# **Campaign Finance Report**

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

Filer Identificat Number :	<b>ion</b> 2022	2C0429			Repo Filed		CAND	DIDATE	<b>√</b>	C	OMMITTE	E	LOB	BYIST		
	Committee, Candid	ate or L	obbyist:			-	ZWIAK									
Street Address:	Street Address:															
City:							State: Zij					Zip Code: 19506				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	POST- 3.			AMENDMENT REPORT?		No	, 🔪	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	CTION PRE- 5. <b>X</b>			DAY CTION	POST-	POST- 6.			TERMINATION REPORT?		No	· 🔨	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG METH				PAPER	PAPER		DISKE	TTE	
Name of Office	L Sought by Candida	te:					DATE	OF ELE	CTIO	DN	District Number	Office Code	Par	ty Code	Count	/
DEDDECENTAT	IVE IN THE GENER		EMDLV				мо	DAY	Y	EAR	5	STH	REP	•	•	
REPRESENTAT	IVE IN THE GENER	KAL ASS	EMDLY				1	1	8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		9 20	2	022	ГО	1	0	24	2022						
A. Amount Bro	ought Forward From	m Last R	eport			4	5			0.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	9	\$			0.00						
C. Total Funds	Available (Sum Of	f Lines A	and B)			9	\$			0.00						
D. Total Expen	ditures (From Sch	edule II	I)			9	\$			0.00						
E. Ending Cast	n Balance (Subtrac	t Line D	From Line	C)			5			0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$			0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		9	\$			0.00						
				AFF	IDAV	IT SI	ECTION									
PART I - If this i	s a Committee rep	ort, trea	surer sign	here.	If this i	s a Ca	Indidate	report,	candi	date si	gn here.					
I swear (or affirm correct and comp	) that this report, inc ete.	luding the	e attached sc	hedules	s filed or	ı papeı	r or by ele	ctronic n	nedium	ı, are to	the best of	my knov	vledge	and beli	ef , true	3
Sworn to and sub	scribed before me this day of	S	20						:	Signatur	e of Persor	ı Submitt	ing Rep	oort		
	Signatu	ire				_					Print	ed Name				•
My Commission E	-										Emai	1				
	мо	D	AY	YR				Α	rea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee,	Candio	date shal	ll sign h	ere.							
I swear (or affirm No 320) as amend	) that to the best of n ed.	ny knowle	edge and beli	ief this	politica	l comr	nittee has	not viola	ated a	ıy provis	sions of the	act of Ju	ine 3,1	937 (P.I	. 1333,	
Sworn to and subs	worn to and subscribed before me this Signature of Candidate day of 20									·						
											Printe	d Name				•
My Commission Ex	Signature					_			Email							
	мо		• *						Code		<b>D-</b>	vtime Te	lonha	o Numb	ar	
		D	AY	YR	L			Alea	coue		Da	ytime Te	repilor	e nume		

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BARRY J. JOZWIAK From: <u>9/20/2022</u> To: 10/24/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

## 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						
				From: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee			м	10	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	•)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00		

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	orting P	eriod					
			From: T			Тс	o:			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address		_					\$	0.00		
City	State	Zip Code (Plus 4	)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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					
				То:				
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
					PAGE TOTAL			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	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 Re				eporting Period						
From:				n:		Т	То:			
				D	ATE		АМ	IOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio							P#	<b>AGE 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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

### SE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
BARRY J. JOZWIAK	From:	<u>9/20/2022</u> <b>то:</b>	<u>10/24/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Re			Reporting Period						
F						То:			
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address		_				<b>7</b> \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,		PAGE TOTA	AL.	
						\$		0.00	

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period					
				From:						
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							<b>\$</b> 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor		•		Occupa	tion		•			
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00			

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
				From						
		DATE		AMOUNT						
To Whom Paid	мо	DAY	YEAR							
Mailing Address						\$	0.00			
City	Zip Code (Plus 4)	) Description of Expenditure								
Enter Crand Tatal of Evenenditures on Dags 1. Depart Course Dags Themes							PAGE TOTAL			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00			