Campaign Finance Report

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

Filer Identificat	tion 202	2C1618			Repor Filed		CAND	IDATE	Y	co	OMMITTEI		LOBE	BYIST		
Name of Filing	Committee, Candi	date or L	obbyist:			-	rg, jona	THAN	MAT	THEW					1	-
Street Address	: 															
City:							State:				Zip Code: 18013					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIN	DAY MARY	POST-	3.		AMENDM REPORT?	ENT	Yes	No	`	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- 5.	30 D ELEC	DAY CTION	POST-	6.		TERMINATION REPORT?		Yes	No	Ŷ ►	/
report type)	ANNUAL REPOR	T 7.	Year 2022				ING METH) CHECK (PAPER		\checkmark	DISKE	TTE	
Name of Office	Sought by Candid	ate:					DATE	OF EL	ECT	ION	District Number	Office Code	Par	ty Code	County Code	
GOVERNOR							мо	DAY		YEAR	-1	GOV	LIB		48	_
GOVERNOR							1	1	8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)	_
	Receipts and	мо	DAY	YEAF	2		мо	DAY		YEAR	FO	R OFFIC	e use	ONLY		
Expenditure	s from:		1 1	2	.022 1	Ю		3	28	2022						
A. Amount Bro	ought Forward Fro	om Last R	leport			9	\$			0.00						
B. Total Mone	tary Contributions	And Rec	eipts (Fron	n Sche	edule I)		\$		0.00							
C. Total Funds	s Available (Sum C	Of Lines A	and B)				\$			0.00						
D. Total Expe	nditures (From Scl	hedule II	I)				\$			0.00						
E. Ending Cas	h Balance (Subtra	ct Line D	From Line	C)			\$			0.00						
F. Value Of In	-Kind Contributior	ns Receiv	ed (From S	chedu	le II)		\$			0.00	-					
G. Unpaid Deb	ots And Obligation	s (From S	Schedule I\	/)			\$			0.00						
				AFF	IDAV	IT S	ECTION									
	is a Committee re		_								-	_				
I swear (or affirn correct and comp	n) that this report, in lete.	cluding the	e attached sc	hedule	s filed on	i pape	r or by elec	ctronic r	nediu	um, are to	the best of	my know	ledge	and beli	ef , true	
Sworn to and sub	scribed before me th day of	is	20							Signature	e of Person	Submitt	ing Rep	oort		
	Signat	ure				_					Print	ed Name				
My Commission I	Expires					_					Emai					
	МО	D	AY	YR				A	rea C	Code	Daytime	e Telepho	one Nu	mber		
Part II- If this is	s a report of a car	ndidate's	authorized	Comr	nittee, G	Candi	date shal	l sign l	nere	•						
No 320) as amend			edge and bel	ief this	s political	comi	mittee has	not viol	ated	any provis	ions of the	act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subs	cribed before me this day of	S	20							s	ignature o	f Candida	te			
						_					Printe	l Name				
My Commission Ex	Signature	2				_					Emai	1				
	мо	n	AY	YR	2	_		Area	a Cod	le	Da	ytime Te	lephon	e Numb	er	
		U			-											

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page				
Name of Filing Committee or Candidate	Reporting	9 Period		
HACKENBURG, JONATHAN MATTHEW	From:	<u>1/1/202</u>	2 <u>2</u> To:	<u>3/28/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	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	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	Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	0.00

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				Reporting Period						
					From: To:					
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00		

PAGE 3

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)										
Name of Filing Committee or Candida	te		Rep	orting P	eriod					
			Froi	m:		Τα	:			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2			\$	0.00		

PART C Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate				Reporting Period				
		Fror	n:		Т):		
			D	ATE		AM	OUNT	
			мо	DAY	YEAR	\$	0.00	
State	Zip Code (Plu	s 4)						
•			Occupat	ion				
ce of Business	City			State		Zip Code	(Plus 4)	
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00	
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code	

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 Candidat	Name of Filing Committee or Candidate				Reporting Period					
			From:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description						•				
		_	.					PAGE TO	TAL	
Enter Grand Total of Part E on Sche	iule I, Detailed Su	immary Page,	Section	4.			\$		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		
HACKENBURG, JONATHAN MATTHEW	From:	<u>1/1/2022</u> To:	<u>3/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ΓF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Cano	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 Section 2.	Schedule II, In-Kii	nd Contributions Detai	led Sum	mary Pag	je,	F	PAGE TOTAL		
						\$	0.00		

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period				
						То:			
					DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address			-				\$ 0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor		•		Occupa	ation				
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution		
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period				
	From			То:					
				DATE			AMOUNT		
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
Enter Grand Tatal of Evnanditures	n Dage 1. Denort C	Cover Dage Item [<u> </u>				PAGE TOTAL		
Enter Grand Total of Expenditures of	m Page 1, Report C	lover Page, Item L				\$	0.00		