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)22C0	874			Repo Filed		:	CAN	DII	DATE	\	CC	MMITTEE		LOB	BYIST		
Name of Filing C	ommittee, Can	didate	or Lo	bbyist:	Ī	KRAJE	WS	KI, I	RICK	CHE	STER								
Street Address:																			
City:	_								State					Zip Code	e: 19	139			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND FRIDA PRIMARY	Y PRE-	2.		0 DA RIMA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	√ N	0	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND FRIDA ELECTION	Y PRE	- 5.)		0 DA LECT		Р	OST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	١	0	\
report type)	ANNUAL REPO	RT 7.		Year 2022					CHECK					PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Cand	idate:							DATE	OI	F ELE	CTI	ON	District Number	Office Code	Par	ty Cod	e Cou	
									МО		DAY	١	YEAR	188	STH	DEI	1	51	
REPRESENTATI	VE IN THE GEI	√ERAL	. ASSE	EMBLY						11 8 2022 (SEE INSTRUCTIONS FOR						CODES	6)		
Summary of		M	чо	DAY	YEAR				МО		DAY	•	YEAR	FOF	OFFIC	CE USE	ONL	7	
Expenditures	from:			6 7	20)22	то)		10	2	24	2022						
A. Amount Bro	ught Forward F	rom L	ast Re	eport				\$					0.00						
B. Total Moneta	ary Contributio	ns And	d Rece	eipts (From	Sche	dule I))	\$					50.00						
C. Total Funds	Available (Sum	Of Lir	nes A	and B)				\$					50.00						
D. Total Expend	ditures (From S	ichedu	ıle III	:)				\$					0.00						
E. Ending Cash	Balance (Subt	ract Li	ne D I	From Line	C)			\$					50.00						
F. Value Of In-	Kind Contributi	ons Re	eceive	ed (From S	chedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ons (Fr	rom S	chedule IV)			\$					0.00						
					AFF	IDAV	ΊΤ	SE	CTIO	N									
PART I - If this is	a Committee	report,	, treas	surer sign	here. I	f this	is a	Can	didate	re	port, c	cano	didate si	gn here.					
I swear (or affirm) correct and comple		includi	ng the	attached sci	nedules	filed o	n pa	per c	or by el	ectr	onic m	ediu	m, are to	the best of	my knov	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before me day of	this		20						•			Signature	e of Person	Submitt	ing Re	ort		_
	Sign	ature					_							Printe	ed Name	<u> </u>			-
My Commission Ex	-									-				Email					-
	мо		DA	·Υ	YR						Are	ea C	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a c	andida	ate's a	authorized	Comm	ittee,	Can	dida	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my k	(nowle	dge and beli	ef this	politica	al co	mmi	ttee ha	s no	ot viola	ted a	any provis	ions of the	act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc		his											s	ignature of	Candida	ate			- $ $
	day of ————————————————————————————————————													Printed	Name				_
	Signatu	ıre					_			-									_
My Commission Exp	ires													Email					
	МО		DA	·Υ	YR						Area	Code	e	Day	time T	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KRAJEWSKI, RICK CHESTER	From:	<u>6/7/202</u>	<u>2</u> To:	10/24/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	50.00
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	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) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
			I	
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			\$	50.00

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 or Candidate				Reporting Period					
		F	From:		То	!			
		•		DATE			AMOUNT		
Full Name of Contributing Committee			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.

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.

Name of Filing Comn	nittee or Candidate	Re	eporting F	eriod			
		Fr	rom:		To) :	
		,		DATE			AMOUNT
Full Name of Contribut	or		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
							PAGE TOTAL

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		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOT	AL
Enter Grand Total of Part C on School	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				orting Pe	riod				
	Fr					To) :		
	DATE						AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address							1		
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion				
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip C	ode (Plus 4)	
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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 of	or Candidate		Report	ing Peri	od			
			From: To:					
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							\neg	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Caatle					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary 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		
KRAJEWSKI, RICK CHESTER	From:	<u>6/7/2022</u> To:	10/24/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Ca	Reporting Period						
	From:						
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						- \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•				
					Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	ımary Pa	ge,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period				
				Fro	m:					
						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 _l	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						
	From			То:			
				DATE			AMOUNT
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Further County Takes of Francischer and Page 1. Deposit Course Page 1.							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00