#### **Campaign Finance Report**

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

Filer Identification 20150203 Rep File									CANDI	DATE		СОМ	<b>4ITTEE</b>	✓	LOB	BYIST		
Name of Filing C	Committee, Can	ndida	te or Lo	bbyist:		DIS	ANT	O FO	R SENATE									
Street Address:	PO BOX 66	638																
City:	HARRISBU	JRG							State:	PA			<b>Zip Code:</b> 17112					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDAY PRIMARY	/ PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4	4.	2ND FRIDAY ELECTION	/ PRE	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	<b>\</b>
report type)	ANNUAL REPO	ORT	7. <b>X</b>	<b>Year</b> 2022					IG METHO				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	- Sought by Cand	lidate	e:						DATE O	F ELE	CTIC	N	District Number	Office Code	Pa	rty Code	Coun	
									МО	DAY	YI	AR		10000	<u> </u>			
	11 8 202										2022		(SEE IN	ISTRUCTI	ONS FOR	CODES	)	
Summary of Expenditures		d	МО	DAY	YEAR		_	_	МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
			1	.1 29	2	022	ı	0	12		31	2022	ļ					
A. Amount Bro	ught Forward I	From	Last Re	eport				\$			173,4	188.25						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 3,000.00										00.00								
C. Total Funds Available (Sum Of Lines A and B) \$ 176,488.25																		
D. Total Expenditures (From Schedule III) \$ 100.00																		
E. Ending Cash	Balance (Subt	tract	Line D I	From Line (	<b>C)</b>			\$			176,3	88.25						
F. Value Of In-	Kind Contribut	ions	Receive	ed (From So	hedu	le II	()	\$				0.00						
G. Unpaid Debt	s And Obligation	ons (	From S	chedule IV	)			\$			300,0	00.00			•			
					AFF	ID/	\VI	T SE	CTION									
PART I - If this is	s a Committee	repo	rt, treas	surer sign l	nere.	If th	is is	a Can	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple		, inclu	ding the	attached sch	edule	s file	d on	paper (	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , trı	ue.
Sworn to and subs	cribed before me	this		20							9	Signature	of Perso	n Submit	ting Re	port		_
								<u>-</u>					Prin	ted Name	<b>P</b>			_
My Commission E	-	nature	<b>e</b>															_
My Commission Ex	 MO		DA	Υ	YR			_		Are	ea Cod	le	Ema	e Telepi	none Nu	ımber		-
Part II- If this is		candi					e C	andid:	ate shall				.,.					
I swear (or affirm) No 320) as amende	that to the best						•			_		y provis	ions of th	e act of J	une 3,1	.937 (P.L	. 1333	3,
Sworn to and subsc		this								Signature of Candidate						-		
	day of			20				_										_
								-					Printe	d Name				
My Commission Exp	Signati ires	иге											Ema	il				_
	МО		DA	ıΥ	YR	ł		-		Area	Code		Da	aytime T	elepho	ne Numb	er	-

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
DISANTO FOR SENATE	From:	11/29/202	<u>22</u> To:	12/31/2022
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)			\$	3,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	3,000.00
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			\$	3,000.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

### 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 Fining Committee of Camulate			Reporting Period From: To:					
			Fro	m:		10	):	
					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 Re		Reporting	g Period					
DISANTO FOR SENATE From:			From:	11/2	9/2022	То:	12/31/2022	
				DA	TE		АМ	IOUNT
Full Name of Contributing Committee PAMIC_PAC				мо	DAY	YEAR		
Mailing Address 4999 Lousie Drive,	Suite 304				20	2022	\$	500.00
<b>City</b> Mechanicsburg	State PA	<b>Zip Cod</b> 17055	e (Plus 4)	12	28	2022		
Full Name of Contributing Committee FEAPAC_of_PA				мо	DAY	YEAR		
Mailing Address 3 Beaver Valley Roa	ad						\$	2,500.00
City Wilmington	State DE	<b>Zip Code</b> 19803	e (Plus 4)	12	28	2022		
								PAGE TOTAL

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

**PAGE TOTAL \$** 3,000.00

### 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	ame of Filing Committee or Candidate			orting Pe	riod						
	From					From: To:					
				D	ATE		ı	AMOUNT			
Full Name of Contributor				МО	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus	s 4)								
Employer Name				Occupat	tion						
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)			
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	PAGE 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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
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. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. <b>y</b> 1 dgc,	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	
DISANTO FOR SENATE	From:	<u>11/29/2022</u> <b>To:</b>	12/31/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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	Name of Filing Committee or Candidate Rep								
	Fro				From: To:				
				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				Re	porting l	Period				
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	g Period		
DISANTO FOR SENATE	From	11/29/2022	То:	12/31/2022

			DATE				AMOUNT		
<b>To Whom Paid</b> Tri County HDC	МО	DAY	YEAR						
Mailing Address 201 N Front Street				1	2022	\$	100.00		
<b>City</b> Harrisburg	State PA	<b>Zip Code (Plus 4)</b> 17101	Description of Expenditure Sponsorship						
Futor Crowd Total of France		PAGE TOTAL							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							100.00		

## 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 Re				Reportii	eporting Period					
DISANTO FOR SENATE			From:	11/29/2022 <b>To</b> :				12/31/2022		
						DATE			Outstanding Balance of Debt	
Name of Creditor					мо	DAY	YEAR			
John M DiSanto					1.10					
Mailing Address 6130 Minglewood Road					5	27	2015	\$	50,000.00	
City Harrisburg State Z		Zip Code (Pl	us 4)	Description of Debt						
	PA	17112		Loan to committee						
						DATE			Outstanding Balance of Debt	
Name of Creditor					МО	DAY	YEAR			
John M DiSanto					1-10		ILAK			
Mailing Address 6130 Minglewood Road				12	23	2015	\$	100,000.00		
City Harrisburg	 g	State	Zip Code (Pl	us 4)	Description of Debt					
		PA	17112		Loan to committee					
							DATE			
Name of Creditor					МО	DAY	YEAR			
John M DiSanto					PIO		ILAK			
Mailing Address 6130 Minglewood Road				12	30	2019	\$	150,000.00		
City Harrisburg	State Zip Code (Plus 4)			Description of Debt						
	PA 17112				Loan to committee					
		1	<u> </u>						PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	300,000.00		
l							-			