Campaign Finance Report

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

Filer Identificat Number :	ion 2022	C0510			Repo Filed		· :	CAND	IDATE	✓	C	OMMITTE	E	LOB	BYIST		
	Committee, Candid	ate or L	obbyist:			-		TTEIN									
Street Address:																	
City:							State:				Zip Cod	Zip Code: 18045					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.						AMENDM REPORT?	Yes	No	 Image: A start of the start of			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- 5.		30 DAY POST- 6. ELECTION				TERMINA REPORT?	TERMINATION Yes VN0 REPORT?					
report type)	ANNUAL REPORT	7. X	Year 2022					IG METH CHECK O				PAPER		\checkmark	DISKE	TTE	
Name of Office	L Sought by Candida	te:						DATE C	OF ELE	СТІС	DN	District Number	Office Code	Par	ty Code	County Code	
CENATOD IN T				мо	DAY	Y	EAR	18	STS	REF	>						
SENATOR IN THE GENERAL ASSEMBLY								11		8	2022]	(SEE INS	TRUCTI	ONS FOR	CODES)	
Summary of Receipts and MO DAY YEAR								мо	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		11 29	2	022	то)	12	2	31	2022						
A. Amount Bro	ought Forward From	n Last R	leport				\$				0.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				0.00						
D. Total Expen	ditures (From Sch	edule II	1)				\$				0.00						
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$			9,2	257.77]					
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	IDA	/IT	SE	CTION									
PART I - If this i	s a Committee rep	ort, trea	surer sign	here.	If this	is a	Car	didate r	eport,	candi	date si	gn here.					
I swear (or affirm correct and compl) that this report, incl lete.	uding the	e attached sc	hedule	s filed o	on pa	aper	or by elect	tronic m	edium	ı, are to	the best of	my know	vledge	and beli	ef , true	
Sworn to and subs	scribed before me this day of	5	20							:	Signatur	e of Person	Submitt	ing Rej	port		
	Signatu	re				_						Print	ed Name				
My Commission E	-											Emai	I				
	мо	D	AY	YR					Ar	ea Co	de	Daytime	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Car	ndida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowl	edge and beli	ef this	s politic	al co	ommi	ittee has r	not viola	ted aı	ny provis	ions of the	act of Ju	ine 3,1	937 (P.L	1333,	
Sworn to and subse	cribed before me this day of		20								S	ignature o	f Candida	ite			
[_] [_]												Printee	d Name				
My Commission Ex	Signature											Emai	1				
	мо		• • •						A	Co.d.			utina T-	lonho	No Normalia		
	MO	D	AY	YR	C C				Area	Code		Da	ytime Te	reprior	ie numb	CI	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** JOHN MERHOTTEIN 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) 9,257.77 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 9,257.77 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate			Re	porting l	Period			
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

\$

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		Rep	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	Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Commit	ttee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						ſ		PAGE TOTAL		
Enter Grand Total of Part C on	Schedule I, Detail	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		АМС	DUNT
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 Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	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	e		Report	ing Perio	bd				
JOHN MERHOTTEIN			From:	From: <u>11/29/2022</u> To			<u>12/31/2022</u>		
				D	ATE			AMOUNT	
Full Name JOHN MERHOTTEIN				мо	DAY	YEAR			
Mailing Address 1903 VINTAGE DR	RIVE						\$	9,257.77	
City EASTON	State PA	Zip Code (18045	Plus 4)	12	15	202	2		
Receipt Description LOAN REPAY	MENT - ALL OTHER LO	ANS FORGIV	ΈN.						
Enter Grand Total of Part E on Sched	lule I. Detailed Sum	mary Page.	Section	4.				PAGE TOTAL	
		, i uge,	Section				\$	9,257.77	

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	
JOHN MERHOTTEIN	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 Re			Reporting	g Period			
F						То:	
				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 Schedule II, In-Kind Contributions Detai Section 2.			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					Repo	orting P	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

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	Name of Filing Committee or Candidate							
						То:		
				DATE			AMOUNT	
To Whom Paid				DAY	YEAR			
Mailing Address						\$	0.00	
City State Zip Code (Plus 4)			Descrij	tion of Ex	penditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL	
	on rage 1, Report C	over rage, item i				\$	0.00	