

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number : 20220338		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: TIM 4 PA											
Street Address: 601 E MAPLE ST											
City: LEBANON					State: PA		Zip Code: 17046				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2022	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	LIB			
					11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		6	7	2022		9	19	2022			
A. Amount Brought Forward From Last Report					\$ 0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 1,137.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 1,137.00						
D. Total Expenditures (From Schedule III)					\$ 757.68						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 379.32						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

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 subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
TIM 4 PA	From: <u>6/7/2022</u> To: <u>9/19/2022</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 537.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 600.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 600.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 1,137.00
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**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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
TIM 4 PA	From: <u>6/7/2022</u> To: <u>9/19/2022</u>

<b>DATE</b>	<b>AMOUNT</b>
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Full Name of Contributor MITCHELL MANKIEWICZ			MO	DAY	YEAR	\$ 50.00
Mailing Address 141 SCHUYLKILL AVE			9	13	2022	
City SHENANDOAH	State PA	Zip Code (Plus 4) 17976				

Full Name of Contributor MITCHELL MANKIEWICZ			MO	DAY	YEAR	\$ 25.00
Mailing Address 141 SCHUYLKILL AVE			9	17	2022	
City SHENANDOAH	State PA	Zip Code (Plus 4) 17976				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
ROY MINET							
Mailing Address 623 SKYLER DR				9	12	2022	
City	MOUNT JOY	State	Zip Code (Plus 4)				
		PA	17552				

Full Name of Contributor				MO	DAY	YEAR	\$	100.00
RICHARD PANNELL								
Mailing Address				6	29	2022		
2853 ROBIN RD		City	YORK				State	PA

Full Name of Contributor			MO	DAY	YEAR	\$	100.00
JUSTIN WRAY							
Mailing Address			5	12	2022		
185 N JONATHAN WAY							
City	RED LION	State	PA	Zip Code (Plus 4)	17356		

Full Name of Contributor ANDREW HREHA			MO	DAY	YEAR	\$ 50.00
Mailing Address 1814 ACHESON AVE			8	28	2022	
City NORTH APOLLO	State PA	Zip Code (Plus 4) 15673				

Full Name of Contributor ANDREW HREHA			MO	DAY	YEAR	\$ 50.00
Mailing Address 1814 ACHESON AVE			9	13	2022	
City NORTH APOLLO	State PA	Zip Code (Plus 4) 15673				

Full Name of Contributor JOSEPH VAN WAGNER			MO	DAY	YEAR	\$ 25.00
Mailing Address 1080 E 11TH ST			7	26	2022	
City PENNSBURG	State PA	Zip Code (Plus 4) 18073				

Full Name of Contributor JOSEPH VAN WAGNER			MO	DAY	YEAR	\$ 25.00
Mailing Address 1080 E 11TH ST			8	26	2022	
City PENNSBURG	State PA	Zip Code (Plus 4) 18073				

Full Name of Contributor JOSEPH VAN WAGNER			MO	DAY	YEAR	\$ 25.00
Mailing Address 1080 E 11TH ST			4	26	2022	
City PENNSBURG	State PA	Zip Code (Plus 4) 18073				

Full Name of Contributor JOSEPH VAN WAGNER			MO	DAY	YEAR	\$ 25.00
Mailing Address 1080 E 11TH ST			5	26	2022	
City PENNSBURG	State PA	Zip Code (Plus 4) 18073				

Full Name of Contributor			MO	DAY	YEAR	\$ 25.00
JOSEPH VAN WAGNER						
Mailing Address			6	26	2022	
1080 E 11TH ST						
City	State	Zip Code (Plus 4)				
PENNSBURG	PA	18073				

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	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</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
	From: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE 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: To:

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
TIM 4 PA		From: <u>6/7/2022</u> To: <u>9/19/2022</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						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:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
TIM 4 PA	From <u>6/7/2022</u> To: <u>9/19/2022</u>

DATE				AMOUNT		
To Whom Paid TIMOTHY MCMASTER			MO	DAY	YEAR	\$ 140.50
Mailing Address 225 E BUTTER RD			6	29	2022	
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure STAPLES, HANDOUTS			
To Whom Paid TIMOTHY MCMASTER			MO	DAY	YEAR	\$ 200.00
Mailing Address 225 E BUTTER RD			7	26	2022	
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure FILING FEES			
To Whom Paid BFORDESIGNS			MO	DAY	YEAR	\$ 142.50
Mailing Address 2265 SAND TRAP RD			8	26	2022	
City JAMISON	State PA	Zip Code (Plus 4) 18929	Description of Expenditure SHIRTS			
To Whom Paid TIMOTHY MCMASTER			MO	DAY	YEAR	\$ 233.18
Mailing Address 225 E BUTTER RD			9	19	2022	
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure STAPLES, HANDOUTS			
To Whom Paid PAYPAL			MO	DAY	YEAR	\$ 41.50
Mailing Address			9	19	2022	
City	State	Zip Code (Plus 4)	Description of Expenditure FEES			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 757.68

