО	DAY	YEAR			
TIMOTHY MCMASTER			1-10		7 = 7 0			
Mailing Address			6	29	2022	\$	140.50	
City YORK	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17404	STAPLES, HANDOUTS					
To Whom Paid			мо	DAY	YEAR			
TIMOTHY MCMASTER			1-10					
Mailing Address			7	26	2022	\$	200.00	
City YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17404	FILING FEES					
To Whom Paid BFORDESIGNS			МО	DAY	YEAR			
Mailing Address			8	26	2022	 \$	142.50	
raining Address			ļ					
City JAMISON	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	18929	SHIRTS					
To Whom Paid			мо	DAY	YEAR			
TIMOTHY MCMASTER								
Mailing Address			9	19	2022	\$	233.18	
City YORK	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17404	STAPLES, HANDOUTS					
To Whom Paid PAYPAL			МО	DAY	YEAR			
Mailing Address			9	19	2022	\$	41.50	
City	State	Zip Code (Plus 4)	Description of Expenditure					
			FEES					
	•	•	•				PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	757.68	