Campaign Finance Report

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

Filer Identificat	ion 2022	2C1586			Repo		CANE	DIDATE	\checkmark	CC	OMMITTE	E	LOB	BYIST		
Number :					Filed	-										
Name of Filing C	Committee, Candid	late or L	obbyist:		EUGEN	IE HUI	NIER									
Street Address:																
City:							State:				Zip Cod	Zip Code: 18040				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	POST- 3.			AMENDMENT REPORT?		No	Ŷ ▼	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5.	30 D ELEC	AY TION	POST-	6.			TERMINATION REPORT?		No	· 🗡	
report type)	ANNUAL REPORT	7. X	Year 2022				NG METI CHECK				PAPER		\checkmark	DISKE	TTE	
Name of Office S	⊥ Sought by Candida	te:					DATE	OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code	
							мо	DAY	YI	AR	138	STH	DEN	1	•	
REPRESENTATIVE IN THE GENERAL ASSEMBLY							1	1	8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)	
Summary of	Receipts and	мо	DAY	YEAR	2		мо	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		11 29	2	022	то	1	.2	31	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport	•	ľ	\$;		2,4	412.42	1					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	4	\$ 0.00									
C. Total Funds Available (Sum Of Lines A and B) \$ 2,412.42																
D. Total Expen	ditures (From Sch	edule II	I)			\$	5		1,0	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			5		1,4	12.42	4					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	4	5			0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		4	5			0.00						
				AFF	IDAV	IT SE		١								
PART I - If this i	s a Committee rep	ort, trea	surer sign	here.	If this i	is a Ca	ndidate	report,	candi	date si	gn here.					
I swear (or affirm correct and compl) that this report, inc ete.	luding the	e attached sc	hedule	s filed o	n paper	or by ele	ctronic m	edium	, are to	the best of	f my knov	vledge	and beli	ef , true	
Sworn to and subs	scribed before me thi day of	S	20						5	Signatur	e of Persor	n Submitt	ing Rep	oort		
						_					Print	ted Name				
My Commission E	Signatu xpires	ire									Emai	1				
-	мо	D	AY	YR				A	ea Coo	le		e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee,	Candio	late sha	ll sign h	ere.							7
I swear (or affirm) No 320) as amend) that to the best of r ed.	ny knowl	edge and beli	ief this	politica	l comn	nittee has	not viola	nted an	y provis	sions of the	e act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subso	cribed before me this									S	Signature o	of Candida	ite			
	day of										Printe	d Name				
	Signature							Printed Name								
My Commission Exp	-										Emai	il				
	мо	D	AY	YR	ł	_		Area	Code		Da	nytime Te	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** EUGENE HUNTER From: <u>11/29/2022</u> **To:** 12/31/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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.

PART A

Name of Filing Committee or Candidate			Re	porting l	Period			
Fi			Fro	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				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

5/4/2024 4:56:04 AM

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 Can	Name of Filing Committee or Candidate			Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			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				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	Name of Filing Committee or Candidate			ing Perio	d			
Fr			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 Schedu	ule T. Detailed Summ	nary Page	Section	4			PAGE TO	ΓAL
		iiai y i uge,	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	
EUGENE HUNTER	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 R			Reporting	g Period				
F				From: To:				
				DATE		АМО	UNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address	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				Rep	oorting P	eriod				
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	ion			
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption	of Contribution	
<u> </u>		•				-				

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period						
EUGENE HUNTER	From	<u>11/29</u>	То:	<u>12/31/2022</u>								
				DATE AM								
To Whom Paid UU JUSTICE PA				DAY	YEAR							
Mailing Address 1280 CLOVER LANE			12	20	2022	\$	1,000.00					
City HARRISBURG	State PA	Zip Code (Plus 4) 17113	· ·	otion of Exp								
							PAGE TOTAL					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	1,000.00					