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 :	i on 2019	0363			Repo Filed		/:	CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST		
	Committee, Candida	ate or Lo	obbyist:			-		n Marie N	litchel								
Street Address: 172 Golfview Drive																	
City:	Ivyland							State:	PA			Zip Co	de: 18	974			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		30 DA PRIMA		POST-	3.		AMENDN REPORT		Yes	No) 🗸	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pre	E- 5.		30 da Elect		POST- 6.			TERMIN REPORT		Yes	No	° ▼	
report type)	ANNUAL REPORT	7. X	Year 2022					IG METHO				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candidat	te:						DATE O	FELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code	,
								мо	DAY	Y	AR						
								11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	Ł			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:	1	1 29	2	022	тс)	12		31	2022						
A. Amount Bro	ught Forward Fron	n Last Ro	eport				\$			8,9	998.26						
B. Total Monet	ary Contributions A	And Reco	eipts (From	1 Sche	dule I))	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			8,9	998.26	1					
D. Total Expen	ditures (From Sche	edule II	[)				\$			4,0)28.19						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$			4,9	70.07	_					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)		\$				0.00	4					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')			\$				0.00						
				AFF	IDAV	/IT	SE	CTION									
	s a Committee repo		-								-	-					
I swear (or affirm correct and complete) that this report, incl ete.	uding the	attached sc	hedule	s filed o	n pa	aper (or by elect	ronic me	edium	, are to f	the best o	of my knov	vledge	and beli	ef , true	1
Sworn to and subs	cribed before me this day of		20							S	Signature	e of Perso	n Submitt	ing Rep	oort		
	Signatur	re				_						Prin	ted Name				
My Commission E	-											Ema	il				
	мо	DA	AY	YR					Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee,	Ca	ndida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amendo	that to the best of med.	ıy knowle	edge and beli	ef this	politica	al c	ommi	ittee has n	ot viola	ted an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subso	ribed before me this										s	ignature	of Candida	ite			
	day of											Printe	ed Name				
My Commission Exp	Signature											Ema	nil				
	МО	DA	AY.	YR	l				Area	Code		D	aytime Te	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pag	e			
Name of Filing Committee or Candidate	Reporting	g Period		
Friends of Ann Marie Mitchell	From:	<u>11/29/202</u>	<u>2</u> To:	<u>12/31/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			-	
TOTAL for the Reporting	g 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	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			1	
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g 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
			1	

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 o	Reporting Period						
			From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Con	nmittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Γ	PAGE TOTAL

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

0.00

\$

PAGE 3

Use this Part to ite	mize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng peri	aggreg iod.			ʻom
Name of Filing Committee or Candidat	e		-	orting P	eriod			
			Fror	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2			\$	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 Ca	ndidate		Reporting) Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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						
			From:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	i	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description					1	1				
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL	
Linter Granu Total of Part E		i Suillilai y Page,	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 Perio	d	
Friends of Ann Marie Mitchell	From:	<u>11/29/2022</u> то:	<u>12/31/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Ro				Reporting Period					
	From: To:								
				DATE		АМО	UNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	,						
Description of Contribution:									
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate						Reporting Period					
							From: To:				
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State	Zip Code(Plus 4)									
Employer of Contributor						Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00
	1

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
Friends of Ann Marie Mitchell			From	rom <u>11/29/2022</u> To:			<u>12/31/2022</u>	
				AMOUNT				
To Whom Paid Act Blue			мо	DAY	YEAR			
Mailing Address PO Box 441146			12	5	2022	\$	47.50	
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure Credit Card Fees					
To Whom Paid Act Blue			мо	DAY	YEAR			
Mailing Address PO Box 441146			12	9	2022	\$	77.11	
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure Credit Card Fees					
To Whom Paid Act Blue			мо	DAY	YEAR			
Mailing Address PO Box 441146			12	12	2022	\$	7.00	
City West Somerville	State MA	Zip Code (Plus 4) 021440031	Description of Expenditure Credit Card Fees					
To Whom Paid Ann Marie Mitchell			мо	DAY	YEAR			
Mailing Address 172 Golfview Dr			12	9	2022	\$	2,821.27	
City Ivyland	State PA	Zip Code (Plus 4) 189741665	Description of Expenditure Repayment of Debt					
To Whom Paid Donald Mitchell			мо	DAY	YEAR			
Mailing Address 172 Golfview Dr			12	9	2022	\$	927.39	
City Ivyland	State PA	Zip Code (Plus 4) 189741665	Description of Expenditure Repayment of Debt					

To Whom Paid Paragon Solutions				мо	DAY	YEAR		
Mailing Address 2141 E Broadway Rd Ste 202			12	2	2022	\$	25.00	
City Tempe		State AZ	Zip Code (Plus 4) 852821895	Description of Expenditure Credit Card Fees				
To Whom Paid TD Bank NA			мо	DAY	YEAR			
Mailing Address 1060 2Nd Street Pike			11	30	2022	\$	10.00	
City Richboro		State PA	Zip Code (Plus 4) 189541805	Description of Expenditure Bank Fee				
To Whom Paid TD Bank NA			мо	DAY	YEAR			
Mailing Address 1060 2Nd Street Pike			12	30	2022	\$	10.00	
City Richboro		State PA	Zip Code (Plus 4) 189541805	Description of Expenditure Bank Fee				
To Whom Paid USPS				мо	DAY	YEAR		
Mailing Address 851 Bustleton Pike			12	2	2022	\$	102.92	
City Richboro		State PA	Zip Code (Plus 4) 189543035	Description of Expenditure Rental Fee				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					÷	PAGE TOTAL		
							\$	4,028.19