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	2022C	0337				Repor Filed I		CA	NDII	DATE	*	C	OMMITTE	E	LOB	BYIST		
Name of Filing C	ommittee, C	andida	te or Lo	bbyis	it:	S	ANTA	RSIER	O, ST	EVE	N J								
Street Address:																			
City:									State	e:				Zip Cod	ie: 19	067			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.	30 DA				3.			AMENDMENT REPORT?		N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND F ELECT	FRIDAY FION	PRE-	5.	30 DA		Р	OST-	6.	Х	TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REI	PORT	7.	Year	2022	FILING METHOD () CHECK ONE				PAPER		\checkmark	DISK	ETTE					
Name of Office S	- Sought by Ca	ndidate	e:						DAT	ΕO	F ELE	CT:	ION	District Number	Office Code	Pai	ty Code	Code	
SENATOR IN TH	HE GENERAL	. ASSEI	MBLY						МО		DAY		YEAR	10	STS	DEI	М	09	
										11		8	2022		(SEE IN	STRUCTI	ONS FOR	CODES	5)
Summary of Expenditures		nd	МО	DA		YEAR			МО		DAY		YEAR	FO	R OFFI	E USE	ONLY		
			1	.0	25	202	22 1	О		11		28	2022	2					
A. Amount Bro	ught Forward	d From	Last R	eport				\$					0.00						
B. Total Moneta	ary Contribut	tions A	nd Rec	eipts ((From	Sched	ule I)	\$					0.00	<u>'</u>					
C. Total Funds	Available (Su	um Of L	Lines A	and B	3)			\$					0.00						
D. Total Expend	ditures (Fron	n Sched	dule II	[)				\$					240.00						
E. Ending Cash	Balance (Su	btract	Line D	From	Line C)		\$				(240.00)	4					
F. Value Of In-	Kind Contrib	utions	Receive	ed (Fr	om Sc	hedule	II)	\$					0.00						
G. Unpaid Debt	s And Obliga	itions (From S	chedu	ıle IV)			\$					0.00			'			
						AFFI	DAVI	T SE	CTIO	NC									
PART I - If this is	a Committe	e repo	rt, trea	surer	sign h	ere. If	this is	a Cai	ndidat	te re	port, c	can	didate si	gn here.					
I swear (or affirm) correct and complete		rt, inclu	ding the	attach	ned sch	edules f	filed on	paper	or by e	electr	onic m	ediu	ım, are to	the best o	f my knov	wledge	and be	ief , tr	ue
Sworn to and subs	cribed before r day of	me this		20						,			Signatu	e of Perso	n Submit	ing Re	oort		-
	- <u> </u>	ignature	e	•				<u>-</u>						Prin	ted Name)			-
My Commission Ex	rpires							_		•				Ema	il				
	мо		DA	Υ		YR					Are	ea C	Code	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	a candi	date's	autho	rized (Commi	ttee, C	Candid	ate sl	nalls	sign he	ere	•						
I swear (or affirm) No 320) as amende		est of my	y knowle	dge an	nd belie	f this p	olitical	comm	ittee h	as no	ot viola	ted	any provi	sions of the	e act of J	une 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before m day of	e this		20										Signature o	of Candida	ate			_
				-				_						Printe	d Name				-
My Commission Exp	_	ature						_						Ema	il				-
, сопппавіон Ехр								_											_
	М	10	DA	λY		YR					Area	Cod	le	Da	aytime T	elephor	ne Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period						
SANTARSIERO, STEVEN J	From:	10/25/202	<u>2</u> To:	11/28/2022			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting) 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	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			
			1				
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			\$	0.00			

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Reporting Period					
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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)

Name of Filing Committee or Candidat	te		Rep	Reporting Period					
			Fro	m:) :			
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							

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

PAGE TOTAL \$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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

ame of Filing Committee or Candidate			Reporting Period					
			Fror	From:			То:	
				D/	ATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PA \$	GE 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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. y 1 dgc,	Section				\$	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 Per	iod						
SANTARSIERO, STEVEN J	From:	<u>10/25/2022</u> To:	11/28/2022					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Candidat	:e		Reporting Period					
			From:			То:		
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
SANTARSIERO, STEVEN J	From	10/25	<u>/2022</u>	To:	11/28/2022		
		DATE			AMOUNT		
To Whom Paid							

				DATE		AMOUNT
To Whom Paid USPS - Newtown			мо	DAY	YEAR	
Mailing Address 20 Terry Dr			11	28	2022	\$ 240.00
City Newtown	State PA	Zip Code (Plus 4) 18940	1	otion of Exp e - Stamps		
						PAGE TOTAL
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$ 240.00	