### **Campaign Finance Report**

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

| Filer Identificati<br>Number :            | on 200                         | 8016        |                        |         | Repo<br>Filed |       | · :      | CAND               | IDA   | TE     |             | COMN      | 1ITTEE             | <b>✓</b>       | LOBI         | BYIST   |          |              |
|---|--------------------------------|-------------|------------------------|---------|---------------|-------|----------|--------------------|-------|--------|-------------|-----------|--------------------|----------------|--------------|---------|----------|--------------|
| Name of Filing C                          | ommittee, Candi                | date or L   | obbyist:               |         | STEPI         | HEN   | S, T     | ODD FF             | RIEN  | IDS C  | OF IN       | IC        |                    |                |              |         |          |              |
| Street Address:                           | 212 HAMPTO                     | N RD        |                        |         |               |       |          |                    |       |        |             |           |                    |                |              |         |          |              |
| City:                                     | HATBORO                        |             |                        |         |               |       |          | State:             | P     | A      |             |           | Zip Cod            | le: 19         | 040          |         |          |              |
| TYPE OF<br>REPORT                         | 6TH TUESDAY<br>PRE-PRIMARY     | 1.          | 2ND FRIDA'<br>PRIMARY  | Y PRE-  | 2.            |       | 0 DA     |                    | POS   | ST-    | 3. <b>X</b> |           | AMENDM<br>REPORT?  |                | Yes          | N       | 0        | <b>\</b>     |
| (place X to<br>the right of               | 6TH TUESDAY<br>PRE-ELECTION    | 4.          | 2ND FRIDA'<br>ELECTION | Y PRE-  | - 5.          |       | 0 DA     |                    | POS   | ST-    | 6.          |           | TERMINA<br>REPORT? |                | Yes          | N       | 0        | $\checkmark$ |
| report type)                              | ANNUAL REPORT                  | 7.          | <b>Year</b> 2023       |         |               |       |          | IG METH<br>CHECK ( |       |        |             |           | PAPER              |                | $\checkmark$ | DISK    | ETTE     |              |
| Name of Office S                          | ought by Candid                | ate:        | -                      |         |               |       |          | DATE               | OF I  | ELEC   | TIO         | N         | District<br>Number | Office<br>Code | Par          | ty Code | Cour     |              |
| JUDGE OF THE                              | MUNICIDAL COL                  | IDT         |                        |         |               |       |          | МО                 | D     | AY     | YE          | AR        | 38                 | MCJ            | D/R          |         | 46       |              |
| JUDGE OF THE                              | MUNICIPAL COU                  | IK I        |                        |         |               |       |          | 1                  | 1     |        | 7           | 2023      |                    | (SEE INS       | TRUCTI       | ONS FOR | CODES    | )            |
| Summary of                                |                                | МО          | DAY                    | YEAR    |               |       |          | МО                 | D.    | AY     | YE          | AR        | FO                 | R OFFIC        | E USE        | ONLY    |          |              |
| Expenditures                              | trom:                          |             | 5 2                    | 20      | )23           | то    | <u> </u> |                    | 6     |        | 5           | 2023      |                    |                |              |         |          |              |
| A. Amount Bro                             | ught Forward Fro               | m Last R    | eport                  |         |               |       | \$       |                    |       |        | 8,5         | 97.83     |                    |                |              |         |          |              |
| B. Total Moneta                           | ary Contributions              | And Rec     | eipts (From            | Sched   | lule I        | ()    | \$       |                    |       |        |             | 0.00      |                    |                |              |         |          |              |
| C. Total Funds                            | Available (Sum C               | f Lines A   | and B)                 |         |               |       | \$       |                    |       |        | 8,5         | 97.83     |                    |                |              |         |          |              |
| D. Total Expend                           | ditures (From Scl              | nedule II   | I)                     |         |               |       | \$       |                    |       |        | 2,9         | 13.72     |                    |                |              |         |          |              |
| E. Ending Cash                            | C)                             |             |                        | \$      |               |       |          | 5,6                | 84.11 |        |             |           |                    |                |              |         |          |              |
| F. Value Of In-                           | Kind Contribution              | s Receiv    | ed (From S             | chedul  | e II)         |       | \$       |                    |       |        |             | 0.00      |                    |                |              |         |          |              |
| G. Unpaid Debt                            | s And Obligation               | s (From S   | Schedule IV            | )       |               |       | \$       |                    |       |        |             | 0.00      |                    |                |              |         |          |              |
|   |                                |             |                        | AFF]    | [DA\          | /IT   | SE       | CTION              |       |        |             |           |                    |                |              |         |          |              |
| PART I - If this is                       |                                |             | _                      |         |               |       |          |                    | -     | -      |             | _         |                    |                |              |         |          |              |
| I swear (or affirm)<br>correct and comple | that this report, in<br>ete.   | cluding the | e attached scl         | hedules | filed o       | on pa | aper (   | or by elec         | ctron | ic me  | dium,       | are to t  | he best o          | f my knov      | /ledge       | and be  | ief , tr | ue           |
| Sworn to and subs                         | cribed before me th<br>day of  | is          | 20                     |         |               |       |          |                    | _     |        | S           | ignature  | of Perso           | 1 Submitt      | ing Rep      | ort     |          | _            |
|   | Signat                         | ure         |                        |         |               | _     |          |                    |       |        |             |           | Prin               | ted Name       |              |         |          | -            |
| My Commission Ex                          | pires                          |             |                        |         |               |       |          |                    |       |        |             |           | Emai               | I              |              |         |          |              |
|   | МО                             | D           | AY                     | YR      |               |       |          |                    |       | Are    | a Cod       | e         | Daytim             | e Teleph       | one Nu       | mber    |          |              |
| Part II- If this is                       | a report of a car              | ididate's   | authorized             | Comm    | ittee,        | , Car | ndida    | ate shal           | l sig | n he   | re.         |           |                    |                |              |         |          |              |
| I swear (or affirm)<br>No 320) as amende  | that to the best of<br>ed.     | my knowl    | edge and beli          | ef this | politic       | al co | ommi     | ittee has          | not   | violat | ed an       | y provisi | ions of the        | e act of Ju    | ine 3,1      | 937 (P. | L. 133   | 3,           |
| Sworn to and subsc                        | ribed before me this<br>day of | 5           | 30                     |         |               |       |          |                    | _     |        |             | Si        | ignature o         | of Candida     | te           |         |          | _            |
|   | <u> </u>                       |             |                        |         |               |       |          |                    | _     |        |             |           | Printe             | d Name         |              |         |          | -            |
|   | Signature                      |             |                        |         |               | _     |          |                    | _     |        |             |           |                    |                |              |         |          | _            |
| My Commission Exp                         | ires                           |             |                        |         |               |       |          |                    |       |        |             |           | Emai               | il             |              |         |          |              |
|   | мо                             | D           | AY                     | YR      |               |       |          |                    | _     | Area C | ode         |           | Da                 | ytime Te       | lephor       | e Num   | ber      | -            |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period       |              |          |
|--|-----------|----------------|--------------|----------|
| STEPHENS, TODD FRIENDS OF INC  | From:     | <u>5/2/202</u> | <u>3</u> To: | 6/5/2023 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |                |              |          |
| TOTAL for the Reporting  | g 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  | g 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  | g Period  | (3)            | \$           | 0.00     |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |                |              |          |
| TOTAL for the Reporting  | g 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

|                           | his Part to itemize onl<br>with an aggregate val | -                 |     |         | -      |      |    |            |
|---------------------------|--|-------------------|-----|---------|--------|------|----|------------|
| Name of Filing Comm       | ittee or Candidate                               |                   | Re  | porting | Period |      |    |            |
|                           |  |                   | Fre | om:     |        | То   | :  |            |
|                           |  | 1                 |     |         | DATE   |      |    | AMOUNT     |
| Full Name of Contribution | ng Committee                                     |                   |     | 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

## 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 Cand | idate |                | Re  | porting P | eriod |      |    |        |
|----------------------------------|-------|----------------|-----|-----------|-------|------|----|--------|
|                                  |       |                | Fro | om:       |       | To   | ): |        |
|                                  |       |                |     |           | DATE  |      |    | AMOUNT |
| Full Name of Contributor         |       |                |     | МО        | DAY   | YEAR |    |        |
| Mailing Address                  |       |                |     |           |       |      | \$ | 0.00   |
| City                             | State | Zip Code (Plus | 4)  |           |       |      |    |        |
|                                  | _     |                |     |           |       |      |    |        |

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL \$**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 Candi | date               |               | Reporting   | Period |     |      |    |            |
|-----------------------------------|--------------------|---------------|-------------|--------|-----|------|----|------------|
|                                   |                    |               | From:       |        |     | То:  |    |            |
|                                   |                    |               |             | DA     | TE  |      | Α  | MOUNT      |
| Full Name of Contributing Commit  | tee                |               |             | мо     | DAY | YEAR |    |            |
| Mailing Address                   |                    |               |             |        |     |      | \$ | 0.00       |
| City                              | State              | Zip Cod       | e (Plus 4)  |        |     |      |    |            |
|                                   |                    |               |             |        |     |      |    | PAGE TOTAL |
| Enter Grand Total of Part C on S  | Schedule I, Detail | ed Summary 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              | •             |           |              | Rep     | orting Pe | riod  |      |         |             |
|--|---------------|-----------|--------------|---------|-----------|-------|------|---------|-------------|
|  |               |           |              | Fror    | n:        |       | То   | ):      |             |
|  |               |           |              |         | D         | ATE   |      | A       | MOUNT       |
| Full Name of Contributor                           |               |           |              |         | мо        | DAY   | YEAR |         |             |
| Mailing<br>Address                                 |               |           |              |         |           |       |      | \$      | 0.00        |
| City   | State         | Zi        | p Code (Plus | 4)      |           |       |      |         |             |
| Employer Name                                      | •             | •         |              |         | Occupa    | tion  |      |         |             |
| Employer Mailing Address/Principal Pla<br>Business | ce of         |           | City         |         |           | State |      | Zip Cod | le (Plus 4) |
| Enter Grand Total of Part C on Sch                 | edule I, Deta | iled Sumr | mary Page,   | Section | on 3.     |       |      | P       | O.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  | ting Perio | bd  |      |     |         |
|-------------------------------|--------------------------|------------------|---------|------------|-----|------|-----|---------|
|                               |                          |                  | From:   |            |     | To:  |     |         |
|                               |                          |                  |         | D          | ATE |      | AM  | OUNT    |
| Full Name                     |                          |                  |         | МО         | DAY | YEAR |     |         |
| Mailing Address               |                          |                  |         |            |     |      | \$  | 0.00    |
| City                          | State                    | Zip Code (       | Plus 4) |            |     |      |     |         |
| Receipt Description           | •                        | •                |         | •          | •   | •    | _   |         |
| Enter Grand Total of Part E o | on Schedule I. Detaile   | d Summary Page   | Section | 4          |     |      | PAG | E TOTAL |
|                               | m deficación 1, detailes | z Sammary r age, | occion  | ••         |     |      | \$  | 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 Period |                            |                 |
|--|------------------|----------------------------|-----------------|
| STEPHENS, TODD FRIENDS OF INC  | From:            | <u>5/2/2023</u> <b>To:</b> | <u>6/5/2023</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P  | ER CONTRIBUTOR   |                            |                 |
| 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 Candidat | :e                 |                       | Reporting   | g Period    |       |           |            |
|--------------------------------------|--------------------|-----------------------|-------------|-------------|-------|-----------|------------|
|                                      |                    |                       | From:       |             |       | То:       |            |
|                                      |                    |                       |             | DATE        |       |           | AMOUNT     |
| Full Name of Contributor             |                    |                       | МО          | DAY         | YEAR  |           |            |
| Mailing Address                      |                    |                       |             |             |       | <b>\$</b> | 0.00       |
| City                                 | State              | Zip Code (Plus 4)     |             |             |       |           |            |
| Description of Contribution:         |                    |                       |             |             |       |           |            |
| Enter Grand Total of Part F on Sch   | andula II. In-Kir  | nd Contributions Data | ilad Sum    | mary Pag    |       |           | DACE TOTAL |
| Section 2.                           | iedule II, III-KII | ia contributions Deta | iiieu Suiii | iliai y Pag | , je, |           | PAGE TOTAL |
|                                      |                    |                       |             |             |       | \$        | 0.00       |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate                          | 1            |         |            |         | Re     | porting l | Period    |       |         |                    |
|--|--------------|---------|------------|---------|--------|-----------|-----------|-------|---------|--------------------|
|  |              |         |            |         | Fro    | om:       |           | To:   |         |                    |
|  |              |         |            |         |        |           | DATE      |       |         | AMOUNT             |
| Full Name of Contributor                                       |              |         |            |         |        | мо        | DAY       | YEAR  |         |                    |
| Mailing Address  |              |         |            |         |        |           |           |       | -<br>\$ | 0.00               |
| City   | State        |         | Zip Code(I | Plus 4) |        |           |           |       |         |                    |
| Employer of Contributor  |              |         |            |         |        | Occupa    | ition     |       |         |                    |
| Employer Mailing Address/Principal Pla<br>Business             | ce of        | City    |            | State   |        | Zip<br>4) | Code(Plus | Descr | iptio   | n of Contribution  |
| Enter Grand Total of Part G on Sch<br>Summary Page, Section 3. | nedule II, I | in-Kind | Contributi | ons De  | etaile | ed        |           |       |         | PAGE TOTAL<br>0.00 |

### SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Per | -        |     |          |
|---------------------------------------|---------------|----------|-----|----------|
| STEPHENS, TODD FRIENDS OF INC         | From          | 5/2/2023 | То: | 6/5/2023 |

|   |                    |                                   |                           | DATE                       |           | AMOUNT       |
|---|--------------------|-----------------------------------|---------------------------|----------------------------|-----------|--------------|
| To Whom Paid<br>Chick-Fil-A                     |                    |                                   | мо                        | DAY                        | YEAR      |              |
| Mailing Address 160 Easton Road                 |                    |                                   | 6                         | 3                          | 2023      | \$<br>11.70  |
| <b>City</b> Warrington                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18976 |                           | otion of Exp               | penditure |              |
| <b>To Whom Paid</b><br>Graeme Park Pizza & Cafe |                    |                                   | МО                        | DAY                        | YEAR      |              |
| Mailing Address 801 County Line Ro              | ad                 |                                   | 6                         | 3                          | 2023      | \$<br>35.15  |
| City Horsham                                    | PA 19044           |                                   |                           | otion of Exp               |           |              |
| <b>To Whom Paid</b><br>Starbucks                |                    |                                   | МО                        | DAY                        | YEAR      |              |
| Mailing Address 301 Horsham Road                |                    |                                   | 6                         | 2                          | 2023      | \$<br>12.70  |
| City Horsham                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19044 | <b>Descrip</b><br>Coffee  | otion of Exp               | penditure |              |
| <b>To Whom Paid</b><br>Home Depot               |                    |                                   | МО                        | DAY                        | YEAR      |              |
| Mailing Address 2250 Easton Road                |                    |                                   | 6                         | 2                          | 2023      | \$<br>131.44 |
| City Willow Grove                               | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19090 | <b>Descrip</b><br>Sign Su | otion of Exp               | penditure |              |
| <b>To Whom Paid</b><br>American Star Diner      |                    |                                   | МО                        | DAY                        | YEAR      |              |
| Mailing Address 1200 Welsh Road                 |                    |                                   | 5                         | 31                         | 2023      | \$<br>49.70  |
| City North Wales                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19454 |                           | otion of Exp<br>ign Meetin |           |              |

|   |   |                                   |                           |  |                                     | FAC | JL 12 |  |  |  |
|---|---|-----------------------------------|---------------------------|--|-------------------------------------|-----|-------|--|--|--|
| <b>To Whom Paid</b> Five Below                    | мо                                      | DAY                               | YEAR                      |  |                                     |     |       |  |  |  |
| Mailing Address Park Ave                          |   |                                   |                           | 26   | 2023                                | \$  | 5.88  |  |  |  |
| ity Willow Grove State PA 2ip Code (Plus 4) 19090 |   |                                   |                           | otion of Exp<br>Charger                    | penditure                           |     |       |  |  |  |
| <b>To Whom Paid</b><br>Staples                    | МО                                      | DAY                               | YEAR                      |  |                                     |     |       |  |  |  |
| Mailing Address York Road                         |   |                                   | 5                         | 26   | 2023                                | \$  | 21.71 |  |  |  |
| City Willow Grove                                 | State   Zip Code (Plus 4)   19090       |                                   |                           | Description of Expenditure Office Supplies |                                     |     |       |  |  |  |
| <b>To Whom Paid</b><br>Amazon                     |   |                                   | мо                        | DAY  | YEAR                                |     |       |  |  |  |
| Mailing Address 410 Terry Avenue                  |   |                                   |                           | 25   | 2023                                | \$  | 56.06 |  |  |  |
| City Seatte                                       | Seatte State Zip Code (Plus 4) WA 98109 |                                   |                           |  | Description of Expenditure Supplies |     |       |  |  |  |
| To Whom Paid Old Navy                             |   |                                   |                           | DAY  | YEAR                                |     |       |  |  |  |
| Mailing Address 2456 W More                       | eland Road                              |                                   | 5                         | 25   | 2023                                | \$  | 45.00 |  |  |  |
| City Willow grove                                 | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>19090 | <b>Descrip</b><br>Gift Ca | otion of Exp                               | penditure                           |     |       |  |  |  |
| <b>To Whom Paid</b><br>Turning Point              |   |                                   | МО                        | DAY  | YEAR                                |     |       |  |  |  |
| Mailing Address 1460 Bethlehem Pike               |   |                                   |                           | 25   | 2023                                | \$  | 27.78 |  |  |  |
| City North Wales PA  Zip Code (Plus 4) 19454      |   |                                   | 1                         | otion of Exp                               |                                     |     |       |  |  |  |
| <b>To Whom Paid</b><br>Mr Wish                    |   |                                   | МО                        | DAY  | YEAR                                |     |       |  |  |  |
| Mailing Address York Road                         |   |                                   | 5                         | 23   | 2023                                | \$  | 26.72 |  |  |  |
| City Hatboro                                      | Descrip                                 | tion of Exp                       | enditure                  |  |                                     |     |       |  |  |  |

| <b>To Whom Paid</b><br>Millers Ale House  |                                    |                            |                                   |  | DAY  | YEAR   |    |       |                 |  |
|---|------------------------------------|----------------------------|-----------------------------------|--|--|--|----|-------|-----------------|--|
| Mailing Address 2300 Easton Road  |                                    |                            |                                   | 5  | 23   | 2023   | \$ |       | 25.12           |  |
| City Willow Grov  | VA                                 | State                      | Zip Code (Plus 4)                 | Descrip  | tion of Exp  | enditure   |    |       |                 |  |
| Willow Gro  | PA 19090                           |                            |                                   |  | ign Meetin   |  |    |       |                 |  |
| To Whom Paid Amazon   |                                    |                            |                                   |  | DAY  | YEAR   |    |       |                 |  |
| Mailing Address 410 Terry Avenue  |                                    |                            | 5                                 | 20   | 2023   | \$   |    | 28.10 |                 |  |
| <b>City</b> Seatte  |                                    | State                      | Zip Code (Plus 4)                 | Descrip  | tion of Ext  | enditure   |    |       |                 |  |
| Scatte  |                                    | WA                         | 98109                             | <b>Description of Expenditure</b> Office Supplies  |  |  |    |       |                 |  |
| To Whom Paid<br>Gaglianos   |                                    |                            |                                   | МО   | DAY  | YEAR   |    |       |                 |  |
| Mailing Address   | ailing Address 2809 PA-903         |                            |                                   |  | 20   | 2023   | \$ |       | 16.53           |  |
| <b>City</b> Albrightsvil  | Zip Code (Plus 4)                  | Description of Expenditure |                                   |  |  |  |    |       |                 |  |
|   | PA 18621                           |                            |                                   |  | Lunch Meeting  |  |    |       |                 |  |
|   |                                    |                            |                                   |  |  |  |    |       |                 |  |
| <b>To Whom Paid</b><br>Amazon   |                                    |                            |                                   | МО   | DAY  | YEAR   |    |       |                 |  |
|   | 410 Terry Avenue                   |                            |                                   | <b>мо</b> 5  | <b>DAY</b> 20  | <b>YEAR</b> 2023                                 | \$ |       | 35.15           |  |
| Amazon  Mailing Address   | 410 Terry Avenue                   | State                      | Zip Code (Plus 4)                 | 5  | 20   | 2023   | \$ |       | 35.15           |  |
| Amazon  Mailing Address   | 410 Terry Avenue                   | <b>State</b><br>WA         | <b>Zip Code (Plus 4)</b><br>98109 | 5<br>Descrip   |  | 2023   | \$ |       | 35.15           |  |
| Amazon  Mailing Address   | 410 Terry Avenue                   |                            |                                   | 5<br>Descrip   | 20<br>Otion of Exp   | 2023   | \$ |       | 35.15           |  |
| Amazon  Mailing Address  City Seatte  To Whom Paid  | 410 Terry Avenue  212 Hampton Road |                            |                                   | 5  Descrip Office S  | 20<br>otion of Exp<br>Supplies                                 | 2023<br>penditure                                | \$ |       | 35.15<br>750.00 |  |
| Amazon  Mailing Address  City Seatte  To Whom Paid Kathy Rusch  Mailing Address                                     |                                    |                            |                                   | 5  Descrip Office S  MO  | 20 Otion of Exp Supplies  DAY                                  | 2023 Denditure  YEAR  2023                       |    |       |                 |  |
| Amazon  Mailing Address  City Seatte  To Whom Paid Kathy Rusch  Mailing Address                                     |                                    | WA                         | 98109                             | Descrip Office S  MO  Descrip  | 20 Dition of Exp Supplies DAY                                  | 2023 Denditure  YEAR  2023                       |    |       |                 |  |
| Amazon  Mailing Address  City Seatte  To Whom Paid Kathy Rusch  Mailing Address                                     |                                    | WA                         | 98109  Zip Code (Plus 4)          | Descrip Office S  MO  Descrip  | 20 Day Day 19 Day Day Day                                      | 2023 Denditure  YEAR  2023                       |    |       |                 |  |
| Amazon  Mailing Address  City Seatte  To Whom Paid Kathy Rusch  Mailing Address  City Hatboro  To Whom Paid         |                                    | WA                         | 98109  Zip Code (Plus 4)          | Description of the second of t | 20 Day  Day  19 Dtion of Exp ign Work                          | 2023 Penditure  YEAR  2023 Penditure             |    |       |                 |  |
| Amazon  Mailing Address  City Seatte  To Whom Paid Kathy Rusch  Mailing Address  City Hatboro  To Whom Paid Verizon | 212 Hampton Road  2330 Easton Road | WA                         | 98109  Zip Code (Plus 4)          | Description of the second of t | 20  ption of Exp Supplies  DAY  19  ption of Exp ign Work  DAY | 2023 Penditure  YEAR  2023 Penditure  YEAR  2023 | \$ |       | 750.00          |  |

|   |                                  |                      |  |  |  |   |    | PAGE  | 14    |
|---|----------------------------------|----------------------|--|--|--|---|----|-------|-------|
| To Whom Paid PJ Welihans  |                                  |                      |  |  | DAY  | YEAR                                      |    |       |       |
| Mailing Address 101 Easton Road   |                                  |                      |  |  | 17   | 2023                                      | \$ |       | 24.06 |
| State   Zip Code (Plus 4) PA 19044  |                                  |                      |  | Description of Expenditure  Campaign Lunch |  |   |    |       |       |
| To Whom Paid Tavola Restaurant  |                                  |                      |  | МО   | DAY  | YEAR                                      |    |       |       |
| Mailing Address 400 W Sproul Rd   |                                  |                      | 5  | 13   | 2023   | \$  |    | 41.98 |       |
| City Springfield State Zip Code (Plus 4) PA 19064   |                                  |                      | Description of Expenditure Campaign Lunch  |  |  |   |    |       |       |
| To Whom Paid<br>USPS  |                                  |                      |  | мо   | DAY  | YEAR                                      |    |       |       |
| Mailing Address 12 North York Road  |                                  |                      |  | 5  | 13   | 2023                                      | \$ |       | 9.60  |
| City Hatboro  | State Zip Code (Plus 4) PA 19040 |                      |  | Description of Expenditure Postage         |  |   |    |       |       |
|   |                                  |                      |  |  |  |   |    |       |       |
| To Whom Paid Alessio's Seafood G  | irille, LLC                      |                      |  | мо   | DAY  | YEAR                                      |    |       |       |
| Alessio's Seafood G   | irille, LLC<br>827 Easton Road   |                      |  | <b>MO</b> 5                                |  | <b>YEAR</b> 2023                          | \$ |       | 59.26 |
| Alessio's Seafood G   |                                  | <b>State</b><br>PA   | <b>Zip Code (Plus 4)</b> 18976             | 5<br>Descrip                               | DAY  | 2023<br>penditure                         | \$ |       | 59.26 |
| Alessio's Seafood G   |                                  | State                | Zip Code (Plus 4)                          | 5<br>Descrip                               | DAY  11  otion of Exp  | 2023<br>penditure                         | \$ |       | 59.26 |
| Alessio's Seafood G  Mailing Address  City Warrington  To Whom Paid  Magerks  |                                  | State                | Zip Code (Plus 4)                          | 5  Descrip Campa                           | DAY  11  otion of Expign Meeting                                   | 2023<br>penditure                         | \$ |       | 59.26 |
| Alessio's Seafood G  Mailing Address  City Warrington  To Whom Paid  Magerks  | 827 Easton Road                  | State                | Zip Code (Plus 4)                          | Descrip Campai                             | DAY  11  ption of Expign Meeting                                   | 2023 penditure g                          | \$ |       |       |
| Alessio's Seafood G  Mailing Address  City Warrington  To Whom Paid Magerks  Mailing Address  | 827 Easton Road                  | State<br>PA<br>State | Zip Code (Plus 4) 18976  Zip Code (Plus 4) | Descrip Campai                             | DAY  11  otion of Expign Meeting  DAY  10  otion of Exp            | 2023 penditure g                          | \$ |       |       |
| Alessio's Seafood Gi Mailing Address City Warrington  To Whom Paid Magerks  Mailing Address City Horsha,  To Whom Paid Nation Builder | 827 Easton Road                  | State<br>PA<br>State | Zip Code (Plus 4) 18976  Zip Code (Plus 4) | 5  Descrip Campai  MO  5  Descrip Campai   | DAY  11  ption of Expring Meeting  DAY  10  ption of Expring Lunch | 2023  penditure  9  YEAR  2023  penditure | \$ |       |       |

| To Whom Paid<br>WAWA   |                                      |           |   |  | DAY   | YEAR                               |    |  |       |  |
|--|--------------------------------------|-----------|---|--|---|------------------------------------|----|--|-------|--|
| Mailing Address 101  | iling Address 101 Easton Rd          |           |   |  | 9   | 2023                               | \$ |  | 7.08  |  |
| <b>City</b> Horsham  | State Zip Code (Plus 4) PA 19044     |           |   |  | tion of Exp                                   | enditure                           |    |  |       |  |
| To Whom Paid PJ Welihans   |                                      |           |   |  | DAY   | YEAR                               |    |  |       |  |
| Mailing Address 101 Easton Road  |                                      |           |   | 5  | 9   | 2023                               | \$ |  | 27.23 |  |
| <b>City</b> Horsham  | ham State Zip Code (Plus 4) PA 19044 |           |   | <b>Descrip</b><br>Campai                       | enditure                                      |                                    |    |  |       |  |
| <b>To Whom Paid</b><br>Doylestown Country Clu  | ıb                                   |           |   | МО   | DAY   | YEAR                               |    |  |       |  |
| Mailing Address 20 Country Club Lane   |                                      |           |   | 5  | 9   | 2023                               | \$ |  | 22.50 |  |
| <b>City</b> Doylestown   | n State Zip Code (Plus 4) PA 18901   |           |   |  | Description of Expenditure Campaign Breakfast |                                    |    |  |       |  |
|  |                                      | PA        | 18901                                     | Campai   | gn Breakfa                                    | ast                                |    |  |       |  |
| To Whom Paid<br>WAWA   |                                      | PA        | 18901                                     | Campai<br>MO                                   | gn Breakfa                                    | YEAR                               |    |  |       |  |
| WAWA   | Easton Rd                            | PA        | 18901                                     |  |   |                                    | \$ |  | 35.84 |  |
| WAWA   | Easton Rd                            |           | <b>Zip Code (Plus 4)</b> 19044            | <b>MO</b> 5                                    | DAY<br>9<br>tion of Exp                       | <b>YEAR</b> 2023                   | \$ |  | 35.84 |  |
| Mailing Address 101  | Easton Rd                            | ate       | Zip Code (Plus 4)                         | MO 5   | DAY<br>9<br>tion of Exp                       | <b>YEAR</b> 2023                   | \$ |  | 35.84 |  |
| Mailing Address 101 City Horsham  To Whom Paid New Hope Parking  | Easton Rd                            | ate       | Zip Code (Plus 4)                         | MO 5  Descrip Gasolin                          | DAY  9  tion of Exp                           | YEAR 2023 enditure                 | \$ |  | 35.84 |  |
| Mailing Address 101 City Horsham  To Whom Paid New Hope Parking  | Easton Rd  Sta                       | ate<br>PA | Zip Code (Plus 4)                         | MO 5  Descrip Gasolin  MO 5                    | DAY  9  tion of Expe                          | YEAR 2023 Penditure 2023           |    |  |       |  |
| Mailing Address 101 I  City Horsham  To Whom Paid New Hope Parking  Mailing Address Main                                 | Easton Rd  Sta                       | ate<br>PA | Zip Code (Plus 4) 19044 Zip Code (Plus 4) | MO 5  Descrip Gasolin  MO 5                    | DAY  9  tion of Exp e  DAY  9                 | YEAR 2023 Penditure 2023           |    |  |       |  |
| Mailing Address 101 I City Horsham  To Whom Paid New Hope Parking  Mailing Address Main City New Hope  To Whom Paid USPS | Easton Rd  Sta                       | ate<br>PA | Zip Code (Plus 4) 19044 Zip Code (Plus 4) | MO  5  Descrip Gasolin  MO  5  Descrip Parking | DAY  9  tion of Exp e  DAY  9  tion of Exp    | YEAR 2023 Penditure 2023 Penditure |    |  |       |  |

| <b>To Whom Paid</b><br>Graeme Park Pizza & Cafe    | МО                     | DAY                     | YEAR  |     |       |    |            |  |
|--|------------------------|-------------------------|---|-----|-------|----|------------|--|
| Mailing Address 801 Count                          | 5                      | 2                       | 2023  | \$  | 31.65 |    |            |  |
| City Horsham State Zip Code (Plus 4) PA 19044      |                        |                         | Description of Expenditure  Campaign Meeting      |     |       |    |            |  |
| <b>To Whom Paid</b> Millers Ale House              |                        |                         | МО  | DAY | YEAR  |    |            |  |
| Mailing Address 2300 Easton Road                   |                        |                         | 5   | 2   | 2023  | \$ | 72.89      |  |
| City Willow Grove State PA 2ip Code (Plus 4) 19090 |                        |                         | Description of Expenditure Campaign Meeting       |     |       |    |            |  |
| <b>To Whom Paid</b><br>Amazon                      |                        |                         | МО  | DAY | YEAR  |    |            |  |
| Mailing Address 410 Terry Avenue                   |                        |                         |   | 2   | 2023  | \$ | 59.42      |  |
| City Seatte State Zip Code (Plus 4) WA 98109       |                        |                         | <b>Description of Expenditure</b> Office Supplies |     |       |    |            |  |
| Enter Grand Total of Exper                         | nditures on Page 1 Re  | nort Cover Page Item D  |   |     |       |    | PAGE TOTAL |  |
| Lines Grand Total of Exper                         | iditales on Fage 1, Re | port cover rage, Item D | •   |     |       | \$ | 2,913.72   |  |