### **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 2	022C0	)862				Repor Filed I			CANE	Σ	DATE	<b>V</b>	<b>′</b> [c	ОММ	TTEE		LOBI	3YIS	т		
Name of Filing C	ommittee, Can	ndidat	e or Lo	bbyis	t:		ANN M	ARIE	MI	TCHE	LL											_
Street Address:	treet Address:																					
City:									9	State:					Zip	Cod	e: 18	974				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND F PRIMA		PRE-	2.	30 E PRII			P	OST-	3.			NDME ORT?	ENT	Yes	<b>\</b>	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND F ELECT		PRE-	5. <b>X</b>	30 E			P	OST-	6.			MINA <sup>-</sup> ORT?	TION	Yes		No	~	
report type)	ANNUAL REPO	<b>)RT</b> 7.		Year	2022					G METI					PAP	ER		<b>√</b>	DIS	KETT	Έ	
Name of Office S	ought by Cand	lidate:	:				•			DATE	OF	F ELE	СТІ	ION		rict nber	Office Code	Par	ty Co	ode Co	ount ode	y
CENATOR IN T		CCEN	4DLV						r	МО		DAY		YEAR	6		STS	DEN	1			
SENATOR IN TH	TE GENERAL A	(SSEIVI	IDLT							1	1		8	202	2		(SEE INS	TRUCTI	DNS F	OR COI	DES)	
Summary of Expenditures	•	d [	МО	DA		YEAR			I	МО		DAY		YEAR		FOI	ROFFIC	E USE	ONI	LY		
-				9	20	20	22 1	TO		1	.0		24	202	4							
A. Amount Bro								+	\$				(	(467.89	4							
B. Total Moneta	ary Contributio	ns An	d Rece	eipts (	From	Sched	lule I)		\$					0.00	4							
C. Total Funds	•				3)			-	\$					0.00	4							
D. Total Expend	ditures (From S	Sched	ule III	[) 					\$				1	.,625.23	3							
E. Ending Cash	Balance (Subt	ract L	ine D I	From I	Line C	:)		_	\$				(2,	093.52)	)							
F. Value Of In-	Kind Contribut	ions R	teceive	ed (Fr	om Sc	hedule	e II)		\$					0.00								
G. Unpaid Debt	s And Obligation	ons (F	rom S	chedu	ıle IV)	)			\$					0.00					_			_
						AFFI	[DAV]	TS	EC	TION	١											
PART I - If this is		-	•																			4
I swear (or affirm) correct and comple		, includ	ling the	attach	ed sch	edules	filed on	pape	er oi	r by ele	ctr	onic m	ediu	ım, are to	the b	est of	my knov	vledge	and b	elief ,	, true	à,
Sworn to and subs	cribed before me day of	this		20							-			Signatu	re of P	erson	Submitt	ing Rep	ort			•
	Sia:	nature						_			-					Print	ed Name					-
My Commission Ex	-										-					Email						٠
	мо		DA	λY		YR						Are	ea C	ode	Da	ytime	Teleph	one Nu	mber			
Part II- If this is	a report of a	candid	late's a	autho	rized (	Commi	ittee, (	Candi	ida	te sha	II s	sign he	ere.									
I swear (or affirm) No 320) as amende		of my	knowle	dge an	d belie	ef this p	political	com	mit	tee has	no	ot viola	ted	any provi	isions (	of the	act of Ju	ine 3,1	937 (	P.L. 1	333,	
Sworn to and subsc		this													Signat	ure of	Candida	ite				-
	day of			20 -				_							P	rinted	l Name					-
	Signati	ure						-			_					Email						-
My Commission Exp	ires 							_								Emali						
	МО		DA	AY		YR		-				Area	Cod	le		Da	ytime Te	elephor	ie Nu	mber		

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
ANN MARIE MITCHELL	From:	9/20/202	<u>2</u> To:	10/24/2022
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 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

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng 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

## 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 Ca	ndidate		Rep	oorting P	eriod	To	n:	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
					1			

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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		To	<b>)</b> :	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	5 4)					
Employer Name				Occupa	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 \$	<b>0.00</b>

## 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		А	MOUNT
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. Detailed	l Summary Page	Section	4			P/	AGE TOTAL
	Juliana 1/ Butanet	. January rage,		••			\$	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	
ANN MARIE MITCHELL	From:	<u>9/20/2022</u> <b>To:</b>	10/24/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candid	ate		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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		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:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl )	us	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

		ng Period		
Mo	20/2022		To:	10/24/2022
Mailing Address 851 BUSTLETON PIKE 10 15  City RICHBORO State PA 18954 Description of Exp POSTAGE  To Whom Paid WHITE PAGES, INC Mailing Address 2033 SIXTH AVENUE SUITE #1100 8 22  City SEATTLE State WA 98121 Description of Exp MEDIA EXPENSES  To Whom Paid MILLER'S ALE HOUSE Mailing Address 2250 EAST LINCOLN HIGHWAY 8 30  City LANGHORNE State PA 19047 Description of Exp PA 19047 CAMPAIGN FUNDER  To Whom Paid THE IRON OVEN MO DAY  Mailing Address 1134 STREET ROAD 10 18  City SOUTHAMPTON State Zip Code (Plus 4) Description of Exp PA 2 19047 DAY  MO DAY  MO DAY  MO DAY  Description of Exp PA 19047 Description of Exp PA 19047 Description of Exp PA 19047 DAY  MO DAY		DATE		AMOUNT
City RICHBORO State PA 18954 Description of Expression of	YEAR	DAY		
To Whom Paid WHITE PAGES, INC  Mailing Address 2033 SIXTH AVENUE SUITE #1100  State WA 98121  To Whom Paid MILLER'S ALE HOUSE  Mo DAY  Mailing Address 2250 EAST LINCOLN HIGHWAY  City LANGHORNE  To Whom Paid Pad THE IRON OVEN  Mailing Address 1134 STREET ROAD  PA 18954  PA 22  PA 2ip Code (Plus 4) PA 2ip Code (Plus 4	2022	15	\$	44.00
Moliting Address 2033 SIXTH AVENUE SUITE #1100 8 22  City SEATTLE State WA 98121 Description of Exp MEDIA EXPENSES  To Whom Paid MILLER'S ALE HOUSE	(penditure		e	
City SEATTLE  State WA SEATTLE  WA SEATTLE  WA SEATTLE  To Whom Paid MILLER'S ALE HOUSE  Mailing Address 2250 EAST LINCOLN HIGHWAY  To Whom Paid PA State PA	YEAR	DAY		
To Whom Paid MILLER'S ALE HOUSE  Mailing Address 2250 EAST LINCOLN HIGHWAY  City LANGHORNE  State PA  To Whom Paid The IRON OVEN  Mailing Address 1134 STREET ROAD  State  City SOUTHAMPTON  MAD  PA  MEDIA EXPENSES  MO  DAY  MEDIA EXPENSES  MO  DAY  MO  DAY  MO  DAY  LEAD  MO  DAY  Description of Exp. CAMPAIGN FUNDER  To Whom Paid The IRON OVEN  To Whom Paid The IRON OVEN  MO  DAY  Description of Exp. CAMPAIGN FUNDER  To Whom Paid The IRON OVEN  MO  DAY  Description of Exp. CAMPAIGN FUNDER  DESCRIPTION OF EXP. CAMPAIGN FUNDER	2022	22	\$	635.99
MILLER'S ALE HOUSE  Mailing Address 2250 EAST LINCOLN HIGHWAY  State PA 2ip Code (Plus 4) 19047  To Whom Paid THE IRON OVEN  Mailing Address 1134 STREET ROAD  City SOUTHAMPTON  State 2ip Code (Plus 4) 19047  MO DAY  To Whom Paid The IRON OVEN  State 2ip Code (Plus 4) 19047  MO DAY  To Whom Paid The IRON OVEN  State 2ip Code (Plus 4) Description of Expression of Ex	=	_	e	
City LANGHORNE  State PA  19047  To Whom Paid THE IRON OVEN  Mailing Address 1134 STREET ROAD  State  City SOUTHAMPTON  State  Zip Code (Plus 4) 19047  MO  DAY  LANGHORNE  Description of Exp CAMPAIGN FUNDER  10  18	YEAR	DAY		
TO Whom Paid THE IRON OVEN  Mailing Address 1134 STREET ROAD  City SOUTHAMPTON  PA 19047  MO DAY  To Whom Paid THE IRON OVEN  MO DAY  10 18	2022	30	\$	572.92
THE IRON OVEN  Mo DAY  Mo DAY  THE IRON OVEN  10 18  City SOUTHAMPTON  State Zip Code (Plus 4) Description of Exp	=	_	e	
City SOUTHAMPTON State Zip Code (Plus 4) Description of Exp	YEAR	DAY		
SOUTHAMPTON Description of Exp	2022	18	\$	372.72
			e	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL

1,625.63