Campaign Finance Report

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

		•			-	1			_			·			
Filer Identificati Number :	ion	20220	0253			Repor Filed		CANDI	DATE	COM	IMITTEE	\checkmark	LOBI	BYIST	
Name of Filing C	Committee,	, Candida	ate or Lo	obbyist:		FRIEND	S OF	CHELSEA	OLIVE	R					
Street Address:	PO BO)X 273													
City:	CORRY	Y						State:	PA		Zip Co	de: 16	5407		
TYPE OF REPORT	6TH TUESE PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIMA		POST-	3.	AMEND REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESE PRE-ELECT		4.					AY F TION	POST-	5.	TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL F	REPORT	7. X	Year 2022				NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office Sought by Candidate:								DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY										25					
			//L //00					11	8	8 202	2	(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of		and	мо	DAY	YEAR	Ł		мо	DAY	YEAR	F	OR OFFIC	CE USE	ONLY	
Expenditures	s from:		-	11 29	2	022 1	0	12	3	1 202	2				
A. Amount Bro	ught Forwa	ard From	n Last R	eport			\$			24,416.5	5				
B. Total Monet	ary Contrib	outions A	And Rec	eipts (Fron	1 Sche	dule I)	\$		0.00						
C. Total Funds	Available ((Sum Of	Lines A	and B)			\$			24,416.5	5				
D. Total Expen	ditures (Fr	om Sche	edule II	I)			\$			705.63	L				
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$:	23,710.95	5				
F. Value Of In-	Kind Contr	ibutions	Receiv	ed (From S	chedu	le II)	\$			0.00)				
G. Unpaid Deb	ts And Obli	igations	(From S	Schedule IV	')		\$			0.00)				
					AFF	IDAV	T SE	CTION							
PART I - If this is		-	•	-					-		-				
I swear (or affirm) correct and comple		eport, inclu	uding the	e attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are to	o the best (of my know	wledge	and beli	ef , true
Sworn to and subs	cribed befor day of	re me this		20						Signatu	re of Perso	on Submit	ting Rep	oort	
		Signatur	'e				_				Pri	nted Name	9		
My Commission E	xpires						_				Ema	ail			
	M	10	D	AY	YR				Area	a Code	Daytir	ne Teleph	none Nu	mber	
Part II- If this is	a report o	of a cand	lidate's	authorized	Comn	nittee, 0	Candid	ate shall	sign hei	re.					
I swear (or affirm) No 320) as amendo		best of m	ıy knowle	edge and beli	ef this	political	comm	ittee has n	ot violate	ed any prov	isions of tl	ne act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before day of	e me this		20							Signature	of Candid	ate		
							_				Print	ed Name			
My Commission Exp		gnature					_				Ema	ail			
The commission exp							_								
		мо	D	AY.	YR				Area C	ode	C	aytime T	elephor	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 CHELSEA OLIVER	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)				
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
			I	

PAGE 3

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	Reporting Period						
			From:		То	:	
		ľ		DATE			AMOUNT
Full Name of Contributing Com	mittee		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

\$

5/4/2024 6:08:16 PM

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 Candidat	e			orting P	eriod	_				
	From: To:									
					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 Schedule I, Detailed Summary Page, Section 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 Candidate			Reporting	g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n 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					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

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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	Name of Filing Committee or Candidate			ting Perio	od			
			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 Suillillai 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	od	
FRIENDS OF CHELSEA OLIVER	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 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, 1		\$	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		АМС	DUNT
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.	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	5	0.00

0.00

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

Name of Filing Committee or Candidate					Repo	Reporting Period				
					Fron	n:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address					1				\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor					•	Occupa	l tion			
Employer Mailing Address/Prin Business	ncipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	Contribution
Enter Crand Total of Dart	C an Sahadula II	Te Kind	Contributi		tailar					PAGE TOTAL

	I	1		
Enter Grand Total of Part G on Schedule Summary Page, Section 3.	e II, In-Kind Co	ontributions Detai	led	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
FRIENDS OF CHELSEA OLIVER			From	<u>11/29</u>	<u>9/2022</u>	То:	<u>12/31/2022</u>	
				DATE			AMOUNT	
To Whom Paid Lauren Seliga			мо	DAY	YEAR			
Mailing Address 8207 Route 89			12	14	2022	\$	593.74	
City North East	State PA	Zip Code (Plus 4) 16428	Description of Expenditure Finance wages					
To Whom Paid Corry FCU			мо	DAY	YEAR			
Mailing Address 728 Worth Street			12	9	2022	\$	10.00	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Statement Fee					
To Whom Paid Gusto			мо	DAY	YEAR			
Mailing Address 525 20th Street			12	2	2022	\$	61.48	
City San Francisco	State CA	Zip Code (Plus 4) 94107	Description of Expenditure Payroll					
To Whom Paid Vantiv, LLC			мо	DAY	YEAR			
Mailing Address 8500 Governors Hill Drive			12	9	2022	\$	27.08	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure ActBlue fees					
To Whom Paid Vantiv, LLC			мо	DAY	YEAR			
Mailing Address 8500 Governors Hill Drive			12	12	2022	\$	0.93	
City Symmes Township	State OH	Zip Code (Plus 4) 45249		Description of Expenditure ActBlue fees				

To Whom Paid ActBlue, LLC			мо	DAY	YEAR		
Mailing Address 366 Summer Street			12	5	2022	\$	12.38
City Somerville	State	Zip Code (Plus 4)	Description of Expenditure				
	MA	02144	Fee				
	I						PAGE TOTAL
Enter Grand Total of Exp	enditures on Page 1, Rep	oort Cover Page, Item D.	-			\$	705.61
						L	