

# Campaign Finance Report

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

Filer Identification Number : 20200203		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF ANN FLOOD											
Street Address: 2157 WEST DELI ROAD											
City: BATH				State: PA		Zip Code: 18014-9649					
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2024	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
				MO	DAY	YEAR	REP				
				11	5	2024	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		3	5	2024			4	8	2024		
A. Amount Brought Forward From Last Report					\$		33,024.95				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		15,915.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		48,939.95				
D. Total Expenditures (From Schedule III)					\$		4,837.81				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		44,102.14				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		98.35				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		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>3/5/2024</u> To: <u>4/8/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 210.00

<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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 2,605.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,605.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 8,850.00
<b>All Other Contributions (Part D)</b>	\$ 4,250.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 13,100.00

<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>	\$ 15,915.00
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<div> <div> <div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>           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.         </div> </div> </div>							
Name of Filing Committee or Candidate				Reporting Period			
				From:	To:		
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	<div>\$</div> <div>0.00</div>
Mailing Address							
City	State	Zip Code (Plus 4)					

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

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

<b>Name of Filing Committee or Candidate</b> FRIENDS OF ANN FLOOD				<b>Reporting Period</b> From: <u>3/5/2024</u> To: <u>4/8/2024</u>			
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b> ELIZABETH KEMMERER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 3220 VALLEY VIEW DR.				1	10	2024	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014					
<b>Full Name of Contributor</b> ORIGINAL DOUGHBOY'S				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 232 W. MOORESTOWN RD.				2	7	2024	
<b>City</b> WIND GAP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18091					
<b>Full Name of Contributor</b> MICHAEL FIOROT				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
<b>Mailing Address</b> 881 GRAND CENTRAL RD				3	21	2024	
<b>City</b> PEN ARGYL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18072					
<b>Full Name of Contributor</b> CLIFTON C. ECKHARDT				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 80.00
<b>Mailing Address</b> 555 WOOD AVE.				3	18	2024	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014					
<b>Full Name of Contributor</b> FAUST E CAPOBIANCO IV.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 3631 WESTWOOD DR				3	30	2024	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045					
<b>Full Name of Contributor</b> KORRY MICHAEL FRANK				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 1560 BUSHKILL CENTER RD				4	1	2024	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014					

Full Name of Contributor DEPUE PROPERTY MGMT			MO	DAY	YEAR	\$ 150.00
Mailing Address 1033 CONSTITUTION AVE.			4	6	2024	
City PEN ARGYL	State PA	Zip Code (Plus 4) 18072				
Full Name of Contributor THOMAS GIOVANNI			MO	DAY	YEAR	\$ 150.00
Mailing Address 129 JASON TERRACE			4	6	2024	
City WIND GAP	State PA	Zip Code (Plus 4) 18091				
Full Name of Contributor ANITA PRICE			MO	DAY	YEAR	\$ 250.00
Mailing Address 10 TIMBERLANE DR.			4	6	2024	
City BANGOR	State PA	Zip Code (Plus 4) 18013				
Full Name of Contributor BRIAN FENSTERMAKER			MO	DAY	YEAR	\$ 150.00
Mailing Address 3571 SWEETGUM DR.			4	6	2024	
City NAZARETH	State PA	Zip Code (Plus 4) 18064				
Full Name of Contributor ROBERT D. KILBANKS			MO	DAY	YEAR	\$ 100.00
Mailing Address 2906 WILLIAM PENN HWY. SUITE 211			4	6	2024	
City EASTON	State PA	Zip Code (Plus 4) 18045				
Full Name of Contributor JAMES PERRY			MO	DAY	YEAR	\$ 75.00
Mailing Address 211 NO 8TH ST			4	6	2024	
City BANGOR	State PA	Zip Code (Plus 4) 18013				
Full Name of Contributor CEVDET TURKYOLU			MO	DAY	YEAR	\$ 250.00
Mailing Address 361 ROUTE 115			4	6	2024	
City SAYLORSBURG	State PA	Zip Code (Plus 4) 18353				
Full Name of Contributor PATRICK J. CUBBAGE			MO	DAY	YEAR	\$ 100.00
Mailing Address 4852 YORKSHIRE RD			4	6	2024	
City WALNUTPORT	State PA	Zip Code (Plus 4) 18068				
Full Name of Contributor KIMBERLY GOBLA KRUPKA			MO	DAY	YEAR	\$ 75.00
Mailing Address 2299 YOST RD			4	6	2024	
City BATH	State PA	Zip Code (Plus 4) 18014				

Full Name of Contributor			MO	DAY	YEAR	\$ 150.00
NOLAN PERIN			3	21	2024	
Mailing Address 250 GREEN MEADOW LANE						
City PEN ARGYL	State PA	Zip Code (Plus 4) 18072				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
NICHOLAS GRAZIANO						
Mailing Address 20 JACOBY RUN RD						
City MT BETHEL	State PA	Zip Code (Plus 4) 18343				

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

<b>PAGE TOTAL</b>
\$ 2,605.00

## 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>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>

				DATE	AMOUNT		
Full Name of Contributing Committee CITIZENS FOR MACKENZIE				MO	DAY	YEAR	\$ 1,250.00
Mailing Address 3620 LINCOLN AVENUE				1	6	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103					
Full Name of Contributing Committee HIGHMARK PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 1800 CENTER ST.				1	30	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17089					
Full Name of Contributing Committee WOJDAK FOR THE COMMONWEALTH PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 30 N THIRD ST SUITE 950				2	6	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PR & LA PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 100 STATE ST				2	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PA BEER ALLIANCE PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 600 N. 3RD ST				2	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee GREENLEE PARTNERS STATE PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 291				2	7	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 300.00
CHAMBER PAC			2	7	2024	
City	HARRISBURG	State PA				
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
THE DT PAC			2	7	2024	
City	HARRISBURG	State PA				
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 300.00
CAPITAL BLUE PAC			2	7	2024	
City	HARRISBURG	State PA				
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 300.00
PA AMERICAN WATER CO. PAC.			2	7	2024	
City	MECHANICSBURG	State PA				
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 300.00
THE PA INS. PAC			2	7	2024	
City	HARRISBURG	State PA				
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 300.00
PA BANKERS PAC			2	17	2024	
City	HARRISBURG	State PA				
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 300.00
VISION COMMITTEE			2	17	2024	
City	HARRISBURG	State PA				
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 300.00
ESSENTIAL UTILITIES INC. PAC			2	23	2024	
City	BRYN MAWR	State PA				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
CITIZENS FOR KAIL			3	24	2024	
Mailing Address						
PO BOX 94						
City	BEAVER	State				
		PA				
		Zip Code (Plus 4)				
		15009				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
WASTE MANAGEMENT EMPLOYEES BETTER GOVT FUND						
Mailing Address 701 PA AVE NW SUITE 590			4	1	2024	
City WASHINGTON	State DC	Zip Code (Plus 4) 20004				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 2,000.00
CITIZENS FOR GROVE						
Mailing Address 1854 ASHCOMBE DR			4	6	2024	
City DOVER	State PA	Zip Code (Plus 4) 17315				

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

<b>PAGE TOTAL</b>	
\$	8,850.00

**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>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE	AMOUNT
<b>Full Name of Contributor</b> LOUIS P PEKTOR III				<b>MO</b>	\$ 750.00
<b>Mailing Address</b> 245 COFFEETOWN RD.				<b>DAY</b>	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18042		<b>YEAR</b> 2024	
<b>Employer Name</b> ASHLEY DEVELOPMENT				<b>Occupation</b> OWNER	
<b>Employer Mailing Address/Principal Place of Business</b> 559 MAIN STREET, #300			<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018
<b>Full Name of Contributor</b> L ANDERSON DAUB				<b>MO</b>	\$ 1,000.00
<b>Mailing Address</b> 2800 N DELAWARE DR				<b>DAY</b>	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18040		<b>YEAR</b> 2024	
<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>	\$ 1,000.00
<b>Mailing Address</b> 3051 GREEN POND DR				<b>DAY</b>	
<b>City</b> EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045		<b>YEAR</b> 2024	
<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>	\$ 1,000.00
<b>Mailing Address</b> 77 WIND CREEK BLVD				<b>DAY</b>	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18015		<b>YEAR</b> 2024	
<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 & ASSOC LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b> 2571 BAGLYOS CIRCLE B20			1	30	2024	
<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>	

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

<b>PAGE TOTAL</b>
<b>\$</b> 4,250.00

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: To:

				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.

PAGE TOTAL
\$ 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>3/5/2024</u> To: <u>4/8/2024</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)	\$ 98.35
<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.)			\$ 98.35

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF ANN FLOOD	<b>Reporting Period</b>  <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
MELANIE WHITELEATHER							\$ 98.35
Mailing Address 4208 GLORIA LANE				4	6	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017					
Description of Contribution: PRINTED FLYERS							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							<b>PAGE TOTAL</b>  \$ 98.35

**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>3/5/2024</u> To: <u>4/8/2024</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	2024	\$ 56.44
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> CELLPHONE 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	1	5	2024	\$ 920.06
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> HOTEL REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ESSA BANK				
<b>Mailing Address</b> 1430 JACOBURG RD	1	9	2024	\$ 29.25
<b>City</b> WIND GAP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18091	<b>Description of Expenditure</b> CHECKS	
<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	25	2024	\$ 449.00
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> WEBSITE DOMAIN	
<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	2024	\$ 56.44
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> CELL PHONE - FEBRUARY	
<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	2024	\$ 99.53
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> CAMPAIGN MEETING	

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 263.43
Mailing Address 2157 WEST DELL ROAD			2	1	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure PETITION SIGNING EVENT			

To Whom Paid HCRC			MO	DAY	YEAR	\$ 450.00
Mailing Address 2523 WILLOW PARK RD.			2	12	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020	Description of Expenditure LINCOLN DAY BRUNCH			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 100.00
Mailing Address 2157 WEST DELL ROAD			2	15	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure FILE PETITIONS			

To Whom Paid OLD TOWN DELI			MO	DAY	YEAR	\$ 312.70
Mailing Address 512 N. 3RD ST.			2	12	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure HARRISBURG FUNDRAISER			

To Whom Paid N C Y F D			MO	DAY	YEAR	\$ 322.00
Mailing Address 14 W. HIGH ST			2	26	2024	
City NAZARETH	State PA	Zip Code (Plus 4) 18064	Description of Expenditure DONATION			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 56.44
Mailing Address 2157 WEST DELL ROAD			3	4	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE - MARCH			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 56.44
Mailing Address 2157 WEST DELL ROAD			4	4	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELLPHONE - APRIL			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 1,666.08
Mailing Address 2157 WEST DELL ROAD			4	6	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure FUNDRAISER			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL**

\$ 4,837.81

