Campaign Finance Report

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

| Street Address: 172 Coffview Drive Street Address: 172 Coffview Drive Street Address: 172 Coffview Drive State: PA | Filer Identificati Number : | on 2019 | 0363 | | | | port ed B | | CANDI | DATE | | СОМ | 4ITTEE | ✓ | LOB | BYIST | | |
|--|--------------------------------|--|---------------------------|-----------------|-------|-------|--------------|---------|-------------|----------|--------|------------|------------|------------|---------|-----------|---------|----------|
| Street Address: TYPE OF REPORT PREPORT PREPARE PREPORT PREPORT PREPORT PREPARE PREPORT PREPARE PREPARE PREPAR | Name of Filing C | committee, Candid | ate or L | obbyist: | | Frie | nds | of An | n Marie I | Mitchel | I | | | | | | | |
| TYPE OF REPORT RECEIDAN PRE-PERMARY PRE-PE | Street Address: | 172 Golfview | Drive | | | | | | | | | | | | | | | |
| REPORT (place X to the right of report type) REPORT (place X to the | City: | Ivyland | | | | | | | State: | PA | | | Zip Cod | le: 18 | 3974 | | | |
| Calca X to the right of report type PRE-ELECTION PAPER | | | 1. X | | PRE- | | 2. | | | POST- | 3. | | | | Yes | No | | |
| Name of Office Sought by Candidate: Name of Office Sought by Candidate: | | | PRE-ELECTION ELECTION ELE | | | | | | | POST- 6. | | | | | | No | | \ |
| Summary of Receipts and Expenditures from: MO DAY YEAR 11 8 2022 (SEE INSTRUCTIONS FOR CODES) Summary of Receipts and Expenditures from: 1 1 2022 TO 3 28 2022 A. Amount Brought Forward From Last Report \$ 23,804.03 B. Total Monetary Contributions And Receipts (From Schedule I) \$ 19,790.00 C. Total Funds Available (Sum Of Lines A and B) \$ 43,594.03 D. Total Expenditures (From Schedule III) \$ 3,680.98 E. Ending Cash Balance (Subtract Line D From Line C) \$ 39,913.05 F. Value Of In-Kind Contributions Received (From Schedule II) \$ 0.00 G. Unpaid Debts And Obligations (From Schedule IV) \$ 1,019.95 AFFIDAVIT SECTION PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here. I awear (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. Signature Signature Signature Printed Name | | rt type) ANNUAL REPORT 7. Year 2022 FILING METHO | | | | | | | | | | | \ | DISKE | TTE | | | |
| Summary of Receipts and Expenditures from: No DAY YEAR 11 8 2022 (SEE INSTRUCTIONS FOR CODES) | Name of Office S | ought by Candida | te: | | _ | _ | _ | | DATE O | F ELE | CTIO | N | | | Pai | ty Code | | |
| Summary of Receipts and Expenditures from: 1 | | | | | | | | | МО | DAY | YE | AR | | - | | | - | |
| A. Amount Brought Forward From Last Report B. Total Monetary Contributions And Receipts (From Schedule I) C. Total Funds Available (Sum Of Lines A and B) C. Total Funds Available (Sum Of Lines A and B) D. Total Expenditures (From Schedule III) E. Ending Cash Balance (Subtract Line D From Line C) F. Value Of In-Kind Contributions Received (From Schedule III) G. Unpaid Debts And Obligations (From Schedule IV) 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 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 Frinted Name Signature of Candidate Frinted Name Email My Commission Expires Email Email | | | | | | | | | 11 | | 8 | 2022 | | (SEE IN | STRUCTI | ONS FOR (| ODES |) |
| A. Amount Brought Forward From Last Report \$ 23,804.03 B. Total Monetary Contributions And Receipts (From Schedule I) \$ 19,790.00 C. Total Funds Available (Sum Of Lines A and B) \$ 43,594.03 D. Total Expenditures (From Schedule III) \$ 3,680.98 E. Ending Cash Balance (Subtract Line D From Line C) \$ 39,913.05 F. Value Of In-Kind Contributions Received (From Schedule II) \$ 0.00 G. Unpaid Debts And Obligations (From Schedule IV) \$ 1,019.95 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 Printed Name My Commission Expires Mo DAY YR Signature of Person Submitting Report 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 Printed Name My Commission Expires Signature My Commission Expires Email Email Email Email Email Email | | | МО | DAY Y | EAR | | | | мо | DAY | YE | AR | FC | R OFFI | CE USE | ONLY | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 19,790.00 C. Total Funds Available (Sum Of Lines A and B) \$ 43,594.03 D. Total Expenditures (From Schedule III) \$ 3,680.98 E. Ending Cash Balance (Subtract Line D From Line C) \$ 39,913.05 F. Value Of In-Kind Contributions Received (From Schedule II) \$ 0.00 G. Unpaid Debts And Obligations (From Schedule IV) \$ 1,019.95 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 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 Printed Name Signature of Candidate My Commission Expires Email My Commission Expires Email | Expenditures | from: | | 1 1 | 20 | 022 | T | 0 | 3 | | 28 | 2022 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) \$ 43,594.03 D. Total Expenditures (From Schedule III) \$ 3,680.98 E. Ending Cash Balance (Subtract Line D From Line C) \$ 39,913.05 F. Value Of In-Kind Contributions Received (From Schedule II) \$ 0.00 G. Unpaid Debts And Obligations (From Schedule IV) \$ 1,019.95 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 Printed Name My Commission Expires MO DAY YR Signature Femail Fart 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 Printed Name Signature Femail Signature of Candidate My Commission Expires Signature My Commission Expires Email Email Email Signature of Candidate Email Email | A. Amount Bro | ught Forward Fron | n Last R | eport | | | | \$ | - | | 23,8 | 304.03 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) \$ 39,913.05 F. Value Of In-Kind Contributions Received (From Schedule II) \$ 0.00 G. Unpaid Debts And Obligations (From Schedule IV) \$ 1,019.95 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 | B. Total Moneta | ary Contributions / | And Rec | eipts (From S | che | dule | e I) | \$ | | | 19,7 | 90.00 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) \$ 39,913.05 F. Value Of In-Kind Contributions Received (From Schedule II) \$ 0.00 G. Unpaid Debts And Obligations (From Schedule IV) \$ 1,019.95 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 My Commission Expires Finall 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 Printed Name Signature Fignature My Commission Expires Signature Email | C. Total Funds | Available (Sum Of | Lines A | and B) | | | | \$ | | | 43,5 | 94.03 | | | | | | |
| F. Value Of In-Kind Contributions Received (From Schedule II) \$ 0.00 G. Unpaid Debts And Obligations (From Schedule IV) \$ 1,019.95 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 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 Printed Name Signature of Candidate By Commission Expires Email Email | D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | 3,6 | 80.98 | | | | | | |
| 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 My Commission Expires Finall MO DAY YR Signature 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 Printed Name Signature Signature Finall Finall Printed Name Signature of Candidate Bignature of Candidate Finall Finall | E. Ending Cash | Balance (Subtract | Line D | From Line C) | | | | \$ | | | 39,9 | 13.05 | | | | | | |
| 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 Printed Name Finall 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 Printed Name Signature of Candidate Printed Name Email | F. Value Of In- | Kind Contributions | Receiv | ed (From Scho | edul | le II | [) | \$ | | | | 0.00 | | | | | | |
| 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 Signature Printed Name Printed Name 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 Printed Name Signature Finall Printed Name Email | G. Unpaid Debt | s And Obligations | (From S | Schedule IV) | | | | \$ | | | 1,0 | 19.95 | | | • | | | |
| 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 Signature Signature Email 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 Printed Name Signature Signature My Commission Expires Email | | | | A | \FF | IDA | ٩VI | T SE | CTION | | | | | | | | | |
| Sworn to and subscribed before me this day of 20 Signature Signature Signature Signature of Person Submitting Report Printed Name Signature Femail 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 Printed Name Signature My Commission Expires Email | PART I - If this is | a Committee rep | ort, trea | surer sign he | re. I | f th | is is | a Can | ididate re | eport, o | candi | date sig | ın here. | | | | | |
| Aday of 20 Signature Printed Name | | | uding the | attached sched | dules | filed | d on | paper (| or by elect | ronic m | edium | , are to t | he best o | f my kno | wledge | and beli | ef , tr | ue, |
| My Commission Expires Mo | Sworn to and subs | | i | 20 | | | | | | | S | ignature | of Perso | n Submit | ting Re | oort | | |
| 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 Printed Name My Commission Expires Email | | Signatu | re | | | | | - | | | | | Prin | ted Name | 9 | | | _ |
| 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 Printed Name Signature My Commission Expires Email | My Commission Ex | rpires | | | | | | _ | | | | | Ema | il | | | | _ |
| 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 Printed Name Signature My Commission Expires Email | | мо | D | AY | YR | | | | | Are | ea Cod | e | Daytim | e Teleph | one Nu | mber | | |
| No 320) as amended. Sworn to and subscribed before me this day of 20 Printed Name Signature My Commission Expires Email | Part II- If this is | a report of a cand | lidate's | authorized Co | omm | itte | ee, C | andida | ate shall | sign h | ere. | | | | | | | |
| Aday of 20 Printed Name Signature My Commission Expires Email | | | ıy knowle | edge and belief | this | polit | tical | commi | ittee has n | ot viola | ted an | y provis | ions of th | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Signature My Commission Expires Email | Sworn to and subsc | | | 20 | | | | | | | | S | ignature o | of Candid | ate | | | - |
| My Commission Expires Email | | | | | | | | - | | | | | Printe | d Name | | | | - |
| MO DAY YR Area Code Daytime Telephone Number | My Commission Exp | _ | | | | | | - | | | | | Ema | il | | | | - |
| | | | | | YR | | | - | | Area | Code | | Da | aytime T | elephor | ne Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | J Period | | |
|--|-----------|----------|--------------|-----------|
| Friends of Ann Marie Mitchell | From: | 1/1/202 | <u>2</u> To: | 3/28/2022 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | Period | (1) | \$ | 875.00 |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | | | | |
| Contributions Received From Political Committees (Part A) | | | \$ | 400.00 |
| All Other Contributions (Part B) | | | \$ | 5,700.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 6,100.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 5,000.00 |
| All Other Contributions (Part D) | | | \$ | 7,815.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 12,815.00 |
| 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 Page | | | \$ | 19,790.00 |

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 Can | didate | | Reporting | Period | | | |
|---|--------------------|---------------------------------------|-----------|--------|-----------------------|----|-----------|
| Friends of Ann Marie Mitchell | | | From: | 1/1/20 |) <u>22</u> To | : | 3/28/2022 |
| | | 1 | | DATE | | | AMOUNT |
| Full Name of Contributing Committee Friends of Crissy Richardson | ee | | МО | DAY | YEAR | | |
| Mailing Address PO Box 59 | | | | | | \$ | 200.00 |
| City Richboro | State PA | Zip Code (Plus 4) 189540059 | 3 | 25 | 2022 | | |
| Full Name of Contributing Committee | ee | | МО | DAY | YEAR | | |
| Mailing Address 346 Stratton | Ct | | | | | \$ | 200.00 |

Zip Code (Plus 4)

190471664

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

State

PA

City

Langhorne

PAGE TOTAL \$400.00

2022

3

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 Candid | ate | | Rep | orting Po | eriod | | | |
|---|--------------------|---------------------------------------|------|-----------|-------|-----------------|----|-----------|
| Friends of Ann Marie Mitchell | | | Fron | m: | 1/1/2 | 2022 T o |): | 3/28/2022 |
| | | • | | | DATE | | | AMOUNT |
| Full Name of Contributor Jobert Abueva | | | | МО | DAY | YEAR | | |
| Mailing Address 6465 Lower York | Rd | | | | | | \$ | 100.00 |
| City New Hope | State PA | Zip Code (Plus 4) 189385697 | | 3 | 18 | 2022 | | |
| Full Name of Contributor Andrew Anania | | | | МО | DAY | YEAR | | |
| Mailing Address 317 Meeting Hou | se Ln | | | | | | \$ | 100.00 |
| City Merion Station | State PA | Zip Code (Plus 4) 190661235 | | 3 | 11 | 2022 | | |
| Full Name of Contributor Linda Bobrin | | | | МО | DAY | YEAR | | |
| Mailing Address 9 Snapdragon Dr | | | | | | | \$ | 250.00 |
| City Newtown | State PA | Zip Code (Plus 4) 189409200 | | 3 | 21 | 2022 | | |
| Full Name of Contributor | | · | | мо | DAY | YEAR | | |
| Pat Mertens Boyle | | | | | | | | |
| Mailing Address 6310 Centennial | | | | 3 | 8 | 2022 | \$ | 100.00 |
| City Warminster | State PA | Zip Code (Plus 4) 189745492 | | 3 | 0 | 2022 | | |
| Full Name of Contributor Victor Corsino | | | | МО | DAY | YEAR | | |
| Mailing Address 1518 Bustleton P | ike | | | | | | \$ | 60.00 |
| City Feasterville Trevose | State PA | Zip Code (Plus 4) 190534104 | | 3 | 25 | 2022 | | |

| | | | | | | | | PAGE | • |
|---|---|--------------------------------|-----------------|------------------------------------|-----------|---------------|------------------|------|--------|
| Full Na | ame of Contril | butor | | | | | | | |
| Donal | d Doros | | | | МО | DAY | YEAR | | |
| Mailin | g Address | 199 Sydney Rd | | | | | | \$ | 80.00 |
| City | Southampto | | State | Zip Code (Plus 4) | 3 | 19 | 2022 | | |
| | , | | PA | 189662893 | | | | | |
| | ame of Contril | butor | | | МО | DAY | YEAR | | |
| Rober | t H. Dunphy | | | | | | | | |
| Mailin | g Address | 72 Black Rock Dr | | | | | | \$ | 100.00 |
| City | Holland | | State | Zip Code (Plus 4) | 3 | 2 | 2022 | | |
| | | | PA | 189662002 | | | | | |
| | ame of Contril | butor | | | мо | DAY | YEAR | | |
| Mailin | g Address | 32 E Holland Rd | | | | | | \$ | 100.00 |
| City | Holland | | State | Zip Code (Plus 4) | 3 | 21 | 2022 | | |
| | | | PA | 189662374 | | | | | |
| | ame of Contril n G Filmyer | butor | | | МО | DAY | YEAR | | |
| Mailin | g Address | 21 Newburyport Rd | | | | | | \$ | 100.00 |
| City | Feasterville | Trevose | State | Zip Code (Plus 4) | 3 | 18 | 2022 | | |
| | . 00000 | | PA | 190531557 | | | | | |
| Full N | | | | 190331337 | | | | | |
| | ame of Contril Fiorentino | butor | | 190331337 | МО | DAY | YEAR | | |
| Frank | | Dutor 201 Middlebury Dr | | 190331337 | мо | | | \$ | 100.00 |
| Frank | Fiorentino g Address | | State | Zip Code (Plus 4) | MO | | | \$ | 100.00 |
| Frank Mailin | Fiorentino | | State PA | | | DAY | YEAR | \$ | 100.00 |
| Frank Mailing City | Fiorentino g Address | 201 Middlebury Dr | | Zip Code (Plus 4) | | DAY | YEAR | \$ | 100.00 |
| Frank Mailing City Full Na Barba | Fiorentino g Address Warwick ame of Contril | 201 Middlebury Dr | | Zip Code (Plus 4) | 3 | DAY 21 | YEAR 2022 | \$ | 100.00 |
| Frank Mailing City Full Na Barba | Fiorentino g Address Warwick ame of Contril ra Franzel g Address | 201 Middlebury Dr | | Zip Code (Plus 4) | 3 | DAY 21 | YEAR 2022 | | |
| Frank Mailing City Full Na Barba Mailing | Fiorentino g Address Warwick ame of Contril ra Franzel | 201 Middlebury Dr | РА | Zip Code (Plus 4) 189743883 | мо | DAY 21 | YEAR 2022 YEAR | | |

| | | | | | | | | PAC | |
|--|--|--|--------------------|--|-----------|---------------|----------------------|-----|--------|
| Full Na | ame of Contri | ibutor | | | | | | | |
| Meliss | a K Heller | | | | МО | DAY | YEAR | | |
| Mailing | g Address | 1168 Kings Ave | | | | | | \$ | 80.00 |
| City | Bensalem | | State | Zip Code (Plus 4) | 3 | 25 | 2022 | | |
| | Benoarem | | PA | 190203652 | | | | | |
| | ame of Contri | ibutor | | | МО | DAY | YEAR | | |
| Judy A | A. Lang | | | | | | | | |
| Mailing | g Address | 215 Grasshopper D | r | | | | | \$ | 80.00 |
| City | Ivyland | | State | Zip Code (Plus 4) | 3 | 25 | 2022 | | |
| | , | | PA | 189741627 | | | | | |
| | ame of Contri ashner | ibutor | | | мо | DAY | YEAR | | |
| Mailing | g Address | 2469 Ironwood Dr | | | | | | \$ | 250.00 |
| City | Jamison | | State | Zip Code (Plus 4) | 3 | 9 | 2022 | | |
| | | | PA | 189291193 | | | | | |
| | | | l . | | | | | | |
| | ame of Contri el Lavanga | ibutor | | | МО | DAY | YEAR | | |
| Michae | | ibutor 6511 Moschella Ct | | | МО | DAY | YEAR | \$ | 100.00 |
| Michae | el Lavanga g Address | 6511 Moschella Ct | State | Zip Code (Plus 4) | MO | DAY 20 | YEAR 2022 | \$ | 100.00 |
| Michae Mailing | el Lavanga | 6511 Moschella Ct | State PA | Zip Code (Plus 4) 183029516 | | | | \$ | 100.00 |
| Mailing City Full Na | el Lavanga g Address | 6511 Moschella Ct dsburg | | 1 | | 20 | | \$ | 100.00 |
| Mailing City Full Na Priscill | el Lavanga g Address East Strouc | 6511 Moschella Ct dsburg | | 1 | 3 | 20 | 2022 | \$ | 100.00 |
| Mailing City Full Na Priscill | el Lavanga g Address East Strouc ame of Contri la G. Linden g Address | 6511 Moschella Ct dsburg ibutor 50 Dillon Way | | | 3 | 20 | 2022 | | |
| Mailing City Full Na Priscill Mailing | el Lavanga g Address East Strouc ame of Contri | 6511 Moschella Ct dsburg ibutor 50 Dillon Way | PA | 183029516 | мо | 20 DAY | 2022 YEAR | | |
| Michael Mailing City Full Na Priscill Mailing City Full Na | el Lavanga g Address East Strouc ame of Contri la G. Linden g Address | 6511 Moschella Ct dsburg ibutor 50 Dillon Way n Crossing | PA | 183029516 | мо | 20 DAY | 2022 YEAR | | |
| Michael Mailing City Full Na Priscill Mailing City Full Na Francis | el Lavanga g Address East Strouc ame of Contri la G. Linden g Address Washingtor | 6511 Moschella Ct dsburg ibutor 50 Dillon Way n Crossing | PA | 183029516 | MO | 20 DAY | 2022 YEAR 2022 | | |
| Michael Mailing City Full Na Priscill Mailing City Full Na Francis Mailing | el Lavanga g Address East Stroug ame of Contri la G. Linden g Address Washingtor ame of Contri s Littleton g Address | 6511 Moschella Ct dsburg ibutor 50 Dillon Way n Crossing ibutor | PA | 183029516 | MO | 20 DAY | 2022 YEAR 2022 | \$ | 100.00 |
| Mailing City Full Na Priscill Mailing City Full Na Francis | el Lavanga g Address East Strouc ame of Contri la G. Linden g Address Washingtor ame of Contri s Littleton | 6511 Moschella Ct dsburg ibutor 50 Dillon Way n Crossing ibutor | State PA | 183029516 Zip Code (Plus 4) 189771362 | мо мо | 20 DAY 18 | 2022 YEAR 2022 | \$ | 100.00 |

| Full Name of Co | ontributor | | | | | | | |
|--|--|-------------|---|-----------|---------------|----------------------|------|------------------|
| Bruce A. Mcinty | yre | | | МО | DAY | YEAR | | |
| Mailing Address | s 143 Bridgetown Pi | ke | | | | | \$ | 100.00 |
| City Langho | rne | State | Zip Code (Plus 4) | 3 | 25 | 2022 | | |
| | | PA | 190537228 | | | | | |
| Full Name of Co | | | | МО | DAY | YEAR | | |
| Mailing Address | s 7417 Boyer St | | | | | | \$ 2 | 200.00 |
| City Philade | Inhia | State | Zip Code (Plus 4) | 3 | 25 | 2022 | | |
| Tilliade | ipina | PA | 191191602 | | | | | |
| Full Name of Co | | | | мо | DAY | YEAR | | |
| Mailing Address | s 2 The Vista | | | | | | \$ 2 | 250.00 |
| City Middlet | own | State | Zip Code (Plus 4) | 3 | 22 | 2022 | | |
| | | NJ | 077482029 | | | | | |
| | | | | | | | | |
| Full Name of Co | | | | мо | DAY | YEAR | | |
| | son | | | мо | DAY | | \$ | 100.00 |
| Agnes M Morris | son 17 Woodstock Dr | State | Zip Code (Plus 4) | мо 3 | DAY 11 | YEAR 2022 | \$ | 100.00 |
| Agnes M Morris | son 17 Woodstock Dr | State PA | Zip Code (Plus 4) 189401009 | | | | \$ | 100.00 |
| Agnes M Morris | son 17 Woodstock Dr vn | | | | | | \$ | 100.00 |
| Agnes M Morris Mailing Address City Newtow Full Name of Co | son 17 Woodstock Dr vn ontributor | | | мо | DAY | 2022 YEAR | | 100.00 250.00 |
| Agnes M Morris Mailing Address City Newtow Full Name of Co Kristin Nielsen Mailing Address | son 17 Woodstock Dr vn portributor 132 Mallard Rd | | | 3 | 11 | 2022 | | |
| Agnes M Morris Mailing Address City Newtow Full Name of Co Kristin Nielsen Mailing Address | son 17 Woodstock Dr vn portributor 132 Mallard Rd | PA | 189401009 | мо | DAY | 2022 YEAR | | |
| Agnes M Morris Mailing Address City Newtow Full Name of Co Kristin Nielsen Mailing Address | son 17 Woodstock Dr vn potributor 132 Mallard Rd | PA State | 189401009 Zip Code (Plus 4) | мо | DAY | 2022 YEAR | | |
| Agnes M Morris Mailing Address City Newtow Full Name of Co Kristin Nielsen Mailing Address City Holland | son 17 Woodstock Dr vn ontributor 132 Mallard Rd ontributor | PA State | 189401009 Zip Code (Plus 4) | мо | 11 DAY 22 | 2022 YEAR 2022 | \$ | |
| Agnes M Morris Mailing Address City Newtow Full Name of Co Kristin Nielsen Mailing Address City Holland Full Name of Co Jackie Palmer Mailing Address | son 17 Woodstock Dr vn ontributor 132 Mallard Rd ontributor 123 Forrest Dr | PA State | 189401009 Zip Code (Plus 4) | мо | 11 DAY 22 | 2022 YEAR 2022 | \$ | 250.00 |
| Agnes M Morris Mailing Address City Newtow Full Name of Co Kristin Nielsen Mailing Address City Holland Full Name of Co Jackie Palmer Mailing Address | son 17 Woodstock Dr vn ontributor 132 Mallard Rd ontributor 123 Forrest Dr | State PA | 189401009 Zip Code (Plus 4) 189662113 | мо мо | 11 DAY 22 | 2022 YEAR 2022 | \$ | 250.00 |

| | | | | PAGE | |
|--|-----------|---------------|----------------------|------|------------------|
| Full Name of Contributor Valerie J Pfaff | МО | DAY | YEAR | | |
| Mailing Address 460 Rocksville Rd | | | | \$ | 150.00 |
| City Holland State Zip Code (Plus 4) PA 189662062 | 3 | 22 | 2022 | | |
| Full Name of Contributor John Pitschi | МО | DAY | YEAR | | |
| Mailing Address 92 Halsey Ave | | | | \$ | 100.00 |
| City Southampton State NY 119683414 | 3 | 16 | 2022 | | |
| Full Name of Contributor Lisa Lynn Procz | МО | DAY | YEAR | | |
| Mailing Address 467 Marion Ct | | | | \$ | 250.00 |
| City Holland State Zip Code (Plus 4) PA 189662781 | 3 | 8 | 2022 | | |
| | | | | | |
| Full Name of Contributor Karen T. Publick | мо | DAY | YEAR | | |
| | МО | | | \$ | 100.00 |
| Karen T. Publick | мо | DAY 17 | YEAR 2022 | \$ | 100.00 |
| Karen T. Publick Mailing Address 1265 Horseshoe Rd City Warrington State Zip Code (Plus 4) | | 17 | | \$ | 100.00 |
| Karen T. Publick Mailing Address 1265 Horseshoe Rd City Warrington State PA 2ip Code (Plus 4) 189761920 Full Name of Contributor | 3 | 17 | 2022 YEAR | \$ | 100.00 250.00 |
| Karen T. Publick Mailing Address 1265 Horseshoe Rd City Warrington State PA 189761920 Full Name of Contributor Ellen L. Radow | 3 | 17 | 2022 | | |
| Mailing Address 1265 Horseshoe Rd City Warrington State PA 189761920 Full Name of Contributor Ellen L. Radow Mailing Address 9 Timber Knoll Dr City Washington Crossing State Zip Code (Plus 4) 2 | 3 | 17 | 2022 YEAR | | |
| Mailing Address 1265 Horseshoe Rd City Warrington State PA 189761920 Full Name of Contributor Ellen L. Radow Mailing Address 9 Timber Knoll Dr City Washington Crossing State PA 189771052 Full Name of Contributor | мо 3 | 17 DAY 7 | 2022 YEAR 2022 | | |

| | | | | | | | | PAGE | |
|--|--|-------------------------------|----------------------|--|-----------|-------------------------|------------------|------|--------|
| Full Na | me of Contrib | outor | | | | | | | |
| Ron J. | Smolow | | | | МО | DAY | YEAR | | |
| Mailing | g Address | 56 Betts Dr | | | | | | \$ | 100.00 |
| City | Washington | Crossing | State | Zip Code (Plus 4) | 2 | 24 | 2022 | | |
| | | _ | PA | 189771355 | | | | | |
| Full Na | ame of Contrib | outor | | | МО | DAY | YEAR | | |
| Linda 9 | Sorensen | | | | | | | | |
| Mailing | g Address | 52 Manor Dr | | | | | | \$ | 200.00 |
| City | Richboro | | State | Zip Code (Plus 4) | 3 | 2 | 2022 | | |
| | | | PA | 189541826 | | | | | |
| | ame of Contrib | outor | | | МО | DAY | YEAR | | |
| Mailing | g Address | 46 Maher Ln | | | | | | \$ | 250.00 |
| City | Newtown | | State | Zip Code (Plus 4) | 2 | 18 | 2022 | | |
| | | | PA | 189409686 | | | | | |
| | ame of Contrib | outor | | | мо | DAY | YEAR | | |
| l Sigu v | annucci/ | | | | | | | | |
| | dannucci g Address | 8 Maple Springs Rd | | | | | | \$ | 100.00 |
| | g Address | 8 Maple Springs Rd | State | Zip Code (Plus 4) | 3 | 18 | 2022 | \$ | 100.00 |
| Mailing | | 8 Maple Springs Rd | | Zip Code (Plus 4) 088675029 | | 18 | 2022 | \$ | 100.00 |
| Mailing City Full Na | g Address | | State | | | | 2022 YEAR | \$ | 100.00 |
| Mailing City Full Na Debra | g Address Pittstown ame of Contrib | | State | | 3 | | | \$ | 250.00 |
| Mailing City Full Na Debra | Pittstown Pittstown | outor | State | | 3 | | | | |
| City Full Na Debra Mailing | Pittstown Pittstown | outor | State NJ | 088675029 | мо | DAY | YEAR | | |
| Mailing City Full Na Debra Mailing City | Pittstown Pittstown | outor 926 Morgan Dr | State NJ State | 088675029 Zip Code (Plus 4) | мо | DAY | YEAR | | |
| Full Na Debra Mailing City Full Na Elizabe | Pittstown Pittstown Ame of Contrib Wachspress Address Yardley Ame of Contrib | outor 926 Morgan Dr | State NJ State | 088675029 Zip Code (Plus 4) | MO | DAY 7 | YEAR 2022 | | |
| Full Na Debra Mailing City Full Na Elizabe Mailing | Pittstown Pittstown | 926 Morgan Dr | State NJ State | 088675029 Zip Code (Plus 4) | MO | DAY 7 | YEAR 2022 | \$ | 250.00 |
| Full Na Debra Mailing City Full Na Elizabe | Pittstown Pittstown | 926 Morgan Dr | State NJ State PA | 088675029 Zip Code (Plus 4) 190674308 | мо мо | DAY 7 DAY | YEAR 2022 YEAR | \$ | 250.00 |

| Full Name of Contributor David And Elizabeth E Wilkinson | | | мо | DAY | YEAR | |
|---|--------------------|---------------------------------------|-----------|---------------|------------------|------------------|
| Mailing Address 22 Timber Kno | oll Dr | | | | | \$ 250.00 |
| City Washington Crossing | State PA | Zip Code (Plus 4) 189771000 | 3 | 7 | 2022 | |
| | | | | | | |
| Full Name of Contributor Griselda Zuccarino-Catania | | I | МО | DAY | YEAR | |
| | r | I | MO | DAY 22 | YEAR 2022 | \$ 250.00 |

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

| PAGE TOTAL |
|----------------|
| \$ 5,700.00 |

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 Per | iod | | |
|---------------------------------------|---------------|----------|-----|-----------|
| Friends of Ann Marie Mitchell | From: | 1/1/2022 | То: | 3/28/2022 |

DATE AMOUNT

| Full Name of Contributing Committee Friends of Deb Ciamacca | | | | DAY | YEAR | |
|--|--------------------|---------------------------------------|---|-----|--------------------|--|
| Mailing Address 301 Radnor St | | | | | \$ 5,000.00 | |
| City Media | State PA | Zip Code (Plus 4) 190633793 | 3 | 22 | 2022 | |

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

PAGE TOTAL 5,000.00

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 Ca | ndidate | | | Repo | orting Pe | riod | | | | |
|--|---------------|----------|--------------|------|-----------|--------------|---------------|----------|-----------|--|
| Friends of Ann Marie Mitchell | | | | Fron | n: | <u>1/1/2</u> | <u>022</u> To |): | 3/28/2022 | |
| | | | • | | D/ | ATE | | АМС | AMOUNT | |
| Full Name of Contributor Laura Siena | | | | | МО | DAY | YEAR | | | |
| Mailing 626 W Upsal 3 | St | | | | | | | \$ | 500.00 | |
| City Philadelphia | State | Zi | p Code (Plus | 4) | 3 | 6 | 2022 | | | |
| | PA | 19 | 91193626 | | | | | | | |
| Employer Name None | • | , | | | Occupat | tion | lot Emp | loyed | | |
| Employer Mailing Address/Princi Business | ipal Place of | | City | | | State | | Zip Code | (Plus 4) | |
| 626 W Upsal St | | | Philadelph | nia | | PA | | 1911936 | 526 | |
| Full Name of Contributor Michael Michael Lewis | | | | | МО | DAY | YEAR | | | |
| Mailing 300 S Dallas Address | Ave | | | | | | | \$ | 500.00 | |
| City Pittsburgh | State | Zi | p Code (Plus | 4) | 3 | 22 | 2022 | | | |
| | PA | 15 | 52082628 | | | | | | | |
| Employer Name University of | Pittsburgh | | | | Occupat | t ion | rofesso | r | | |
| Employer Mailing Address/Princi Business | ipal Place of | | City | | | State | | Zip Code | (Plus 4) | |
| 135 N Bellefield Ave | | | Pittsburgh | า | | PA | | 1521326 | 509 | |
| Full Name of Contributor | | | | | МО | DAY | YEAR | | | |
| Beth Lashner | | | | | МО | DAT | ILAR | | | |
| Mailing 2469 Ironwoo | od Dr | | | | | | | \$ | 275.00 | |
| City Jamison | State | Zi | p Code (Plus | 4) | 3 | 9 | 2022 | | | |
| | PA | 18 | 39291193 | | | | | | | |
| Employer Name Not Employed | ı | • | | | Occupat | tion | lot Emp | loyed | | |
| Employer Mailing Address/Princ Business | ipal Place of | | City | | | State | | Zip Code | (Plus 4) | |

| Full Name of Contributor | | | | МО | DAY | YEAR | | | | |
|---|--|-----------------|-----------------|-------------------------|-------------------|-------------------------|--------------------|----------|--|--|
| Michael A Kreps | | | | | | | | | | |
| Mailing PO Box 692 Address | | | | | | | \$ 1,000.00 | | | |
| City Richboro | State | Zi _l | p Code (Plus 4) | 3 | 7 | 2022 | | | | |
| | PA | 18 | 39540692 | | | | | | | |
| Employer Name Not Employed | | | | Occupation Not Employed | | | | | | |
| Employer Mailing Address/Principal Plac Business | ce of | | City | | Zip Code (Plus 4) | | | | | |
| None | | | Southampton | | PA | | 18966 | | | |
| Full Name of Contributor | <u> </u> | | | ' | | | | | | |
| Marlene Katz | | | | МО | DAY | YEAR | | | | |
| Mailing 5110 Barn Owl Rd | | | | | | | \$ 1,000.00 | | | |
| City Pipersville | State | Zij | p Code (Plus 4) | 2 | 17 | 2022 | | | | |
| | PA | 18 | 39471813 | | | | | | | |
| Employer Name Not Employed | ployer Name Not Employed | | | | | Occupation Not Employed | | | | |
| Employer Mailing Address/Principal Place Business | pyer Mailing Address/Principal Place of City | | | | | | Zip Code (Plus 4) | | | |
| 5629 King Fisher Ln | | | Doylestown | | PA | | 189021408 | | | |
| Full Name of Contributor | | | · | | | ' | | | | |
| John G. Johnson | | | | МО | DAY | YEAR | | | | |
| Mailing 45 Brianna Rd Address | | | | | _ | 2022 | 2022 | \$ 40.00 | | |
| City Holland | State | Zij | p Code (Plus 4) | 3 | 5 | 2022 | | | | |
| | PA | 18 | 39665003 | | | | | | | |
| Employer Name Not Employed | | | | Occupat | ion N | lot Emp | loyed | | | |
| Employer Mailing Address/Principal Place Business | ce of | | City | | State | | Zip Code (Plus 4) | | | |
| 45 Brianna Rd | | | Holland | | PA | | 189665003 | | | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | | | |
| John G. Johnson | | | | MO | DAI | ILAK | | | | |
| Mailing 45 Brianna Rd Address | | | | | | | \$ 500.00 | | | |
| City Holland | State | Zij | p Code (Plus 4) | 2 | 23 | 2022 | | | | |
| | PA | 18 | 39665003 | | | | | | | |
| Employer Name Not Employed | | | | Occupat | ion N | lot Emp | loyed | | | |
| Employer Mailing Address/Principal Plac Business | ce of | | City | 1 | State | | Zip Code (Plus 4) | | | |
| 45 Brianna Rd | | | Holland | | PA | | 189665003 | | | |
| İ | | | | | ı | - 1 | | | | |

| | | | | | | | | 14 |
|--|-------------|----------|-----------------|---------|--------|-----------|-----------------------|----------|
| Full Name of Contributor | | | | | | | | |
| Ted Inoue | | | | МО | DAY | YEAR | | |
| Mailing 21 Solebury Mo | untain Rd | | | | | | <u> </u> | 500.00 |
| City New Hope | State | Zi | p Code (Plus 4) | 3 | 22 | 2022 | | |
| 1 New Hope | PA | 18 | 9381121 | | | | | |
| Employer Name NOT EMPLOYED |) | | | Occupat | tion | OT EMP | LOYED | |
| Employer Mailing Address/Princip | al Place of | | City | | State | T | Zip Code (Plus | · 4) |
| Business | | | City | | | | | , |
| 21 Solebury Mountain Rd | | | New Hope | | PA | | 189381121 | |
| Full Name of Contributor William Ewing | | | | МО | DAY | YEAR | | |
| Mailing 510 E Mount Pl | easant Ave | | | | | | - \$ | 500.00 |
| a. . | State | 71 | o Code (Plus 4) | 2 | 13 | 2022 | | 300.00 |
| City Philadelphia | PA | |)1191232 | | | | | |
| | | | 71191232 | | | | | |
| Employer Name Self Employed | | | | Occupat | tion A | ırbitrato | r | |
| Employer Mailing Address/Princip Business | al Place of | | City | | State | | Zip Code (Plus | i 4) |
| 510 E Mount Pleasant Ave | | | Philadelphia | | PA | | 191191232 | |
| Full Name of Contributor Charles Chapman Mailing 13049 Keesus B | | | | мо | DAY | YEAR | | |
| Address 13048 Knaus R | d | | | | | | \$ | 500.00 |
| City Lake Oswego | State | Zi | Code (Plus 4) | 3 | 4 | 2022 | | |
| | OR | 97 | 0341515 | | | | | |
| Employer Name Not Employed | • | ' | | Occupat | tion N | lot Empl | loyed | |
| Employer Mailing Address/Princip Business | al Place of | | City | • | State | | Zip Code (Plus | : 4) |
| 13048 Knaus Rd | | | Lake Oswego | | OR | | 970341515 | |
| Full Name of Contributor Laslo Boyd | | | | МО | DAY | YEAR | | |
| Mailing | C+ | | | | | | 4 | |
| Address 1737 Chestnut | JI | | | | _ | 2022 | \$ | 1,000.00 |
| City Philadelphia | State | Zi | Code (Plus 4) | 3 | 3 | 2022 | | |
| | PA | 19 | 1034137 | | | | | |
| Employer Name Not Employed | 1 | · | | Occupat | tion | lot Emp | loyed | |
| Employer Mailing Address/Princip Business | al Place of | | City | 1 | State | | Zip Code (Plus | s 4) |
| | | | | | | | | |
| | | | <u> </u> | | 1 | ı | | |

| | | | | | | | PAGE 15 | |
|--|----------------------------------|-------|--------------------|---------|------------------|----------|--------------------|--|
| Full Name of Contributo James Anderson | | | | | | YEAR | | |
| Mailing 136 S | unny Ridge Rd | | | | | | \$ 1,000.00 | |
| City Harrison | State | Zi | p Code (Plus 4) | 3 | 21 | 2022 | | |
| | NY | 10 |)5281912 | | | | | |
| Employer Name Self | | | | | :ion a | ttorney | | |
| Employer Mailing Addres Business | ss/Principal Place of | | City | | State | | Zip Code (Plus 4) | |
| 600 Mamaroneck AveSte 400 Harrison | | | | | NY | | 105281613 | |
| Full Name of Contributor RONALD ABRAHAM | | | | | DAY | YEAR | | |
| Mailing 338 G | ilen Meadow Rd | | | | | | \$ 500.00 | |
| City Richboro | State | Zi | p Code (Plus 4) | 2 | 27 | 2022 | | |
| | PA | 18 | 39541622 | | | | | |
| Employer Name SELF- | EMPLOYED | | | Occupat | i on P | HYSICI | AN | |
| Employer Mailing Addres Business | ss/Principal Place of | | City | | State | | Zip Code (Plus 4) | |
| Enter Grand Total of I | Dart Con Schodula I Detailed S | | nary Dago Sacti | on 7 | | <u> </u> | PAGE TOTAL | |
| Liitei Granu Total Of I | Part C on Schedule I, Detailed S | Juill | iiai y Faye, Secti | uii 3. | | | \$ 7,815.00 | |

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 Ca | ndidate | | Repor | ting Perio | od | | | |
|---------------------------------|------------------------|------------------|---------|------------|-----|------|----|-----------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | A | MOUNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | • | | | | • | • | |
| Enter Grand Total of Part E on | Schedule T Detailed | l Summary Page | Section | 4 | | | Р | AGE TOTAL |
| zinci. Grana rotal or rait z on | ocilculate 1, Detailet | . Janimary rage, | 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 Period | l | |
|--|------------------|----------------------------|------------------|
| Friends of Ann Marie Mitchell | From: | <u>1/1/2022</u> To: | <u>3/28/2022</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | 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 Candidate | lame of Filing Committee or Candidate R | | | | Reporting Period | | | | | |
|---------------------------------------|---|-----------------------|-----------|----------|------------------|-----------|------------|--|--|--|
| | | | From: | | | To: | | | | |
| | | | | 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 | odulo II. In Vir | d Contributions Data | ilad Sum | mary Dag | | | DAGE TOTAL | | | |
| Section 2. | edule II, III-KIN | iu Contributions Deta | ilieu Sum | шагу Рас | je, | | PAGE TOTAL | | | |
| | | | | | | \$ | 0.00 | | | |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name 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 | tion | | • | |
| 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 | | | | | | |
|---------------------------------------|------------------|----------|-----|-----------|--|--|--|
| Friends of Ann Marie Mitchell | From | 1/1/2022 | То: | 3/28/2022 | | | |

| | | | | DATE | | | AMOUNT |
|---|--------------------|------------------------------------|---|-------------------------|-----------|----|----------|
| To Whom Paid Act Blue | | | мо | DAY | YEAR | | |
| Mailing Address PO Box 441146 | 6 | | 3 | 3 | 2022 | \$ | 28.54 |
| City West Somerville | 1 | otion of Exp Card Fees | penditure | | | | |
| To Whom Paid Act Blue | | | МО | DAY | YEAR | | |
| Mailing Address PO Box 441146 | 6 | | 3 | 9 | 2022 | \$ | 29.93 |
| City West Somerville | State MA | Zip Code (Plus 4) 021440031 | | otion of Exp | penditure | | |
| To Whom Paid BCom Solutions, LLC | | | МО | DAY | YEAR | | |
| Mailing Address 747 O St # 15 | 0 | | 3 | 23 | 2022 | \$ | 2,500.00 |
| City Lincoln | State NE | Zip Code (Plus 4) 685081449 | Description of Expenditure Digital Media Fees | | | | |
| To Whom Paid NGPVAN, Inc. | • | | МО | DAY | YEAR | | |
| Mailing Address 1445 New York | Ave NW Ste 200 | | 1 | 3 | 2022 | \$ | 334.40 |
| City Washington | State DC | Zip Code (Plus 4) 200052158 | Descrip Softwa | otion of Exp re Fees | penditure | | |
| To Whom Paid NGPVAN, Inc. | | | МО | DAY | YEAR | | |
| Mailing Address 1445 New York | Ave NW Ste 200 | | 2 | 1 | 2022 | \$ | 334.40 |
| City Washington | State DC | Zip Code (Plus 4) 200052158 | Descrip Softwa | otion of Exp re Fees | penditure | | |
| | | | | | | | |

| | | | | | | 171GE 21 |
|--|-----------------------------|-----------------------|----------------|--------------|----------------|----------------|
| To Whom Paid NGPVAN, Inc. | | | мо | DAY | YEAR | |
| Mailing Address 144 | 5 New York Ave NW Ste 200 | | 3 | 2 | 2022 | \$ 334.40 |
| City Washington | State | Zip Code (Plus 4) | Descrit | tion of Exp | l Denditure | |
| washington | DC | 200052158 | | re Fees | | |
| To Whom Paid Paragon Solutions | | | мо | DAY | YEAR | |
| Mailing Address 214 | 1 E Broadway Rd Ste 202 | | 1 | 3 | 2022 | \$ 20.00 |
| City Tempe | State | Zip Code (Plus 4) | Descrit | tion of Exp | l anditure | |
| rempe | AZ | 852821895 | 1 | Card Fees | Jenuiture | |
| To Whom Paid Paragon Solutions | | | МО | DAY | YEAR | |
| Mailing Address 214 | 1 E Broadway Rd Ste 202 | | 2 | 2 | 2022 | \$ 20.00 |
| City Tempe | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | |
| , 6,p0 | AZ | 1 | Card Fees | | | |
| To Whom Paid Paragon Solutions | | | МО | DAY | YEAR | |
| Mailing Address 214 | 1 E Broadway Rd Ste 202 | | 3 | 2 | 2022 | \$ 59.31 |
| City Tempe | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | |
| | AZ | 852821895 | 1 | Card Fees | | |
| To Whom Paid TD Bank NA | | | мо | DAY | YEAR | |
| Mailing Address 106 | 0 2Nd Street Pike | | 1 | 31 | 2022 | \$ 10.00 |
| City Richboro | State | Zip Code (Plus 4) | 1 | otion of Exp | penditure | |
| | PA | 189541805 | Bank F | ees | | |
| To Whom Paid TD Bank NA | | | мо | DAY | YEAR | |
| Mailing Address 106 | 0 2Nd Street Pike | | 2 | 28 | 2022 | \$ 10.00 |
| City Richboro | State | Zip Code (Plus 4) | Descri | tion of Exp | enditure | |
| MCHDOTO | PA | 189541805 | Bank F | | | |
| Enter Grand Total of | Expenditures on Page 1, Rep | ort Cover Page Ttom 5 | | | | PAGE TOTAL |
| Linter Grantu Total Of | Expenditures on Page 1, Rep | on cover rage, item b | · - | | | \$ 3,680.98 |
| | · | | | | | |

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

| Name of Filing Committee or Candidate Reporting | | | ng Period | | | | | |
|---|-------------------------------------|---------------|---------------------|---------------------------|--------------------------------|------------|--------|--------------------------------|
| Friends of Ann Marie Mitchell | | | From: | | 1/1/2022 | То: | | 3/28/2022 |
| | | | | | DATE | | | Outstanding Balance of Debt |
| Name of Creditor Ann Marie Mitchell | | | мо | DAY | YEAR | | | |
| Mailing Address 550 Old Bordentown Rd | | | 3 | 22 | 2022 | \$ | 120.00 | |
| City Fairless Hills | State | Zip Code (Pl | us 4) | Descrir | tion of Del | nt | | |
| , rainess rillis | PA | 190304510 | ı | Voter Engagement Expenses | | | | |
| | Outstanding DATE Balance of De | | | | Outstanding Balance of Debt | | | |
| Name of Creditor Ann Marie Mitchell | | | | МО | DAY | YEAR | | |
| Mailing Address 550 Old Bordentown Rd | | | | 3 | 23 | 2022 | \$ | 100.00 |
| City Fairless Hills State Zip Code (Plus 4) | | | Description of Debt | | | | | |
| | PA | 190304510 | | Voter Engagement Expense | | | e | |
| | Outstanding DATE Balance of Debt | | | | | | | |
| Name of Creditor Ann Marie Mitchell | | | | МО | DAY | YEAR | | |
| Mailing Address 550 Old Bordentown Rd | | | 3 | 24 | 2022 | \$ | 72.89 | |
| City Fairless Hills | State | Zip Code (Plu | us 4) | Description of Debt | | | | |
| | PA | 190304510 | | | | er Expense | | |
| | | | | | DATE | | | Outstanding Balance of Debt |
| Name of Creditor | | | | | | | | |
| Ann Marie Mitchell | | | | МО | DAY | YEAR | | |
| Mailing Address 550 Old Bordentown Rd | | | 3 | 24 | 2022 | \$ | 75.00 | |
| City Fairless Hills State Zip Code (Plus 4) | | | Description of Debt | | | | | |
| | PA | 190304510 | | Voter Engagement Expense | | | | |

| | | | | DATE | | | Outstanding Balance of Debt |
|---|--------------------|---------------------------------------|---|------|------|----|--------------------------------|
| Name of Creditor Ann Marie Mitchell | | | мо | DAY | YEAR | | |
| Mailing Address 550 Old Bordentown Rd | | | 3 | 25 | 2022 | \$ | 100.00 |
| City Fairless Hills | State PA | Zip Code (Plus 4) 190304510 | Description of Debt Voter Engagement Expense | | | | |
| | | | | DATE | | | Outstanding Balance of Debt |
| Name of Creditor Donald Mitchell | | | МО | DAY | YEAR | | |
| Mailing Address 172 Golfview Dr | | | 3 | 22 | 2022 | \$ | 552.06 |
| City Ivyland | State PA | Zip Code (Plus 4) 189741665 | Description of Debt Fundraiser Expense | | | | |
| | | | _ | | | | PAGE TOTAL |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | | \$ | 1,019.95 |