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 2019	90363			Repor Filed I		CAND	IDATE		СОМ	ITTEE	✓	LOBE	YIST	
Name of Filing C	Committee, Candid	late or L	obbyist:	F	riends	of An	n Marie	Mitchel	I						
Street Address:	172 Golfview	Drive													
City:	Ivyland						State:	PA			Zip Cod	le: 1	8974		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	E-	2.	30 DA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PE ELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPORT	7. X	Year 2022				NG METH CHECK (PAPER		\checkmark	DISKE	ГТЕ
Name of Office S	Sought by Candida	ite:	•				DATE	OF ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code
	,						МО	DAY	YE	AR	Ivanibei	Code			code
							1	1	8	2022		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY YEA	R			МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY	
Expenditures			11 29	20	22 T	о	1	2	31	2022	ļ				
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			8,9	98.26					
B. Total Moneta	ary Contributions	And Rec	eipts (From Sch	ed	ule I)	\$				0.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			8,9	98.26					
D. Total Expend	ditures (From Sch	edule II	I)			\$			4,0	28.19					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			4,9	70.07					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	ule	e II)	\$				0.00					
G. Unpaid Debt	ts And Obligations	(From	Schedule IV)			\$				0.00					
			AF	FΙ	DAVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign here	. If	this is	a Car	ndidate	report,	candi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached schedul	es 1	filed on	paper	or by ele	ctronic m	edium	, are to t	the best o	f my kno	wledge a	nd belie	ef , true
Sworn to and subs	cribed before me the	s	20						S	ignature	of Perso	n Submit	tting Rep	ort	
	Signate	ıra				<u>-</u>					Prin	ted Nam	e		
My Commission Ex	_										Ema	il			
	мо	D	AY Y	R				Ar	ea Cod	le	Daytim	e Telep	hone Nur	nber	
Part II- If this is	a report of a can	didate's	authorized Com	mi	ittee, C	andid	ate shal	l sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief th	is p	oolitical	comm	ittee has	not viola	ted an	y provis	ions of the	e act of I	lune 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this									s	ignature o	of Candid	late		
	day of					_					Dulm*-	d Name			
	Signature					_					Printe	d Name			
My Commission Exp	-										Ema	il			
	МО	D	AY Y	'n		_		Area	Code		Da	aytime 1	Telephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period						
Friends of Ann Marie Mitchell	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	(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

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 Candida	te		Reporting	Period			
			From:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

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.

Name of Filing Comm	ittee or Candidate	Repo	rting P	eriod			
		From	:		To	o:	
		I		DATE			AMOUNT
Full Name of Contributo)r		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
	State	Zip Code (Plus 4)				*	
, 							PAGE TOTAL

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	of Filing Committee or Candidate		Reporting Period							
			From:			То:				
				DA	TE		P	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR			0.00	
Mailing Address							- \$		0.00	
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTA	AL	
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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				Repo	orting Pe	riod			
				Fron	n:		To):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	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	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Per	iod	
Friends of Ann Marie Mitchell	From:	<u>11/29/2022</u> To:	<u>12/31/2022</u>
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 Candidate			Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
Friends of Ann Marie Mitchell	From	11/29/2022	То:	12/31/2022

					DATE			AMOUNT	
To Whom Paid				мо	DAY	YEAR			
Act Blue									
Mailing Address	PO Box 441146			12	5	2022	\$	47.50	
City West Some	erville	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		MA	021440031	Credit C	Card Fees				
To Whom Paid				мо	DAY	YEAR			
Act Blue				1410	DA1	ILAK			
Mailing Address	PO Box 441146			12	9	2022	\$	77.11	
City West Some	erville	State	Zip Code (Plus 4)	Description of Expenditure					
		MA	021440031	Credit C	Card Fees				
To Whom Paid				мо	DAY	YEAR			
Act Blue				1410	DA1	ILAK			
Mailing Address	PO Box 441146			12	12	2022	\$	7.00	
City West Some	West Somerville State Zip Code (Plus 4)			Descrip	tion of Exp	enditure			
		MA	021440031	Credit C	Card Fees				
To Whom Paid				МО	DAY	YEAR			
Ann Marie Mitchell				МО	DAT	TEAK			
Mailing Address	172 Golfview Dr			12	9	2022	\$	2,821.27	
City Ivyland		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	189741665	Repaym	ent of Deb	ot			
To Whom Paid				мо	DAY	YEAR			
Donald Mitchell				MO	DAT	TEAR			
Mailing Address	172 Golfview Dr			12	9	2022	\$	927.39	
City Ivyland		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	189741665	Repaym	ent of Deb	ot			
To Whom Paid				мо	DAY	YEAR			
Paragon Solutions				MO	JA1	TEAR			
Mailing Address	2141 E Broadway Ro	d Ste 202		12	2	2022	\$	25.00	
City Tempe	/ Tempe State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	<u> </u>		
		AZ	852821895	Credit C	Card Fees				
				_	_				

To Whom Paid			мо	DAY	YEAR			
TD Bank NA								
Mailing Address 1060 2Nd Street Pike			11	30	2022	\$	10.00	
City Richboro	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
	PA	189541805	Bank Fee					
To Whom Paid			мо	DAY	YEAR			
TD Bank NA								
Mailing Address 1060 2Nd Street Pike			12	30	2022	\$	10.00	
City Richboro	nboro State Zip Code (Plus 4) Description of Expenditu							
	PA	189541805	Bank Fee					
To Whom Paid			МО	DAY	YEAR			
USPS								
Mailing Address 851 Bustleton Pike			12	2	2022	\$	102.92	
City Richboro	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	189543035	Rental Fee					
							PAGE TOTAL	
Enter Grand Total of Expenditures	on Page 1, Report	Cover Page, Item D).			\$	4,028.19	