### **Campaign Finance Report**

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

Filer Identification 20220182 Report Filed By: CANDIDATE COMMITTEE LOBBYIST																		
Name of Filing C	Committee, Candi	date or L	obbyist:	F	FRIE	END	S OF	ANNA I	LOF	PEZ								
Street Address:	2575 COUNT	RY CLUE	BDRIVE															
City:	TOBYHANNA							State:		PA			Zip Cod	le: 18	3466			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	RE-	2	2.	30 DA PRIMA		P	OST-	3.			AMENDMENT Yes N REPORT?			•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P ELECTION	RE-	- 5	5.	30 DA ELECT		P	OST-	6.		TERMINATION Yes REPORT?			No	•	<b>/</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2022					IG MET					PAPER	PER DISKETTE				
Name of Office S	Sought by Candida	nte:	•					DATE	DATE OF ELECTION District Office Number Code						ty Code	Coun		
	,							МО		DAY	YE	AR	Number	code	DEM	1	couc	
								1	11		8	2022		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY YE	AR				МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	6 Trom:		11 29	20	)22	Т	0	:	12	3	31	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$					0.00						
B. Total Monet	ary Contributions	And Rec	eipts (From Scl	hec	dule	ı)	\$					0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$					0.00						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$					0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	dul	e II	()	\$					0.00						
G. Unpaid Debt	s And Obligation	(From	Schedule IV)				\$					0.00			1			
			AF	13	IDA	۱۷۲	T SE	CTIO	N									
	s a Committee rep		_									_						
I swear (or affirm) correct and comple	) that this report, inc ete.	cluding the	e attached schedu	iles	filed	d on	paper (	or by ele	ectr	onic me	edium	are to t	he best o	f my kno	wledge a	and belie	ef , tru	1e
Sworn to and subs	cribed before me th day of	is	20						-		s	ignature	of Perso	1 Submit	ting Rep	ort		_
			-				<b>-</b>		-				Prin	ted Name	e			-
My Commission Ex	Signat cpires	иге							-				Emai	i				-
	мо	D	AY Y	<b>Y</b> R			_		-	Are	a Cod	e	Daytim	e Teleph	none Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized Con	nm	itte	e, C	andida	ate sha	ıll s	ign he	re.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief tl	his	polit	tical	commi	ittee has	s no	t violat	ed an	y provisi	ions of the	e act of J	une 3,19	937 (P.L.	1333	3,
Sworn to and subsc	ribed before me this	:										Si	ignature o	f Candid	ate			-
	day of						_						D=!4	d New				-
	Signature						-						Printe	d Name				
My Commission Exp	<del>-</del>								-				Ema	il				_
	МО	D	AY	YR			-		•	Area	Code		Da	ytime T	elephon	e Numbe	er	۱-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF ANNA LOPEZ	From:	11/29/202	<u>2</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	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	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 C	Name of Filing Committee or Candidate				Reporting Period					
		Fi	rom:		То	:				
		•		DATE			AMOUNT			
Full Name of Contributing Comm	ittee		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.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee	Rep							
			Fro	m:		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.

#### **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	ame of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00	
Mailing Address							7		0.00	
City	State	Zip Cod	e (Plus 4)							
							-	PAGE TO	TAL	
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	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	Name of Filing Committee or Candidate					riod			
					From:				
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	p Code (Plus	s <b>4</b> )					
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 Sumr	mary 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:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				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 Peri	od	
FRIENDS OF ANNA LOPEZ	From:	11/29/2022 <b>To:</b>	12/31/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	र	
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					
F						То:			
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						<b>7</b> \$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•	•				
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL		
Section 2.						\$	0.00		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.	<b></b>									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period							
F						То:		
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
Enter Crand Total of Evnanditures	on Dogg 1 Donowh (	Cover Dage Item F					PAGE TOTAL	
Enter Grand Total of Expenditures	on Page 1, Report C	Lover Faye, Item L	<b>,</b> .			\$	0.00	