

Campaign Finance Report

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

Filer Identification Number : 20170224		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF KYLE MULLINS											
Street Address: P.O. BOX 72											
City: PECKVILLE					State: PA		Zip Code: 18452				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2022	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	112	STH	DEM	35
					11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		11	29	2022		1	2	2023			
A. Amount Brought Forward From Last Report					\$		17,685.93				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		0.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		17,685.93				
D. Total Expenditures (From Schedule III)					\$		5,598.44				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		12,087.49				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		0.00				

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 of Person Submitting Report

Printed Name

Signature

Email

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

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF KYLE MULLINS	From: <u>11/29/2022</u> To: <u>1/2/2023</u>

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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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 Candidate	Reporting Period
	From: To:

					DATE			AMOUNT	
Full Name of Contributor					MO	DAY	YEAR	\$ 0.00	
Mailing Address									
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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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 Candidate	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
FRIENDS OF KYLE MULLINS		From: <u>11/29/2022</u> To: <u>1/2/2023</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF KYLE MULLINS	From <u>11/29/2022</u> To: <u>1/2/2023</u>

DATE				AMOUNT		
To Whom Paid BOY SCOUT TROOP 34			MO	DAY	YEAR	\$ 100.00
Mailing Address			12	12	2022	
City	State	Zip Code (Plus 4)	Description of Expenditure DONATION			
To Whom Paid EASTERN MANAGED PRINT NETWORK			MO	DAY	YEAR	\$ 2,900.00
Mailing Address 111 GRANT AVE STE 102			12	6	2022	
City ENDICOTT	State NY	Zip Code (Plus 4) 137605444	Description of Expenditure OFFICE EQUIPMENT			
To Whom Paid GOOGLE, LLC			MO	DAY	YEAR	\$ 6.36
Mailing Address 1600 AMPHITHEATRE PKWY			12	1	2022	
City MOUNTAIN VIEW	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure DOMAIN SERVICES			
To Whom Paid HILTON GARDEN INN NEW YORK			MO	DAY	YEAR	\$ 1,008.46
Mailing Address 136 W 42ND ST			12	5	2022	
City NEW YORK	State NY	Zip Code (Plus 4) 100367803	Description of Expenditure EVENT EXPENSE			
To Whom Paid LA CUCINA			MO	DAY	YEAR	\$ 476.66
Mailing Address 600 S BLAKELY ST			12	22	2022	
City DUNMORE	State PA	Zip Code (Plus 4) 185101249	Description of Expenditure EVENT EXPENSE			

To Whom Paid NGP			MO	DAY	YEAR	
Mailing Address 1447 NEW YORK AVE NW # 200			12	2	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 200052134	Description of Expenditure ONLINE MERCHANT FEES			

To Whom Paid OSTROWSKI, BECKLEY, AND THORPE, PC			MO	DAY	YEAR	
Mailing Address 933 NORTHERN BLVD STE 101			12	1	2022	
City SOUTH ABINGTON TOWNSHIP	State PA	Zip Code (Plus 4) 184112270	Description of Expenditure ACCOUNTING FEES			

To Whom Paid PSECU			MO	DAY	YEAR	
Mailing Address 200 PROSPECT ST			12	29	2022	
City EAST STROUDSBURG	State PA	Zip Code (Plus 4) 183012956	Description of Expenditure CAMPAIGN VISA PAYMENT			

To Whom Paid QUALITY BISTRO			MO	DAY	YEAR	
Mailing Address 120 W 55TH ST			12	5	2022	
City NEW YORK	State NY	Zip Code (Plus 4) 100195305	Description of Expenditure EVENT EXPENSE			

To Whom Paid VERIZON			MO	DAY	YEAR	
Mailing Address 300 LACKAWANNA AVE # 224			12	19	2022	
City SCRANTON	State PA	Zip Code (Plus 4) 185032001	Description of Expenditure CAMPAIGN PHONE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 5,598.44

SCHEDULE IV

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 FRIENDS OF KYLE MULLINS				Reporting Period From: <u>11/29/2022</u> To: <u>1/2/2023</u>			
							Outstanding Balance of Debt
				DATE			
Name of Creditor CINDY EGNOTOVICH				MO	DAY	YEAR	\$ 150.00
Mailing Address 6920 DOWINGTON DR				2	28	2018	
City CHARLOTTE	State NC		Zip Code (Plus 4) 282772731		Description of Debt LOAN RECEIVED (REMAINING INTEREST)		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 150.00