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 2019	0363			Repor Filed		CANDI	DATE		СОМІ	MITTEE	<	LOB	BYIST		
	Committee, Candid	ate or Lo	bbyist:			-	NN MARI		NDS	OF						
Street Address: PO BOX 261																
City:	RICHBORO						State: PA Zip Code: 18954-02					241				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		2ND FRIDA PRIMARY	2ND FRIDAY PRE- PRIMARY 2.X 3				POST- 3.			AMENDN REPORT		Yes	N	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY I TION	POST- 6.			TERMIN/ REPORT		Yes	N	0	\checkmark
report type)	ANNUAL REPORT	7.	Year 2023				NG METHO CHECK O				PAPER		\checkmark	DISK	ETTE	
Name of Office Sought by Candidate: DAT							DATE O	OF ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Cour Code	
							мо	DAY	YE	AR						
							11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Expenditures	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	R OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	2	023	ГО	5	5	1	2023						
A. Amount Bro	ught Forward Fron	n Last Re	eport			\$;		,	70.07						
B. Total Monet	ary Contributions	And Rece	eipts (Fron	n Sche	dule I)	\$	5		6	578.40						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5		5,6	648.47						
D. Total Expen	ditures (From Sche	edule III)			\$	5		2,0	24.24						
E. Ending Cash	Balance (Subtract	t Line D F	rom Line	C)		4	5		3,6	24.23						
F. Value Of In-	Kind Contributions	Receive	d (From S	chedu	le II)	\$	5			0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	/)		\$	5			0.00						
				AFF	IDAV	IT SE	CTION									
	s a Committee repo	•	-					•			-					
correct and compl) that this report, incl ete.	uding the	attached sc	neaule	s filed of	i paper	or by elect	tronic me	aium,	, are to	the best o	т ту кпоч	vieage	and be	ier, tr	ue
Sworn to and subs	scribed before me this day of 	; 	20			_			S	ignatur	e of Perso	n Submitt	ing Rej	oort		_
	Signatu	re				_					Prin	ted Name				_
My Commission E	xpires										Ema	il				
	МО	DA	Y	YR				Are	a Cod	e	Daytin	ie Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, (Candic	late shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of m ed.	ny knowle	dge and beli	ief this	politica	l comn	nittee has n	not violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	cribed before me this day of		20							s	ignature (of Candida	ite			-
			20			_					Printe	d Name				-
My Commission Exp	Signature					_					Ema	il				_
						_										_
	мо	DA	Y	YR				Area (Code		D	aytime Te	elephor	e Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pag	je			
Name of Filing Committee or Candidate	Reporting	g Period		
MITCHELL, ANN MARIE FRIENDS OF	From:	<u>1/1/202</u>	2 <u>3</u> To:	<u>5/1/2023</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			-	
TOTAL for the Reportion	ıg 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 Reportin	ng Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			1	
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reportin	ng Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)			
TOTAL for the Reportin	ıg Period	(4)	\$	678.40
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover F			\$	678.40
	aye, meni D.	,		

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					Reporting 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

\$

PAGE 3

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 S	Schedule I, Detail	ed Summary Pag	e, Se	ection 2	<u>.</u>		\$	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				ng 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				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 Reporti				orting Period					
MITCHELL, ANN MARIE FRIENDS OF From:					<u>1/1/202</u>	<u>3</u> To:	<u>5/1/2023</u>		
				D	ATE			AMOUNT	
Full Name NGPVan, Inc				мо	DAY	YEAR			
Mailing Address 1445 New Yo	ork Ave, NW Ste 200						\$	678.40	
City Washington	State DC	Zip Code (20005	Plus 4)	2	2	202:	3		
Receipt Description Refund	Receipt Description Refund of Campaign Software Fees								
Enter Grand Total of Part E on S	Schedule I. Detailed	Summary Page	Section	4				PAGE TOTAL	
	Jenerale 1, Detailed	ounnury ruge,	Section				\$	678.40	

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 Period		
MITCHELL, ANN MARIE FRIENDS OF	From:	<u>1/1/2023</u> то:	<u>5/1/2023</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	「 F)		
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				g Period			
	From:			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 Sched 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						Reporting Period					
						From: To:					
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(Plus 4)							
Employer of Contributor						Occupat	tion				
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	ption of	Contribution	

		1		
Enter Grand Total of Part G on Schedule I	I. In-Kind Contril	butions Detail	ed	PAGE TOTAL
Summary Page, Section 3.	_,			0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
MITCHELL, ANN MARIE FRIENDS OF			From	<u>1/:</u>	<u>1/2023</u>	То:	<u>5/1/2023</u>
			DATE				AMOUNT
To Whom Paid NGPVan, Inc			мо	DAY	YEAR		
Mailing Address 1445 New York Ave, NW Ste 200			1	3	2023	\$	339.20
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure Campaign Software Fees				
To Whom Paid NGPVan, Inc			мо	DAY	YEAR		
Mailing Address 1445 New York Ave, NW Ste 200			1	6	2023	\$	339.20
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure Campaign Software Fees				
To Whom Paid NGPVan, Inc			мо	DAY	YEAR		
Mailing Address 1445 New York Ave	, NW Ste 200		1	16	2023	\$	678.40
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure Campaign Software Fees				
To Whom Paid Paragon Solutions			мо	DAY	YEAR		
Mailing Address 2141 E Broadway Rd Ste 202			1	3	2023	\$	25.00
City Tempe	State AZ	Zip Code (Plus 4) 85282	Description of Expenditure Credit Card Fees				
To Whom Paid Paragon Solutions			мо	DAY	YEAR		
Mailing Address 2141 E Broadway Rd Ste 202			2	2	2023	\$	25.00
City Tempe	State AZ	Zip Code (Plus 4) 85282	Description of Expenditure Credit Card Fees				

							-		
To Whom Paid Paragon Solutions				мо	DAY	YEAR			
Mailing Address 2141 E Broadway Rd Ste 202				3	2	2023	\$		25.00
City Tempe		State	Zip Code (Plus 4)	Descrin	tion of Ex	l Denditure	1		
AZ 85282				Description of Expenditure Credit Card Fees					
To Whom Paid Paragon Solutions				мо	DAY	YEAR			
Mailing Address 2141 E Broadway Rd Ste 202			4	3	2023	\$		25.00	
City Tempe St		State	Zip Code (Plus 4)	Description of Expenditure					
		AZ	85282	Credit Card Fees					
To Whom Paid ActBlue			мо	DAY	YEAR				
Mailing Address PO Box 441146			1	10	2023	\$		1.34	
City West Som	nerville	State	Zip Code (Plus 4)	Description of Expenditure					
MA 02144				Credit Card Fees					
				·					
To Whom Paid ActBlue				мо	DAY	YEAR			
	PO Box 441146	<u> </u>		мо 2	DAY 9	YEAR 2023	\$		0.60
ActBlue Mailing Address		State	Zip Code (Plus 4)	2	9	2023			0.60
ActBlue Mailing Address		State MA	Zip Code (Plus 4) 02144	2 Descrip		2023			0.60
ActBlue Mailing Address				2 Descrip	9 Detion of Exp	2023			0.60
ActBlue Mailing Address City West Som To Whom Paid				2 Descrip Credit (9 ption of Exp Card Fees	2023 penditure			0.60
ActBlue Mailing Address City West Som To Whom Paid ActBlue Mailing Address	PO Box 441146			2 Descrip Credit (MO 3	9 otion of Exp Card Fees DAY	2023 penditure YEAR 2023	\$		
ActBlue Mailing Address City West Som To Whom Paid ActBlue Mailing Address	PO Box 441146	МА	02144	2 Descrip Credit (MO 3 Descrip	9 Dition of Exp Card Fees DAY 9	2023 penditure YEAR 2023	\$		
ActBlue Mailing Address City West Som To Whom Paid ActBlue Mailing Address	PO Box 441146	MA	02144 Zip Code (Plus 4)	2 Descrip Credit (MO 3 Descrip	9 ption of Exp Card Fees DAY 9 ption of Exp	2023 penditure YEAR 2023	\$		
ActBlue Mailing Address City West Som To Whom Paid ActBlue Mailing Address City West Som To Whom Paid	PO Box 441146	MA State MA	02144 Zip Code (Plus 4)	2 Descrip Credit (MO 3 Descrip Credit (9 ption of Exp Card Fees DAY 9 ption of Exp Card Fees	2023 penditure YEAR 2023 penditure	\$		
ActBlue Mailing Address City West Som To Whom Paid ActBlue Mailing Address City West Som To Whom Paid TD Bank NA	PO Box 441146	MA State MA	02144 Zip Code (Plus 4)	2 Descrip Credit (MO 3 Descrip Credit (MO	9 ption of Exp Card Fees DAY 9 ption of Exp Card Fees DAY	2023 penditure YEAR 2023 penditure YEAR 2023	\$		0.50

To Whom Paid TD Bank NA				мо	DAY	YEAR				
Mailing Address 1060 2nd Street Pike				2	28	2023	\$	10.00		
City Richboro		State Zip Code (Plus 4)		Descrip	tion of Ex	, Denditure				
PA 18954				Bank Fees						
To Whom Paid				мо	DAY	YEAR				
TD Bank NA										
Mailing Address 1060 2nd Street Pike			3	31	2023	\$	10.00			
City Richboro		State	Zip Code (Plus 4)	Description of Exp		l Denditure				
Kichboro	PA 18954				Bank Fees					
To Whom Paid TD Bank NA			мо	DAY	YEAR					
Mailing Address 1060 2nd Street Pike			4	28	2023	\$	10.00			
City Richboro		State	Zip Code (Plus 4)	Description of Expenditure						
	PA 18954				Bank Fees					
To Whom Paid Elect Jarrett Smith			мо	DAY	YEAR					
Mailing Address PO Box 23762			1	23	2023	\$	100.00			
City Philadelph	nia	State	Zip Code (Plus 4)	Description of Expenditure						
PA 19143				Contribution						
To Whom Paid Kris Ballerini			мо	DAY	YEAR					
Mailing Address 65 Dispatch Dr			1	25	2023	\$	250.00			
City Washington's Crossing		State	Zip Code (Plus 4)	Description of Expendi		, penditure				
PA 18977				Contribution						
To Whom Paid Lauren Bambach			мо	DAY	YEAR					
Mailing Address 5825 Audubon Manor Blvd			3	9	2023	\$	175.00			
City Lithia	City Lithia Sta		Zip Code (Plus 4)	Description of Expenditure						
FL 33547				Staff Expenses						
				-				PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	2,024.24			