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 :	ion 2022	C0523			Repo Filed		CA	NDI	DATE	✓	CC	OMMITTE		LOB	BYIST	Γ		
	Committee, Candid	ate or L	obbyist:			-	MORKO	DSEK										
Street Address:			-															
City:							State:					Zip Cod	Zip Code: 15146					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	F	POST-	3.		AMENDMENT REPORT?		Yes	No	D	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣- 5.		DAY CTION	POST- 6.			TERMINATION REPORT?		Yes	No)	\checkmark		
report type)	ANNUAL REPORT	7. X	Year 2022				.ING M) CHEC					PAPER		\checkmark	DISKI	TTE		
Name of Office S	⊥ Sought by Candida	te:					DAT	ΓΕ Ο	F ELE	СТІОІ	N	District Number	Office Code	Par	ty Code	Cour		
DEDDECENTAT			EMDLY				мо		DAY	YE	AR	25	STH	DEN	1			
REPRESENTAL	IVE IN THE GENER	KAL ASS	EMBLI					11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	2		мо		DAY	YE	AR	FO	R OFFIC	E USE	ONLY			
Expenditures	s from:		11 29	2	022	то		12		31	2022							
A. Amount Bro	ught Forward Fror	n Last R	eport				\$				0.00							
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I))	\$		0.00									
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$				0.00							
D. Total Expen	ditures (From Sch	edule II	I)				\$				0.00							
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				0.00							
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$				0.00							
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00							
				AFF	IDAV	'IT S	ECTI	ON										
	s a Committee rep																	
I swear (or affirm correct and compl) that this report, inc ete.	luding the	e attached sc	hedule	s filed o	n pape	er or by	electi	ronic m	edium,	are to	the best of	my know	vledge	and bel	ief , tr	ue	
Sworn to and subs	cribed before me this day of	5	20							Si	gnatur	e of Persor	Submitt	ing Rep	oort		-	
		re				_						Print	ed Name				-	
My Commission E	-	-										Emai	I				_	
	мо	D	AY	YR					Are	ea Code	•	Daytim	e Teleph	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized	Com	nittee,	Cand	idate s	hall	sign he	ere.								
I swear (or affirm) No 320) as amend) that to the best of r ed.	ny knowl	edge and beli	ief this	politica	al com	mittee	has n	ot viola	ed any	r provis	ions of the	act of Ju	ine 3,1	937 (P.I	L. 133	з,	
Sworn to and subso	ribed before me this day of		20								s	ignature o	f Candida	ite			-	
												Printe	d Name				-	
My Commission Exp	Signature bires											Emai	1				-	
	мо	D	AY	YR	2				Area	Code		Da	ytime Te	elephor	e Numl	per	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BRANDON MORKOSEK	From:	<u>11/29/202</u>	2 <u>2</u> To:	<u>12/31/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	J 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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	J 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 Candidate				Reporting Period						
·					DATE AMOU					
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00		

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 Candida	te		Rep	orting P	eriod				
			Fror	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City	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 Period						
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary 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					
Fi				From:			To:		
			D	ATE		AM	OUNT		
			мо	DAY	YEAR	\$	0.00		
State	Zip Code (Plu	s 4)							
•			Occupation						
ce of Business	City			State		Zip Code	(Plus 4)		
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00		
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code		

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: To:						
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.0	00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·								
		_	.					PAGE TOTAL	
Enter Grand Total of Part E on Schedu	lie 1, Detailed Sumn	nary Page,	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 Perio	od	
BRANDON MORKOSEK	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 PART	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 Re			Reporting	Period	·			
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

Name of Filing Committee or Candidate				Reporting Period					
						То:			
					DATE	AMOUNT			
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address			-				\$ 0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor				Occupa	ation				
Employer Mailing Address/Principal Plac	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
	From			То:					
		DATE			AMOUNT				
To Whom Paid	To Whom Paid								
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)				tion of Exp	enditure				
Enter Grand Tatal of Evnanditures	<u> </u>				PAGE TOTAL				
Enter Grand Total of Expenditures of	m Page 1, Report C	lover Page, Item L				\$	0.00		