Campaign Finance Report

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

Filer Identificati Number :	on 2003	3296			Repor Filed I		CANDI	DATE		СОМ	MITTEE	✓	LOBE	BYIST	
Name of Filing C	committee, Candid	late or L	obbyist:			-	E COMMIT	TEE T	O ELE	CT C/C) TREAS	URER JC	ANN (CARDE	LLO
Street Address:	177 SUNNYB	ROOK D	R.												
City:	SAYLORSBUR	G					State:	PA			Zip Co	de: 18	353		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 D PRIM		POST- 3.			AMENDN REPORT		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY I TION	POST- 6.			TERMIN REPORT		Yes	No	\sim
report type)	ANNUAL REPORT	7.	Year 2024				NG METH				PAPER		\checkmark	DISKE	TTE
Name of Office Sought by Candidate:							DATE O	F ELE	CTIC	DN	District Number	Office Code	Par	ty Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY									EAR		STH	REP			
REPRESENTATI	VE IN THE GENE	KAL ASS					11		5	2024]	(SEE INS	TRUCTIO	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	from:		3 5	20)24 T	0	4		8	2024	-				
A. Amount Bro	ught Forward Fro	m Last R	eport			\$	5		107,	918.86					
B. Total Moneta	\$	5		1,	370.00										
C. Total Funds Available (Sum Of Lines A and B) \$ 109,288.86															
D. Total Expenditures (From Schedule III)							5		3,3	391.00					
E. Ending Cash Balance (Subtract Line D From Line C)							5		105,8	397.86					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	e II)	4	5			0.00					
G. Unpaid Debt	s And Obligations	G (From S	Schedule IV	')		4	5			0.00		,			
				AFF	IDAVI	T SE	ECTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. I	f this is	a Ca	ndidate r	eport,	candi	date sig	gn here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sc	hedules	filed on	paper	or by elect	ronic m	edium	, are to t	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me thi day of	S	20							Signature	e of Perso	n Submitt	ing Rep	oort	
	Signati	ıre				-					Prin	ted Name			
My Commission Ex	-					_					Ema	il			
	мо	D	AY	YR				Ar	ea Co	de	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee, C	Candio	date shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of a	my knowle	edge and beli	ef this	political	comn	nittee has n	ot viola	ted ar	ny provis	ions of th	e act of Ju	ine 3,19	937 (P.I	1333,
Sworn to and subsc	ribed before me this day of		20							s	ignature	of Candida	ite		
						_					Printe	ed Name			
	Signature					_					Ema				
My Commission Exp	ires										Ema				
	МО	D	AY	YR		_		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	<u>2024</u> 20.00
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor TOTAL for the Reporting Period (1) \$ 32 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
TOTAL for the Reporting Period (1) \$ 32 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	20.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	20.00
Contributions Received From Political Committees (Part A) \$	
	0.00
All Other Contributions (Part B) \$ 55	50.00
TOTAL for the Reporting Period (2) \$ 55	50.00
3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C) \$ 50	00.00
All Other Contributions (Part D) \$	0.00
TOTAL for the Reporting Period (3) \$ 5(00.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4) \$	0.00
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.)\$1,37	70.00

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate					Period			
	From:			:				
					DATE			AMOUNT
Full Name of Contributing Committee			М	ю	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

\$

Use this Part to ite	emize all other 0.01 to \$250.	1 TO \$250.00 r contribution 00 in the repo	s wi	th an g peri	aggrega iod.			from
Name of Filing Committee or Candidat	e		Repo	orting Pe	eriod			
EMRICK, JOE COMMITTEE TO ELECT C/O TREASURER JOANN From CARDELLO					<u>3/5/2</u>	2024 To):	<u>4/8/2024</u>
					DATE			AMOUNT
Full Name of Contributor BEN HEDRICK				мо	DAY	YEAR		
Mailing Address 3653 IRONSTONE	RD						\$	100.00
City BETHLEHEM	State	Zip Code (Plus 4)		1	31	2024		
DEINLENEM	РА	18020						
Full Name of Contributor RAY BISHOP		мо	DAY	YEAR				
Mailing Address 415 LITTLE CREEK DR.							\$	100.00
City NAZARETH	CityStateZip Code (Plus 4)PA18064					2024		
Full Name of Contributor ANN BARTOLACCI, JR				мо	DAY	YEAR		
Mailing Address 14 GREENFIELD CT			T				\$	200.00
City EASTON	State	Zip Code (Plus 4)		1	31	2024		
	PA	18045						
Full Name of Contributor RITA HART	·			мо	DAY	YEAR		
Mailing Address 2333 BLUE JOY DR							\$	75.00
City NAZARETH	State PA	Zip Code (Plus 4) 18064		1	31	2024		
Full Name of Contributor LOIS POLGARDY					DAY	YEAR		
Mailing Address 4107 SCHERMAN BLVD							\$	75.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020		3	1	2024		

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

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 Cand		Reporting Period						
EMRICK, JOE COMMITTEE TO ELE CARDELLO	From:	om: <u>3/5/2024</u> To: <u>4/8/2024</u>						
	DA	TE	AN	AMOUNT				
Full Name of Contributing Commin	ttee			мо	DAY	YEAR		
Mailing Address 800 N. 3RD S	T. SUITE 304						\$	500.00
City HARRISBURG	2	5	2024					
				ſ		PAGE TOTAL		
Enter Grand Total of Part C on	Schedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	500.00

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		AMOUNT				
Full Name of Contributor					DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Princi Business	pal Place of		City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C o	n Schedule I, Detail	led Sumr	nary Page, Secti	on 3.		Γ	PAG	E TOTAL
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	0.00

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	Name of Filing Committee or Candidate			ting Perio	bd				
Fro					From: To:				
	D	ATE	AMOUNT						
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description				I					
Enter Grand Total of Part E c	n Schedule I. Detailer	l Summary Page	Section	4				PAGE TOT	AL
	in Schedule I, Detailet	i Summaly Paye,	Section	4.			\$		0.00

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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									
EMRICK, JOE COMMITTEE TO ELECT C/O TREASURER JOANN CARDELLO	From:	<u>3/5/2024</u> To:	<u>4/8/2024</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR										
TOTAL for the Reporting Pe	eriod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)									
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, 1		\$	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:			То:				
				DATE		AMOUNT		
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	,					
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					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)								
Employer of Contributor	1		1			Occupa	tion			
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	otion 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

Name of Filing Committee or Candidate	Reporting Period						
EMRICK, JOE COMMITTEE TO ELECT C,	O TREASURER JOANI	N CARDELLO	From	3/!	5/2024	То:	<u>4/8/2024</u>
				AMOUNT			
To Whom Paid RGB POLITICS	мо	DAY	YEAR				
Mailing Address 3031 LOGAN ST	1	18	2024	\$	2,841.00		
City CAMP HILL	State	Zip Code (Plus 4)	Descrip	otion of Exp	oenditure		
	РА	17011	INVITA	TION			
To Whom Paid MITZI'S TABLE			мо	DAY	YEAR		
Mailing Address 3650 NAZARETH PI	<e< th=""><th></th><th>1</th><th>31</th><th>2024</th><th>\$</th><th>550.00</th></e<>		1	31	2024	\$	550.00
City BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure		
	PA 18020 FOOD & amp; WATER PET					TION EV	ENT
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	3,391.00