### **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 2014	0157			Rep File			CANE	DID	ATE		СОМ	1ITTEE	✓	LOBE	BYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	ND:	S OF	JOE TO	RSE	ELLA							
Street Address:	602 CREEK LA	ANE															
City:	FLOURTOWN							State:	F	PA			Zip Cod	<b>le:</b> 19	9031		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	:- 2	2.	30 DA		РО	ST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRI	E- 5	5.	30 DA		РО	ST-	6. <b>X</b>		TERMINA REPORT		Yes	No	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022					NG METI CHECK					PAPER		$\overline{}$	DISKE	TTE
Name of Office S	- Sought by Candida	te:						DATE	OF	ELEC	TIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	C	DAY	YE	AR			•		
								1	1		8	2022		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAF	2			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	irom:	-	10 25	5 2	022	Т	0	1	1	2	8	2022					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				19,5	13.88					
B. Total Monet	ary Contributions	And Rec	eipts (Fror	n Sche	dule	I)	\$					0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				19,5	13.88					
D. Total Expen	D. Total Expenditures (From Schedule III)						\$				19,5	13.88					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$					0.00					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	)	\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)			\$					0.00			•		
				AFF	FIDA	VI	T SE	CTION	J								
	a Committee rep	•							-	•							
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached so	hedule	s filed	l on	paper	or by ele	ctro	nic me	dium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me this day of	i	20						-		s	ignature	of Perso	n Submit	ting Rep	oort	
	Signatu	ra					-		-				Prin	ted Name	e		
My Commission Ex	_								-				Ema	il			
	мо	D	AY	YR						Are	a Cod	e	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comr	nitte	e, C	andid	ate sha	l si	gn he	re.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and bel	ief this	s polit	ical	comm	ittee has	not	violat	ed an	y provisi	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this								-			Si	ignature o	of Candid	ate		
	day of ————————————————————————————————————						-		-				Printe	d Name			
	Signature						-		_								
My Commission Exp	<del>-</del>												Ema	il			
	МО	D	AY	YF	R		•		_	Area C	Code		Da	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JOE TORSELLA	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
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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		Re	porting	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.

PAGE TOTAL
\$ 0.00

## 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 Candi	date		Re <sub>l</sub> Fro	oorting P m:	eriod	To	o:	
					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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary 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.)

Name of Filing Committee or Candida	ate			Rep	orting Pe	riod			
				Froi	n:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	i <b>4</b> )					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	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	
FRIENDS OF JOE TORSELLA	From:	<u>10/25/2022</u> <b>To:</b>	11/28/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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					Reporting	Period			
					From:		То:		
						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 Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	didate		Reporti	ng Period			
FRIENDS OF JOE TORSELLA			From	10/2	5/2022	То:	11/28/2022
				DATE			AMOUNT
To Whom Paid GOOGLE APPS			мо	DAY	YEAR		
Mailing Address 1600 AMPHITI	HEATRE PKWY		11	20	2022	\$	424.00
City MOUNTAIN VIEW	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 94043	1	otion of Exp	penditure	•	
To Whom Paid COMMITTEE OF SEVENTY			МО	DAY	YEAR		
Mailing Address 123 S. BROAD	STREET SUITE 1800	0	12	5	2022	\$	1,357.03
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19109	<b>Descrip</b> DONAT	otion of Exp	penditure	•	
To Whom Paid ACCENT RECONCILIATION			МО	DAY	YEAR		
Mailing Address			12	5	2022	\$	17,732.85
City	State	Zip Code (Plus 4)	Descrip N/A	otion of Exp	enditure	)	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL** 

19,513.88