# **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 :	ion	20220	20289			Repor Filed I		CANDI	DATE	<b>~</b>	co	OMMITTEE		LOB	BYIST		
Name of Filing C	Committee,	Candida	ite or Lo	bbyist:		FRANK	-	Υ.									
Street Address:																	
City:								State:				Zip Cod	e: 19	047			
TYPE OF REPORT	6TH TUESD PRE-PRIMA			2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	3.		AMENDMENT REPORT?		Yes	<ul><li>✓ N</li></ul>	0	
(place X to the right of	6TH TUESD PRE-ELECT			2ND FRIDA ELECTION	y pre	5.	30 D ELEC	AY F TION	POST-	POST- 6. <b>X</b>		TERMINATION REPORT?		Yes	N	0	$\checkmark$
report type)	ANNUAL R	REPORT	7.	<b>Year</b> 2022				NG METHO CHECK O				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	L Sought by C	Candidat	e:					DATE O	F ELEC	TION		District Number	Office Code	Pai	ty Code	Cour Code	
			MDIV					мо	DAY	YEA	R	6	STS	REF	)		
SENATOR IN T	ne Genera	AL ASSE	MBLY					11		8	2022	]	(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		and	мо	DAY	YEAR	2		мо	DAY	YE/	R	FOI	ROFFIC	e use	ONLY	,	
Expenditures	s from:		1	0 25	2	022 <b>1</b>	Ο	11	2	8	2022						
A. Amount Bro	ught Forwa	ard From	ı Last Re	eport			\$	5			0.00						
B. Total Monet	ary Contrib	outions A	nd Rece	ipts (From	Sche	dule I)	\$	5			0.00						
C. Total Funds	Available (	Sum Of	Lines A a	and B)			\$	5			0.00						
D. Total Expen	ditures (Fro	om Sche	dule III	)			\$	5			0.00						
E. Ending Cash	Balance (S	Subtract	Line D F	rom Line (	C)		4	5			0.00						
F. Value Of In-	Kind Contri	ibutions	Receive	d (From S	chedu	le II)	4	5			0.00						
G. Unpaid Debt	ts And Oblig	gations	(From So	chedule IV	)		4	5			0.00						
					AFF	IDAV	IT SE	CTION									
PART I - If this is		-		-					• •		-	-					
I swear (or affirm) correct and comple		port, inclu	laing the	attached sci	nedules	s filed on	paper	or by elect	ronic me	aium, a	are to	the best of	my know	leage	and be	ier, tr	ue
Sworn to and subs	cribed before day of	e me this		20						Sig	Inatur	e of Person	Submitti	ng Rej	oort		-
		Signatur	e				_					Printe	ed Name				-
My Commission Ex	xpires											Email					-
	м	0	DA	Y	YR				Are	a Code		Daytime	e Telepho	one Nu	mber		_
Part II- If this is	a report o	f a cand	idate's a	uthorized	Comn	nittee, O	Candio	late shall	sign he	re.							
I swear (or affirm) No 320) as amende		best of m	y knowlee	dge and beli	ef this	political	comn	nittee has n	ot violat	ed any	provis	ions of the	act of Ju	ne 3,1	937 (P.	L. 133	з,
Sworn to and subso	oscribed before me this Signature of Candidate								-								
				20			_	Printed Name								-	
My Commission Exp		gnature					-					Email					_
	,es 						_										_
		мо	DA	Y	YR				Area (	Code		Da	ytime Te	lephor	ne Num	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>10/25/2022</u> **To:** FRANK FARRY 11/28/2022 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				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 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					
			Fror	From: Te			): 			
					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 Period							
			From:			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, Sect							\$	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:				m: To:					
				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, Section							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 Candidat	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description						•				
		_	<b>.</b>					PAGE TO	TAL	
Enter Grand Total of Part E on Sche	iule I, Detailed Su	immary 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 Perio	od	
FRANK FARRY	From:	<u>10/25/2022</u> <b>To:</b>	<u>11/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	1	
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, 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.				ailed Summary Page,			PAGE TOTAL		
						\$		0.00	

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

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

# SCHEDULE III STATEMENT OF EXPENDITURES

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