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 :	ion 2022	0149			Repor Filed	-	CANDI	DATE		COMM	1ITTEE	✓	LOBE	BYIST	
Name of Filing	Committee, Candid	ate or Lol	bbyist:		PATRIC	TS F	OR BETH								
Street Address: PO BOX 451															
City:	WHITEHALL						State:	PA			Zip Co	de: 18	052		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		2ND FRIDA PRIMARY	Y PRE-	· 2.	30 D PRIM		POST-	3.		AMENDN REPORT		Yes	Nc	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION					30 D ELEC	AY I TION	POST-	POST- 6. X		TERMINATION REPORT?		Yes	Nc	\checkmark
report type)	ANNUAL REPORT	7.	Year 2022				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE O	OF ELEC	TION		District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEA	R			REP		
							11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEA	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:	10	0 25	20)22 1	0	11	2	8	2022					
A. Amount Bro	ught Forward From	n Last Re	port			\$			3,00	9.92					
B. Total Monet	ary Contributions	And Rece	ipts (Fron	1 Scheo	dule I)	\$	\$ 0.00								
C. Total Funds	Available (Sum Of	Lines A a	and B)			\$	5		3,00)9.92					
D. Total Expen	ditures (From Sch	edule III))			\$	5		2,58	32.40					
E. Ending Cash	Balance (Subtract	t Line D F	rom Line	C)			5		42	7.52					
F. Value Of In-	Kind Contributions	Receive	d (From S	chedul	e II)	4	5			0.00					
G. Unpaid Deb	ts And Obligations	(From So	hedule IV	()		4	5			0.00					
				AFF:	IDAVI	T SE	CTION								
	s a Committee rep	•	-					• •		_					
I swear (or affirm correct and compl) that this report, incl ete.	uding the a	attached sc	hedules	filed on	paper	or by elect	ronic me	dium, a	are to t	he best o:	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this day of		20						Sig	gnature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prin	ted Name			
My Commission E	xpires					_					Ema	il			
	МО	DAY	Y	YR				Are	a Code		Daytin	ne Teleph	one Nu	mber	
Part II- If this is	Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.														
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowled	lge and beli	ef this	political	comn	nittee has n	ot violato	ed any	provisi	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subse	cribed before me this day of		20							Si	ignature	of Candida	ite		
			20			_					Printe	ed Name			
Signature											Ema	nil			
My Commission Ex						_									
	мо	DA	Y	YR		-		Area C	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PATRIOTS FOR BETH	From:	<u>10/25/202</u>	2 <u>2</u> To:	<u>11/28/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	\$	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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	J 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 Pa			\$	0.00

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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				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							
							ſ	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 Candidat	e		Rep	orting P	eriod				
From: To:									
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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 Perio	od						
	rom: To:								
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•			
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	nary Page	Section	4				PAGE TO	ΓAL
		iaiy raye,	Section	7.			\$		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 Perio	d	
PATRIOTS FOR BETH	From:	<u>10/25/2022</u> то:	<u>11/28/2022</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 PART	ſF)		
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	Reporting Period							
	From:			То:				
				DATE		АМС	DUNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

0.00

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

Name of Filing Committee or Candidate						Reporting Period					
					Fro	om:		То:			
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(P	lus 4)							
Employer of Contributor	I		1			Occupat	tion	-			
Employer Mailing Address/Principa Business	l Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	
				_						PAGE TOTAL	

- 1	Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAG

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
PATRIOTS FOR BETH			From	<u>10/25/2022</u>		То:	<u>11/28/2022</u>
				DATE		AMOUNT	
To Whom Paid GO DADDY			мо	DAY	YEAR		
Mailing Address			11	14	2022	\$	18.01
City	State	Zip Code (Plus 4)	Description of Expenditure WEBSITE				
To Whom Paid COMMUNICATIONS CONCEPTS			мо	DAY	YEAR		
Mailing Address 2906 WILLIAM PENN HIGHWAY SUITE 401			11	25	2022	\$	2,564.39
City EASTON	State PA	Zip Code (Plus 4) 18045		Description of Expenditure MAILER			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	2,582.40