

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20200203		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF ANN FLOOD											
<b>Street Address:</b> 2157 WEST DELL ROAD											
<b>City:</b> BATH				<b>State:</b> PA		<b>Zip Code:</b> 18014-9649					
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2023	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	REP			
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		11	28	2023		12	31	2023			
<b>A. Amount Brought Forward From Last Report</b>					\$ 21,539.59						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$ 14,790.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$ 36,329.59						
<b>D. Total Expenditures (From Schedule III)</b>					\$ 3,304.64						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$ 33,024.95						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF ANN FLOOD	From: <u>11/28/2023</u> To: <u>12/31/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 90.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,250.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 7,000.00
<b>All Other Contributions (Part D)</b>	\$ 6,450.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 13,450.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 14,790.00
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# 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF ANN FLOOD	<b>Reporting Period</b>  <b>From:</b> <u>11/28/2023</u> <b>To:</b> <u>12/31/2023</u>
<b>DATE</b> <span style="float: right;"><b>AMOUNT</b></span>	

<b>Full Name of Contributing Committee</b> WM EMPLOYEES BETTER GOVERNMENT FUND			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 701 PENNSYLVANIA NW SUITE 590			10	6	2023	
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20004				

  

<b>Full Name of Contributing Committee</b> FRIENDS OF TOM GIOVANNI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 539 WERKHEISER AVENUE			11	2	2023	
<b>City</b> NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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)**

<b>Name of Filing Committee or Candidate</b> FRIENDS OF ANN FLOOD	<b>Reporting Period</b> From: <u>11/28/2023</u> To: <u>12/31/2023</u>
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<b>DATE</b>	<b>AMOUNT</b>
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Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
ROBERT S TAYLOR ESQ							
Mailing Address PO BOX 6349							
City	HARRISBURG	State	Zip Code (Plus 4)	5	2	2023	
		PA	171120349				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
ANITA PRICE							
Mailing Address 70 TIMBERLANE DRIVE							
City	BANGOR	State	Zip Code (Plus 4)	10	15	2023	
		PA	18013				

Full Name of Contributor								MO	DAY	YEAR	\$100.00			
JOHN DETZI														
Mailing Address1006 CONSTITUTION AVENUE														
CityPEN ARGYL				StatePA		Zip Code (Plus 4)18072		10	15	2023				

<b>Full Name of Contributor</b> JM ULIANA & ASSOCIATES, LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 2671 BAGLYOS CIRCLE B20			10	6	2023	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18020				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
KENT & LESLIE MCKELVEY						
Mailing Address 1320 RICHMOND RD						
City EASTON	State PA	Zip Code (Plus 4) 18040	10	15	2023	

<b>Full Name of Contributor</b> TIMOTHY & CATHLEEN HUGHES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 367 DEMARIA DR						
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18040				

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

<b>PAGE TOTAL</b>
\$ 1,000.00

# 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF ANN FLOOD	<b>From:</b> <u>11/28/2023</u> <b>To:</b> <u>12/31/2023</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 350.00
WOJDAK FOR THE COMMONWEALTH PAC				5	2	2023	
Mailing Address 30 N 3RD ST SUITE 950							
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 350.00
PUGLIESE PAC				5	2	2023	
Mailing Address 2205 STRAWBERRY SQ							
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 350.00
HIGHMARK PAC				5	2	2023	
Mailing Address 1800 CENTER ST							
City CAMP HILL	State PA	Zip Code (Plus 4) 17089					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 350.00
CHAMBERPAC				5	2	2023	
Mailing Address 417 WALNUT ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PGG-STATE				5	8	2023	
Mailing Address 2 NORTH NINTH ST							
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 350.00
UGI ENERGY SVC LLC PAC				6	17	2023	
Mailing Address 1 UGI DR							
City DENVER	State PA	Zip Code (Plus 4) 17517					

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 350.00
CAPITAL BLUE PAC			6	17	2023	
Mailing Address	PO BOX 60710					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17106	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 350.00
WINE & SPIRITS ASSOCIATION OF PA PAC			6	17	2023	
Mailing Address	3000 N 2ND ST STE 1002					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 350.00
PENNSYLVANIA BEER ALLIANCE PBA PAC			6	17	2023	
Mailing Address	407 N FRONT ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 350.00
MALADY & WOOTEN PAC			6	17	2023	
Mailing Address	604 N 3RD ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
FIRST ENERGY PAC			6	2	2023	
Mailing Address	76 S MAIN ST					
City	AKRON	State	OH	Zip Code (Plus 4)	44308	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 350.00
HAPAC-STATE			6	2	2023	
Mailing Address	30 N 3RD ST SUITE 600					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
FRIENDS OF MARTINA WHITE			10	6	2023	
Mailing Address	PO BOX 16041					
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19154	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
CITIZENS FOR KAIL			10	6	2023	
Mailing Address	PO BOX 94					
City	BEAVER	State	PA	Zip Code (Plus 4)	15009	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
COMMITTEE TO ELECT JULIE HARHART						
Mailing Address 640 WILLOW DR			10	29	2023	
City CATASAUQUA	State PA	Zip Code (Plus 4) 18032				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 7,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF ANN FLOOD	<b>Reporting Period</b>  <b>From:</b> <u>11/28/2023</u> <b>To:</b> <u>12/31/2023</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> NOLAN A PERIN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 250 GREEN MEADOW LANE				5	2	2023	
<b>City</b> PEN ARGYL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18072					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> WIND CREEK BETHLEHEM				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 77 WIND CREEK BLVD				5	2	2023	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18015					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> WIND CREEK BETHLEHEM				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 77 WIND CREEK BLVD				10	6	2023	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18015					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> JM ULIANA & ASSOCIATES, LLC				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 350.00
<b>Mailing Address</b> 2571 BAGLYOS CIRCLE B20				5	2	2023	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18020					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	



<b>Full Name of Contributor</b> FAUST E CAPOBIANCO IV			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b> 3631 WESTWOOD DR			10	6	2023	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> LEWIS & CHRISTY RONCA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 300.00
<b>Mailing Address</b> 680 CLEARFIELD RD			10	6	2023	
<b>City</b> NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> DEVENDRA K AMIN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 300.00
<b>Mailing Address</b> 3037 TIFFANY DRIVE			10	6	2023	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> LOUIS P PEKTOR III			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b> 245 COFFEETOWN RD			10	15	2023	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18042				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> GUY SAXTON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b> 3051 GREEN POND ROAD			10	31	2023	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
<b>\$</b> 6,450.00

## 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: <span style="float: right;">To:</span>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF ANN FLOOD		From: <u>11/28/2023</u> To: <u>12/31/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 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				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF ANN FLOOD	From <u>11/28/2023</u> To: <u>12/31/2023</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ANN FLOOD				
<b>Mailing Address</b> 2157 WEST DELL ROAD	1	1	2023	\$ 49.35
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> CELL PHONE REIMBURSEMENT-JANUARY	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ANN FLOOD				
<b>Mailing Address</b> 2157 WEST DELL ROAD	2	1	2023	\$ 56.44
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> CELL PHONE REIMBURSEMENT-FEBRUARY	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
HRCC				
<b>Mailing Address</b> PO BOX 11787	2	10	2023	\$ 260.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> FUNDRAISING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ANN FLOOD				
<b>Mailing Address</b> 2157 WEST DELL ROAD	3	1	2023	\$ 56.44
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> CELL PHONE REIMBURSEMENT-MARCH	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
HRCC				
<b>Mailing Address</b> PO BOX 11787	3	9	2023	\$ 250.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> FUNDRAISING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ANN FLOOD				
<b>Mailing Address</b> 2157 WEST DELL ROAD	4	3	2023	\$ 56.44
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> CELL PHONE REIMBURSEMENT-APRIL	

To Whom Paid			MO	DAY	YEAR	\$ 499.00
ERIKA STOFFLET						
Mailing Address 2435 ACKERMANVILLE RD.			4	3	2023	
City BANGOR	State PA	Zip Code (Plus 4) 18013	Description of Expenditure TREASURER STIPEND			
To Whom Paid			MO	DAY	YEAR	\$ 56.44
ANN FLOOD						
Mailing Address 2157 WEST DELL ROAD			5	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-MAY			
To Whom Paid			MO	DAY	YEAR	\$ 212.00
OLD TOWN DELI						
Mailing Address 512 NORTH 3RD STREET			5	9	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure FUNDRAISING EVENT			
To Whom Paid			MO	DAY	YEAR	\$ 56.44
ANN FLOOD						
Mailing Address 2157 WEST DELL ROAD			6	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-JUNE			
To Whom Paid			MO	DAY	YEAR	\$ 56.44
ANN FLOOD						
Mailing Address 2157 WEST DELL ROAD			7	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-JULY			
To Whom Paid			MO	DAY	YEAR	\$ 127.20
HRCC						
Mailing Address 500 NORTH 3RD ST. 4TH FLOOR			7	28	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure FUNDRAISING ITEMS			
To Whom Paid			MO	DAY	YEAR	\$ 56.44
ANN FLOOD						
Mailing Address 2157 WEST DELL ROAD			8	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-AUGUST			
To Whom Paid			MO	DAY	YEAR	\$ 56.44
ANN FLOOD						
Mailing Address 2157 WEST DELL ROAD			9	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-SEPTEMBER			

To Whom Paid WANDERLUST BEER GARDEN			MO	DAY	YEAR	\$ 25.00
Mailing Address 1600 SULLIVAN TRAIL #7			9	30	2023	
City EASTON	State PA	Zip Code (Plus 4) 18040	Description of Expenditure FUNDRAISING EVENT			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 38.99
Mailing Address 2157 WEST DELL ROAD			9	30	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT FOR ENVELOPES			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 57.38
Mailing Address 2157 WEST DELL ROAD			9	30	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT FOR PRINTING INVITATIONS			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 56.44
Mailing Address 2157 WEST DELL ROAD			10	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-OCTOBER			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 56.44
Mailing Address 2157 WEST DELL ROAD			11	2	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-NOVEMBER			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 98.88
Mailing Address 2157 WEST DELL ROAD			11	8	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT FOR HALLOWEEN PARADE			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 66.00
Mailing Address 2157 WEST DELL ROAD			12	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT FOR STAMPS			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 56.44
Mailing Address 2157 WEST DELL ROAD			12	1	2023	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE REIMBURSEMENT-DECEMBER			



<b>To Whom Paid</b> MACKENZIE FOR CONGRESS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b> PO BOX 747			12	28	2023	
<b>City</b> EMMAUS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18049	<b>Description of Expenditure</b> DONATION			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> <b>\$</b> 3,304.64

